

**FLORIDA DEPARTMENT OF ELDER AFFAIRS
CONTRACT**

OLDER AMERICANS ACT TITLE III

THIS CONTRACT is entered into between the State of Florida Department of Elder Affairs (Department) and Areawide Council on Aging of Broward County, Inc. (Contractor), and collectively referred to as the "Parties." The term Contractor for this purpose may designate a Vendor, Subgrantee or Subrecipient.

WITNESSETH THAT:

WHEREAS, the Department has determined that it is in need of certain services as described herein; and

WHEREAS, the Contractor has demonstrated that it has the requisite expertise and ability to faithfully perform such services as an independent Contractor of the Department.

NOW THEREFORE, in consideration of the services to be performed and payments to be made, together with the mutual covenants and conditions hereinafter set forth, the Parties agree as follows:

1. Purpose of Contract

The purpose of this contract is to provide services in accordance with the terms and conditions specified in this contract including all attachments, forms, exhibits and references incorporated, which constitute the contract document.

2. Incorporation of Documents within the Contract

The contract will incorporate attachments, proposal(s), state plan(s), grant agreements, relevant Department handbooks, manuals or desk books and Master Contract number JM014, as an integral part of the contract, except to the extent that the contract explicitly provides to the contrary. In the event of conflict in language among any of the documents referenced above, the specific provisions and requirements of the contract document(s) shall prevail over inconsistent provisions in the proposal(s) or other general materials not specific to this contract document and identified attachments.

3. Term of Contract

This contract shall begin at twelve (12:00) A.M., Eastern Standard Time **January 1, 2016** or on the date the contract has been signed by the last party required to sign it, whichever is later. It shall end at eleven fifty-nine (11:59) P.M., Eastern Standard Time **December 31, 2016**.

4. Contract Amount

The Department agrees to pay for contracted services according to the terms and conditions of this contract in an amount not to exceed **\$6,794,049.00**, or the rate schedule, subject to the availability of funds. Any costs or services paid for under any other contract or from any other source are not eligible for payment under this contract.

5. Renewals

By mutual agreement of the Parties, in accordance with s. 287.058(1)(g), F.S., the Department may renew the contract for a period not to exceed three years, or the term of the original contract, whichever is longer. The renewal price, or method for determining a renewal price, is set forth in the bid, proposal, or reply. No other costs for the renewal may be charged. Any renewal is subject to the same terms and conditions as the original contract and contingent upon satisfactory performance evaluations by the Department and the availability of funds.

6. Official Payee and Representatives (Names, Addresses, and Telephone Numbers):

a.	The Contractor name, as shown on page 1 of this contract, and mailing address of the official payee to whom the payment shall be made is:	Areawide Council on Aging of Broward County, Inc. 5300 Hiatus Road Sunrise, FL 33351
b.	The name of the contact person and street address where financial and administrative records are maintained is:	Natasha Elfarghali, Fiscal Officer, 5300 Hiatus Road Sunrise, FL 33351
c.	The name, address, and telephone number of the representative of the Contractor responsible for administration of the program under this contract is:	Edith Lederberg, Executive Director 5300 Hiatus Road Sunrise, FL 33351 954-745-9567
d.	The section and location within the Department where Requests for Payment and Receipt and Expenditure forms are to be mailed is:	Department of Elder Affairs Division of Financial Administration 4040 Esplanade Way, Suite 215 Tallahassee, FL 32399-7000
e.	The name, address, and telephone number of the Contract Manager for this contract is:	Natali Ramirez 4040 Esplanade Way, Suite 350E Tallahassee, FL 32399-7000 850-414-2131
Upon change of representatives (names, addresses, telephone numbers) by either party, notice shall be provided in writing to the other party and the notification attached to the originals of this contract.		

7. All Terms and Conditions Included:

This contract and its Attachments, I, II, III, IV, VII, VIII, IX, X, XI, XII, F, K and any exhibits referenced in said attachments, together with any documents incorporated by reference, contain all the terms and conditions agreed upon by the Parties. There are no provisions, terms, conditions, or obligations other than those contained herein, and this contract shall supersede all previous communications, representations or agreements, either written or verbal between the Parties.

By signing this contract, the Parties agree that they have read and agree to the entire contract.

IN WITNESS THEREOF, the Parties hereto have caused this contract to be executed by their undersigned officials as duly authorized.

CONTRACTOR: AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.

SIGNED BY:

Theodora Williams

NAME: THEODORA WILLIAMS

TITLE: 1ST VICE PRESIDENT

DATE:

12-29-2015

Federal Tax ID: 59-1529419 001

**STATE OF FLORIDA,
DEPARTMENT OF ELDER AFFAIRS**

SIGNED BY:

Richard Prudom

NAME: RICHARD PRUDOM

TITLE: DEPUTY SECRETARY/CHIEF OF STAFF

DATE:

12/30/15

INDEX OF ATTACHMENTS

<u>ATTACHMENT I</u>	
<u>STATEMENT OF WORK</u>	4
<u>EXHIBIT 1 SUMMARY OF STANDARDS FOR PROFESSIONAL INFORMATION & REFERRAL</u>	22
<u>ATTACHMENT II</u>	
<u>CERTIFICATION REGARDING LOBBYING</u>	35
<u>ATTACHMENT III</u>	
<u>FUNDING SUMMARY</u>	36
<u>ATTACHMENT IV</u>	
<u>CERTIFICATION REGARDING DEBARMENT</u>	38
<u>ATTACHMENT VII</u>	
<u>BUDGET SUMMARY</u>	39
<u>ATTACHMENT VIII</u>	
<u>INVOICE SCHEDULE</u>	40
<u>EXHIBIT 1 INFORMATION AND REFERRAL REPORT SCHEDULE</u>	41
<u>EXHIBIT 2 TITLE III PROGRAMMATIC REPORTING SCHEDULE</u>	42
<u>ATTACHMENT IX</u>	
<u>REQUEST FOR PAYMENT</u>	43
<u>ATTACHMENT X</u>	
<u>EXHIBIT 1 RECEIPTS AND EXPENDITURE REPORT</u>	44
<u>EXHIBIT 2 RECEIPTS AND EXPENDITURE REPORT</u>	45
<u>EXHIBIT 3 RECEIPTS AND EXPENDITURE REPORT</u>	46
<u>EXHIBIT 4 RECEIPTS AND EXPENDITURE REPORT</u>	47
<u>EXHIBIT 5 RECEIPTS AND EXPENDITURE REPORT</u>	48
<u>EXHIBIT 6 RECEIPTS AND EXPENDITURE REPORT</u>	49
<u>ATTACHMENT XI</u>	
<u>COMPUTATION OF CARRYFORWARD AND OVERADVANCE OAA TITLE III</u>	50
<u>ATTACHMENT XII</u>	
<u>COST REIMBURSEMENT SUMMARY</u>	51
<u>ATTACHMENT F</u>	
<u>DOEA Cost Analysis For Non-Competitively Procured Contracts in Excess of Category II</u>	52
<u>Exhibit 1 INSTRUCTIONS: Cost Analysis For Non-Competitively Procured Contracts In Excess</u> <u>Of Category II</u>	53
<u>ATTACHMENT K</u>	
<u>SERVICE RATE REPORT</u>	54

**ATTACHMENT I
STATEMENT OF WORK**

I. SERVICES TO BE PROVIDED

A. Definitions of Terms

1. Contract Acronyms

Area Agency on Aging (AAA)
Activities of Daily Living (ADL)
Alliance of Information & Referral Systems (AIRS)
Assessed Priority Consumer List (APCL)
Adult Protective Services (APS)
Client Information and Registration Tracking System (CIRTS)
Chronic Disease Self-Management Education (CDSME)
Chronic Disease Self-Management Program (CDSMP)
Evidence-Based Disease Prevention and Health Promotion (EBDPHP)
Information and Referral (I & R)
Instrumental Activities of Daily Living (IADL)
National Council on Aging (NCOA)
Older Americans Act (OAA)
Planning and Service Area (PSA)

2. Program Specific Terms

Area Plan: A plan developed by the AAA outlining a comprehensive and coordinated service delivery system in its PSA in accordance with Section 306 (42 U.S.C. 3026) of the OAA and Department instructions.

Area Plan Update: A revision to the Area Plan wherein the AAA enters OAA specific data in CIRTS. An update may also include other revisions to the Area Plan as instructed by the Department.

Child: An individual who is not more than eighteen (18) years of age or an individual with disability.

Criteria: A standard which the Administration on Aging/Administration for Community Living set for the Title III D Program. AoA/ACL's standard criterion consists of three tiers: Minimal Criteria, Intermediate Criteria, and Highest Level Criteria.

Family Caregiver: An adult family member, or another individual, who is an informal provider of in-home and community care to an older individual.

Frail: When an older individual is unable to perform at least two ADLs without substantial human assistance, including verbal reminding, physical cueing or supervision; or due to cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual.

Grandparent: A grandparent or step-grandparent of a child, or a relative of a child by blood, marriage or adoption and who lives with the child; is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child; and has a legal relationship to the child, such as legal custody or guardianship, or is raising the child informally.

Living Healthy: Also known as CDSMP for the State of Florida.

B. General Description

1. General Statement

The OAA Program is a federal program initiative that provides assistance to older persons and caregivers and is the only federal supportive services program directed solely toward improving the lives of older people. The OAA Program provides a framework for a partnership among the different levels of government and the public and private sectors with a common objective, improving the quality of life for all older individuals by helping them to remain independent and productive. The primary purpose of the OAA Program is to foster the development and implementation of comprehensive and coordinated systems to serve older individuals. The OAA Program uses these systems to assist older individuals to attain and maintain maximum independence and dignity in a home environment and allows for the capability of self-care with appropriate supportive services.

2. Authority

All applicable federal laws, regulations, action transmittals, program instructions, review guides and similar documentation related to the following:

Catalog of Federal Domestic Assistance No. 93.043, 93.044, 93.045, and 93.052
Older Americans Act of 1965, as amended;
Rule 58A-1, Florida Administrative Code (FAC); and
Section 430.101, Florida Statutes (F.S.).

3. Scope of Service

The Contractor is responsible for the programmatic, fiscal, and operational management of the OAA Title IIIB, Title IIIC1, Title IIIC2, Title IIID, and Title IIIE Programs within its designated PSA. This Scope of Service includes planning, coordinating and assessing the needs of older persons, and assuring the availability and quality of services. The services shall be provided in a manner consistent with, and described in, both the current Contractor's Area Plan Update and the current Florida Department of Elder Affairs Programs and Services Handbook.

4. Major Program Goals

The major goals of the OAA Program are to improve the quality of life for older individuals, preserve their independence and prevent or delay more costly institutional care. These goals are achieved through the implementation of a comprehensive and coordinated service system that provides a continuum of service alternatives that meet the diverse needs of elders and their caregivers.

C. Clients to be Served

1. General Statement

Preference shall be given to those with the greatest economic and social need, with particular attention to low-income older individuals, including those that are low-income minorities, have limited English proficiency, and older individuals residing in rural areas.

a. OAA Title III, General

Consumers shall not be dually enrolled in an OAA Program and a Medicaid capitated Long-Term Care Program, with the exception of consumers in need of OAA Legal Assistance services and OAA Congregate Nutrition Services, including transportation to and from congregate meal sites.

b. OAA Title IIIB, Supportive Services

- (1) Individuals must be age sixty (60) or older; and
- (2) Information and Referral/Assistance services are provided to individuals regardless of age.

c. OAA Titles IIIC1 and IIIC2, Nutrition Services, General

General factors that shall be considered in establishing priority for nutrition services, include those older persons who meet the following:

- (1) Cannot afford to eat adequately;
- (2) Lack the skills or knowledge to select and prepare nourishing and well-balanced meals;
- (3) Have limited mobility which may impair their capacity to shop and cook for themselves; or
- (4) Have a disabling illness or physical condition requiring nutritional support or have been screened at a high nutritional risk.

d. OAA Title IIIC1, Congregate Nutrition Services

In addition to meeting the general nutrition services eligibility requirements listed in Section I.C.1.c, above, individuals must be mobile, not homebound, and physically, mentally, and medically able to attend a congregate nutrition program. Individuals eligible to receive congregate meals include the following:

- (1) Individuals age sixty (60) or older;
- (2) Any spouse (regardless of age) who attends the dining center with his/her eligible spouse;
- (3) Persons with a disability, regardless of age, who reside in a housing facility occupied primarily by older individuals where congregate nutrition services are provided;
- (4) Disabled persons who reside at home with and accompany an eligible person to the dining center; and
- (5) Volunteers, regardless of age, who provide essential services on a regular basis during meal hours.

e. OAA Title IIIC2, Home Delivered Nutrition Services

In addition to meeting the general nutrition services eligibility requirements as listed in Section I.C.1.c, individuals must be homebound and physically, mentally, or medically unable to attend a congregate nutrition program. Individuals eligible to receive home delivered meals include the following:

- (1) Individuals age sixty (60) or older who are homebound by reason of illness, disability or isolation;
- (2) The spouse of a homebound eligible individual, regardless of age, if the provision of the collateral meal supports maintaining the person at home;
- (3) Individuals with disabilities, regardless of age, who reside at home with eligible individuals and are dependent on them for care; and
- (4) Persons at nutritional risk who have physical, emotional or behavioral conditions, which would make their presence at the congregate site inappropriate; and persons at nutritional risk who are socially or otherwise isolated and unable to attend a congregate nutrition site.

f. OAA Title IIID, Disease Prevention and Health Promotion Services

- (1) Target individuals age sixty (60) or older; and
- (2) Priority will be given to individuals residing in medically underserved areas.

g. OAA Title III-E, Caregiver Support Services

Eligibility for OAA Title III-E, Caregiver Support Services, are as follows:

- (1) Family caregivers of individuals age sixty (60) or older;
- (2) Grandparents [age fifty five (55) or older] or older individuals [age fifty five (55) or older] who are relative caregivers;
- (3) Priority will be given to family caregivers who provide care for individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction and for grandparents or older individuals who are relative caregivers who provide care for children with severe disabilities; and
- (4) For respite and supplemental services, a family caregiver must be providing care for an older individual who meets the definition of the term "frail" as defined in this contract, I.A.2.

II. MANNER OF SERVICE PROVISION**A. Service Tasks**

In order to achieve the goals and objectives of the OAA Program, the Contractor shall ensure the following Service Tasks are performed at the level specified in this contract.

1. Client Eligibility Determination

The Contractor shall ensure that applicant data is evaluated to determine eligibility. Eligibility to become a client is based on meeting the requirements described in this Contract.

2. Targeting And Screening Of Service Delivery For New Clients

The Contractor shall develop and implement policies and procedures consistent with OAA targeting and screening criteria.

3. Delivery Of Services To Eligible Clients

The Contractor shall ensure the provision of a continuum of services that meets the diverse needs of elders and their caregivers. The Contractor shall ensure the performance and report performance of the following services are in accordance with the current Florida Department of Elder Affairs Programs and Services Handbook. The services funded pursuant to this contract are in accordance with the OAA, Title III, Sections 321, 331, 336, 361, and 373 as follows:

Section 321, Title IIIB Supportive Services;

Section 331, Title IIIC1 Congregate Nutrition Services;

Section 336, Title IIIC2 Home Delivered Nutrition Services;

Section 361, Title IIID Disease Prevention and Health Promotion Services;

Section 373, Title IIIE Caregiver Support Services; and

Sections 321 and 373 – Information and Referral/Assistance Access Services (Elder Helplines)

- a. Supportive Services (IIIB Program)** - Supportive services include a variety of community-based and home-delivered services that support the quality of life for older individuals by helping them remain independent and productive. Services include the following:

REMAINDER OF PAGE INTENTIONALLY LEFT BLANK

- | | |
|------------------------------------------------------------|---------------------------------|
| (1) Adult Day Care/Adult Day Health Care; | (17) Recreation; |
| (2) Caregiver Training/Support; | (18) Emergency Alert Response; |
| (3) Case Aid/Case Management; | (19) Escort; |
| (4) Chore Services; | (20) Health Support; |
| (5) Companionship; | (21) Home Health Aid; |
| (6) Counseling (Gerontological and Mental Health); | (22) Homemaker; |
| (7) Education/Training; | (23) Housing Improvement; |
| (8) Legal Assistance; | (24) Information; |
| (9) Material Aid; | (25) Intake; |
| (10) Occupational Therapy; | (26) Interpreter/Translating; |
| (11) Outreach; | (27) Referral/Assistance; |
| (12) Personal Care; | (28) Respite Services; |
| (13) Physical Therapy; | (29) Screening/Assessment; |
| (14) Shopping Assistance; | (30) Speech Therapy; |
| (15) Skilled Nursing; | (31) Telephone Reassurance; and |
| (16) Specialized Medical Equipment, Services, and Supplies | (32) Transportation |

b. Congregate Nutrition Services (IIC1 Program)

Nutrition Services are provided in congregate settings and are designed to reduce hunger and food insecurity, promote socialization and the health and well-being of older individuals by assisting them to gain access to nutrition and other disease prevention and health promotion services. Services include the following:

- (1) Congregate meals
- (2) Congregate meals screening;
- (3) Nutrition education and nutrition counseling; and
- (4) Outreach.

c. Home Delivered Nutrition Services (IIC2 Program)

In-home nutrition services are provided to reduce hunger and food insecurity; promote socialization and the health and well-being of older individuals by assisting such individuals to gain access to nutrition and other disease prevention and health promotion services. Services include the following:

- (1) Home delivered meals;
- (2) Nutrition education and counseling;
- (3) Outreach; and
- (4) Screening/Assessment.

d. Disease Prevention and Health Promotion Services (Title IID Program)

Evidence-Based Disease Prevention and Health Promotion (EBDPHP) services have been demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability and/or injury among older adults, and proven effective with older adult population. The Administration on Community Living (ACL) defines EBDPHP services as meeting highest-level criteria. Only services that meet the highest-level criteria are allowable under the IID Program. EBDPHP services must be delivered in accordance with the fidelity of the program, as described in the DOEA Programs and Services Handbook Attachment A. Evidence based program include the following:

- | | |
|------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| (1) A Matter of Balance (Highest-Level); | (14) Healthy Moves for Aging Well (Highest Level); |
| (2) Active Living Every Day (Highest-Level); | (15) HomeMeds (Highest-Level) |
| (3) Arthritis Foundation Exercise Program (Highest-Level); | (16) Program to Encourage Active Rewarding Lives for Seniors (PEARLS) (Highest-level); |
| (4) Arthritis Self-Management (Self Help) Program (Highest-Level); | (17) Powerful Tools for Caregivers (Highest-Level); |
| (5) Brief Intervention & Treatment for Elders (BRITE) (Highest-Level); | (18) Programa de Manejo Personal de la Artritis (Highest-Level); |
| (6) Chronic Disease Self-Management Program (Highest-Level); | (19) Programa de Manejo Personal de la Diabetes (Highest-Level); |
| (7) Chronic Pain Self-Management Program (Highest-Level); | (20) Stay Active and Independent for Life (SAIL); |
| (8) Diabetes Self-Management Program (Highest-Level); | (21) Stepping On (Highest-Level); |
| (9) EnhanceFitness (Highest-Level); | (22) Tai Chi/Tai Ji Quan Moving for Better Balance (Highest-Level); |
| (10) Enhance Wellness (Highest-Level); | (23) Stress Busting Program for Family Caregivers; |
| (11) Fit and Strong! (Highest-Level); | (24) Tomando Control de su Salud (Highest-Level); |
| (12) Healthy Eating Every Day (Highest-Level); | (25) Un Asunto de Equilibrio (Highest-Level); |
| (13) Healthy Ideas (Highest-Level); | and |
| | (26) Walk with Ease (Highest-Level). |

(i) **Development of Partnerships and Collaborations**

The Contractor shall collaborate and partner with organizations to extend the reach of EBDPHP services. Partnerships and Collaborations may be developed with Florida Department of Health; the Florida Department of Children and Families; the Department of Agriculture's Nutrition Program; insurance companies; Centers for Disease Control and Prevention; Area Health Education Centers; local health councils; public and private universities; federally qualified health clinics; county health Departments; and local Communities for a Lifetime initiative participants. Partnerships shall be designed to stimulate innovation of new approaches and activities in EBDPHP services, development of greater capacity, and leverage other funding sources. Partnerships shall also address building and sustaining an infrastructure for the dissemination of EBDPHP services. This includes, but is not limited to, recruitment of trainers and participants, covering costs for licenses, and replicating program fidelity.

The Contractor shall document, and provide upon request, evidence of partnerships created formally through Memorandums of Agreement or Understanding or informally through emails and phone calls. Contractor will be required to keep track of partnerships in the Monthly Programmatic Report. Each month the Contractor shall review and provide updates as necessary.

e. **Caregiver Support Services (IIIE Program)**

The following services are intended to provide direct help to caregivers, assist in the areas of health, nutrition and financial literacy, and assist caregivers in making decisions and problem solving related to their caregiving roles and responsibilities:

- (1) Adult Day Care/Adult Day Health Care;
- (2) Caregiver Training/Support;
- (3) Counseling (Gerontological and Mental Health);
- (4) Education/Training;
- (5) Financial Risk Reduction (Assessment and Maintenance);
- (6) Information;
- (7) Intake;
- (8) Outreach;
- (9) Powerful Tools for Caregivers;
- (10) Referral/Assistance;
- (11) Respite Services;
- (12) Screening/Assessment;
- (13) Stress-Busting Program for Family Caregivers; and
- (14) Transportation

(i) Caregiver Support Supplemental Services (IIIES Program)

At least ten (10) percent, but no more than twenty (20) percent, of the total Title III E funds shall be used to provide supplemental support services. The following services are provided to complement the care provided by caregivers:

- (1) Chore Services;
- (2) Housing Improvement;
- (3) Legal Assistance;
- (4) Material Aid; and
- (5) Specialized Medical Equipment, Services and Supplies.

(ii) Caregiver Support Grandparent Services (IIIEG Program)

At least five (5) percent, but no more than ten (10) percent, of the total Title III E funds shall be used to provide support services to grandparents and older individuals who are relative caregivers. Services for grandparents or older individuals who are relative caregivers designed to help meet their caregiving obligations include the following:

- (1) Caregiver Training/Support;
- (2) Child Day Care;
- (3) Counseling (Gerontological and Mental Health);
- (4) Education/training;
- (5) Legal Assistance;
- (6) Outreach;
- (7) Referral/Assistance;
- (8) Screening/Assessment;
- (9) Sitter; and
- (10) Transportation.

4. Monitoring The Performance Of Its Subcontractors

- a. The Contractor shall monitor at least once per year each of its subcontractors, subrecipients, vendors, and/or consultants paid from funds provided under this contract. The Contractor shall perform fiscal, administrative and programmatic monitoring to ensure contractual compliance, fiscal accountability, programmatic performance and compliance with applicable state and federal laws and regulations. The Contractor shall monitor to ensure that time schedules are met, the budget and scope of work are accomplished within the specified time periods and other performance goals stated in this contract are achieved.
- b. **Subcontractor Outreach Reporting Requirements** – The Contractor shall document its oversight of subcontractor performance of outreach activities, by establishing a uniform reporting format that includes the following: number and type of provider events or activities; date and location; total number of participants at each event or activity; individual service needs identified; and referral

sources or information provided. The Contractor shall require subcontractors to use this format for reporting on outreach activities at least semi-annually.

5. Information and Referral/Assistance Access Services (Elder Helplines)

The Contractor shall ensure, through training and periodic quality assurance, that Elder Helpline Information and Referral/Assistance services adhere to the Standards for Professional Information & Referral, ATTACHMENT I, Exhibit 1 to this contract. The Department's standards are based on the current AIRS standards. The standards have been amended by the Department to address the unique needs of the Elder Helpline Information and Referral system.

6. Grievance and Complaint Procedures

Grievance Procedures

The Contractor shall comply with and ensure subcontractor compliance with the Minimum Guidelines for Recipient Grievance Procedures, Appendix D, Department of Elder Affairs Programs and Services Handbook, to address complaints regarding the termination, suspension or reduction of services, as required for receipt of funds.

a. Complaint Procedures

The Contractor shall develop and implement complaint procedures and ensure that subcontractors develop and implement complaint procedures to process and resolve client dissatisfaction with services. Complaint procedures shall address the quality and timeliness of services, provider and direct service worker complaints, or any other advice related to complaints other than termination, suspension or reduction in services that require the grievance process as described in Appendix D, Department of Elder Affairs Programs and Services Handbook. The complaint procedures shall include notification to all clients of the complaint procedure and include tracking the date, nature of complaint, and the determination of each complaint.

b. Legal Provider Grievance Procedures

The Contracts shall ensure that legal providers have an internal grievance procedure that addresses both denial of service and complaints by clients about manner or quality of legal assistance. Grievance policies that comport with requirements of the Legal Services Corporation are sufficient to meet this standard. At a minimum, the procedure must provide applicants with:

- (1) Adequate notice of the grievance procedures;
- (2) Information on how to file a grievance or complaint, and;
- (3) An opportunity for review of the complaint by the Legal Provider's Executive Director or the Executive Director's designee.
- (4) The Contractor may not serve in an appellate capacity or otherwise interfere in the grievance review process for legal providers. However, the Contractor may request that legal providers maintain a file of complaints and statements of disposition of complaints, with redacted client identifying information, for examination by the Contractor during monitoring.

B. Staffing Requirements

- 1. Staffing Levels** – The Contractor shall dedicate the staff necessary as required to meet the obligations of the contract.
- 2. Professional Qualifications** – The Contractor shall ensure that the staff responsible for performing this contract have the qualifications as specified in the DOEA Programs and Services Handbook.

3. Subcontractors –

Use of Subcontractors

- a. This contract involves the use of subcontractors or third party as stipulated in the Contractor's Area Plan Update and approved by DOEA. The Contractor shall not delay the implementation of its agreements with the subcontractors. If any circumstances occur that may result in a delay for a period of 60 days or more of the initiation of the subcontract or in the performance of the subcontractor, the Contractor shall notify the DOEA Contract Manager and the Department's Chief Financial Officer in writing of such delay.
- b. The Contractor shall not permit a subcontractor to perform services related to this agreement without having a binding subcontractor agreement executed. In accordance with section 23.1 of the Master Contract, the Department will not be responsible or liable for any obligations or claims resulting from such action.
- c. The Contractor shall submit a copy of all subcontracts to the DOEA Contract Manager within 30 days of the subcontract being executed.
- d. The Contractor shall require subcontractors to enter all required data per the Department's CIRTIS Policy Guidelines for clients and services in the CIRTIS database. The data must be entered into the CIRTIS before the subcontractors submit their Request for Payment and Expenditure Reports to the Contractor. The Contractor shall establish time frames to ensure compliance with due dates for the Requests for Payment and Expenditure Reports to the Department.
- e. The Contractor shall require subcontractors to run monthly CIRTIS reports and verify client and service data in the CIRTIS is accurate. This report must be submitted to the Contractor with the monthly Request for Payment and Expenditure Report and must be reviewed by the Contractor before the subcontractor's Request for Payment and Expenditure Reports can be approved by the Contractor.

C. Service Location and Equipment

1. Service Times

The Contractor shall ensure the provision of the services listed in the contract during normal business hours unless other times are more appropriate to meet the performance requirements of the contract, and it shall monitor its subcontractors to ensure they are available to provide services during hours responsive to client needs and during those times which best meet the needs of the relevant service community.

D. Deliverables

1. Services and Units of Services

The Contractor shall ensure the provision of the services described in the contract in accordance with the current Department of Elder Affairs Programs and Services Handbook and the service tasks described in Section II.A. The chart below lists the services allowed and the units of measurement. Units of service will be paid pursuant to the rate established in the Contractor's 2016 Area Plan Update and as updated in **ATTACHMENT K**, and approved by the Department.

Services		Unit of Service
Adult Day Care/Adult Day Health Care Caregiver Training/Support Case Aid/Case Management Child Day Care Chore Services Companionship Congregate Meals Screening Counseling Services EnhanceFitness EnhanceWellness Financial Risk Reduction Services Health Support Healthy Moves for Aging Well Home Health Aide Homemaker HomeMeds Housing Improvement	Intake Interpreter/Translating Legal Assistance Mental Health Counseling/Screening Nutrition Counseling Occupational Therapy Personal Care Physical Therapy Program to Encourage Active, Rewarding Lives for Seniors (PEARLS) Recreation Respite Services Screening/Assessment Sitter Skilled Nursing Services Speech Therapy Stay Active and Independent for Life	Hour
Emergency Alert Response		Day
A Matter of Balance Active Living Every Day Arthritis Foundation Exercise Program Arthritis Foundation Tai Chi Program (Tai Chi for Arthritis) Arthritis Self-Management Program Brief Intervention & Treatment for Elders (BRITE) Chronic Disease Self-Management Program Chronic Pain Self-Management Diabetes Self-Management Program Education/Training Fit and Strong! Healthy Eating Every Day Healthy Eating for Successful Living in Older Adults Healthy Ideas	Information Material Aid Nutrition Education Outreach Powerful Tools for Caregivers Programa de Manejo Personal de la Artritis Programa de Manejo Personal de la Diabetes Referral/Assistance Specialized Medical Equipment, Services and Supplies Stepping On Tai Chi/Tai Ji Quan Moving for Better Balance Telephone Reassurance Tomando Control de su Salud Un Asunto de Equilibrio Walk with Ease	Episode
Escort Shopping Assistance Transportation		One-Way Trip
Congregate and Home Delivered Meals		Meal

2. Reports

The Contractor shall respond to additional routine and/or special requests for information and reports required by the Department in a timely manner as specified by the Department. The Contractor shall establish due dates for any subcontractors that permit the Contractor to meet the Department's reporting requirements.

- a. Programmatic Operations/Administration-** The Contractor shall ensure the provision of services, as outlined in this contract, are in accordance with Department of Elder Affairs Programs and Services Handbook through its review of reports as outlined below:

- (1) Monthly review of subcontractors' surplus/deficit reports, and CIRTIS data accuracy reports;
- (2) Quarterly review of I&R Activity Reports;
- (3) Annual review of service cost reports;
- (4) At least annually and as needed to correlate with applicable contract amendments, update of the current Area Plan for OAA service units and completion of a DOEA Cost Analysis.

b. OAA Annual Volunteer Activity Report

The Contractor shall ensure the use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing such services. If possible, the Contractor shall work in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as organizations carrying out federal service programs administered by the Corporation for National and Community Service), in community service settings.

The Contractor shall submit an Annual Volunteer Activity Report electronically, on the internet, in a format provided by the Department's Office of Volunteer and Community Services. The Annual Volunteer Activity Report is due to the DOEA Contract Manager on a date established by the Department.

c. Client Information and Registration Tracking System (CIRTIS) Reports- Contractor shall input OAA-specific data into CIRTIS to ensure CIRTIS data accuracy. Contractor shall use CIRTIS-generated reports which include the following:

- (1) Client Reports;
- (2) Monitoring Reports;
- (3) Services Reports;
- (4) Miscellaneous Reports;
- (5) Fiscal Reports;
- (6) Aging Resource Center Reports; and
- (7) Outcome Measurement Reports.

d. Area Plan Update and All Revisions Thereto - The Contractor shall submit, for approval by the Department, an Area Plan Update, wherein the Contractor enters OAA-specific data in CIRTIS, as required by the Federal funding source.

e. Service Cost Reports - The Contractor shall require subcontractors to submit Annual Service Cost Reports, which reflect actual costs of providing each service by program. This Annual Service Cost Report provides information for planning and negotiating unit rates.

f. Surplus/Deficit Report - The Contractor shall submit a Consolidated Surplus/Deficit Report, in a format provided by the Department to the DOEA Contract Manager, by the 25th of each month. This Consolidated Surplus/Deficit Report is for all agreements and/or contracts between the Contractor and the Department and must include the following:

- (1) A list of all subcontractors and their current status regarding surplus/deficit;
- (2) The Contractor's detailed plan on how the surplus/deficit spending exceeding the threshold specified by the Department will be resolved;
- (3) Recommendations to transfer funds to resolve surplus/deficit spending;
- (4) Input from the Contractor's Board of Directors on resolution of spending issues, if applicable;
- (5) Number of clients currently on APCL that receive a priority ranking score of 4 or 5; and

(6) Number of clients currently on the APCL designated as Imminent Risk.

- g. Elder Helpline Reports** - The Elder Helpline shall provide Quarterly I &R Activity Reports to the Florida Department of Elder Affairs. Reports must include the data elements identified in **ATTACHMENT I, EXHIBIT 1, Standard 14: Data Analysis and Reporting**, and be submitted in accordance with **ATTACHMENT VIII, EXHIBIT 1**.
- h. OAA National Aging Program Information System (NAPIS) Report** - Data required for the OAA NAPIS Report that is not recorded in CIRTSS will be provided to the DOEA Contract Manager in the format and on the date established by the Department.
- i. DOEA Cost Analysis For Non-Competitively Procured Contracts In Excess of Category II** – In accordance with Florida Statutes 216.3475 and State of Florida Chief Financial Officer Memorandum No. 02 (released October 3, 2012), the Contractor will submit a completed DOEA Cost Analysis for Non-Competitively Procured Contracts In Excess of Category II identified as **ATTACHMENT F** by December 31, 2015. Instructions for completing the form are identified as **ATTACHMENT F, EXHIBIT 1**.
- j. Title IIID Reports** - The Contractor shall submit Monthly Programmatic Reports for EBDPHP services on the dates specified in **ATTACHMENT VIII EXHIBIT 2**. The DOEA Contract Manager will provide an Excel spreadsheet with the following tabs: Health and Wellness (one for each month); Success Story (reported only in May); Partnership (one tab updated as needed); and a Statistical Breakdown Page.

 - (1) Information provided in the Monthly Programmatic Report must match CIRTSS data and the Request for Payment.
 - (2) The Contractor shall review program documentation to ensure documentation is complete and adequately supports the information reported on the Monthly Programmatic Report prior to submitting a Request for Payment. The Contractor will attest to the review in the “comments” section of the Monthly Programmatic Report, and provide relevant information regarding the documentation as needed.
 - (3) Program documentation shall include all of the following elements: Sign-In Sheet or Attendance Log; flyers or documentation demonstrating efforts to recruit participants and promote EBDPHP services provided; current facilitator certificates; copy of program license (if applicable); and any forms required by the specific program.
 - (4) Contractor shall ensure that program documentation includes a Sign-In Sheet or Attendance Log with date, time, name of program, participant names, and name of program facilitator(s). If the Attendance Log does not include a space for participant signatures, additional program documentation must be included with participant signatures that matches the participant names and dates in the Attendance Log. Exceptions may be approved by DOEA Contract Manager. Requests must be made in writing and kept with program documentation.
 - (5) Participants will write and sign their name on program sign-in sheet or Attendance Log. Attendance Logs with participant names typed or written in by the same person will not be accepted as program documentation. If a participant refuses or is unable to write their own name and sign, the instructor may sign by proxy for the participant with a note on the sign-in sheet stating why it is necessary to do so (the note needs to be initialed and dated).
 - (6) The Contractor shall have a written fidelity monitoring plan, which includes observation of delivery of EBDPHP services. A note will be included in the Monthly Programmatic Report,

in the comments section, when a program has been observed. Documentation pertaining to the observation will be kept and provided to the Department upon request.

(7) Chronic Disease Self-Management Education (CDSME) Workshop data must be entered into the NCOAForce database.

(8) Contact the DOE Contract Manager in the event of an emergency or an exigent circumstance where the provider is unable to maintain an aspect of fidelity of the EBDPHP services (e.g., minimum or maximum number of participants) before the end of the workshop. At the discretion of the DOE Contract Manager, the service may be reimbursed under this contract; however, if the fidelity infraction is discovered after the program has finished, during the Request for Payment Process or a desk review; the Contractor may not be reimbursed for the workshop or shall be requested to reimburse the Department the cost of the workshop.

k. Program Highlights - The Contractor shall submit Program Highlights referencing specific events that occurred in FFY 2015 by September 15, 2016. The Contractor shall provide a new success story, quote, testimonial, or human-interest vignette. The highlights shall be written for a general audience, with no acronyms or technical terms. For all agencies or organizations that are referenced in the highlight, the Contractor shall provide a brief description of their mission or role. The active tense shall be consistently used in the highlight narrative, in order to identify the specific individual or entity that performed the activity described in the highlight. The Contractor shall review and edit Program Highlights for clarity, readability, relevance, specificity, human interest, and grammar, prior to submitting them to the Department.

k. Invoices - The Contractor shall submit complete and accurate monthly invoices as referenced in Section III, Method of Payment.

3. Records and Documentation

a. The Contractor shall maintain documentation to support Requests for Payment that shall be available to the Department or authorized individuals, such as Department of Financial Services, upon request.

b. CIRT Data and Maintenance

The Contractor shall ensure collection and maintenance of client and service information on a monthly basis from CIRT or any such system designated by the Department. Maintenance includes valid exports and backups of all data and systems according to Department standards.

c. Data Integrity and Back up Procedures

Each Contractor shall anticipate and prepare for the loss of information processing capabilities. The routine backing up of all data and software is required to recover from losses or outages of the computer system. Data and software essential to the continued operation of contractor functions must be backed up. The security controls over the backup resources shall be as stringent as the protection required of the primary resources. It is recommended that a copy of the backed up data be stored in a secure, offsite location.

d. Policies and Procedures for Records and Documentation

The Contractor shall maintain written policies and procedures for computer system backup and recovery and shall have the same requirement of its subcontractors. These policies and procedures shall be made available to the Department upon request.

E. Performance Specifications

1. Outcomes and Outputs (Performance Measures) – At a minimum, the Contractor must:

- a. The Contractor shall ensure the provision of the services described in this contract are in accordance with the current Florida Department of Elder Affairs Programs and Services Handbook and the Service Tasks described in Section II.A.
- b. The Contractor shall timely submit to the Department all documentation and reports described in **ATTACHMENT I**, Section II.D.
- c. The Contractor shall develop and document strategies in the Area Plan to support the Department's standard of performance achievement (as referenced on the Department website <http://floridafiscalportal.state.fl.us/PDFDoc.aspx?ID=9126>) including increases for the following:
 - (1) Percent of most frail elders who remain at home or in the community instead of going into a nursing home;
 - (2) Percent of APS referrals who are in need of immediate services to prevent further harm who are served within 72 hours;
 - (3) Percentage of active clients eating two or more meals per day;
 - (4) Percent of new service recipients whose ADL assessment score has been maintained or improved;
 - (5) Percent of new service recipients whose IADL assessment score has been maintained or improved;
 - (6) After service intervention, the percentage of caregivers who self-report being very confident about their ability to continue to provide care; and
 - (7) Percent of customers who are at imminent risk of nursing home placement who are served with community based services.
- d. The Contractor's performance of these measures will be reviewed and documented in the Department's Annual Programmatic Monitoring Reports.

2. Monitoring and Evaluation Methodology

The Department will review and evaluate the performance of the Contractor under the terms of this contract. Monitoring shall be conducted through direct contact with the Contractor through telephone, in writing, or an on-site visit. The Department's determination of acceptable performance shall be conclusive. The Contractor agrees to cooperate with the Department in monitoring the progress of completion of the service tasks and deliverables. The Department may use, but is not limited to, one or more of the following methods for monitoring:

- a. Desk reviews and analytical reviews;
- b. Scheduled, unscheduled, and follow-up on-site visits;
- c. Client visits;
- d. Review of independent auditor's reports;
- e. Review of third-party documents and/or evaluation;

- f. Review of progress reports;
- g. Review of customer satisfaction surveys;
- h. Agreed-upon procedures review by an external auditor or consultant;
- i. Limited-scope reviews; and
- j. Other procedures as deemed necessary.

3. Performance Definitions

“Work day” shall mean a provider’s staff member’s eight (8) hour work period, unless specifically noted otherwise “Day” shall mean a calendar day, unless specifically noted otherwise.

F. Contractor Responsibilities

1. Contractor Unique Activities

All service tasks and deliverables pursuant to this contract are solely and exclusively the responsibility of the Contractor, and for which, by execution of the contract, the Contractor agrees to be held accountable; and

2. Coordination with Other Providers and/or Entities

Notwithstanding that services for which the Contractor is held accountable involve coordination with other entities in performing the requirements of the contract; the failure of other entities does not alleviate the Contractor from any accountability for tasks or services that the Contractor is obligated to perform pursuant to this contract.

G. Departmental Responsibilities

1. **Department Obligations** - The Department will provide technical support to assist the Contractor in meeting the requirements of this contract.
2. **Department Determinations** - The Department reserves the exclusive right to make certain determinations in the tasks and approaches. The absence of the Department setting forth a specific reservation of rights does not mean that all other areas of the contract are subject to mutual agreement.

III.METHOD OF PAYMENT

A. Payment Method Used - The Method of Payment for this contract is a combination of fixed-fee/unit rate, cost reimbursement, and advance payments, subject to the availability of funds and Contractor performance. The Department will pay the Contractor upon satisfactory completion of the Tasks/Deliverables, as specified in Section II, Manner of Service Provision, and in accordance with other terms and conditions of the contract.

1. **Fixed Fee/Unit Rate** – Payments for Fixed Fee/Unit Rate shall not exceed amounts established in **Attachment K**.
2. **Cost Reimbursement** –The Contractor agrees to distribute funds as detailed in the Area Plan Update and the **Budget Summary, ATTACHMENT VII**, to this contract. Any changes in the total amounts of the funds identified on the Budget Summary form require a contract amendment. Payment may be authorized only for allowable expenditures, which are in accordance with the limits specified in **ATTACHMENT VII**. All Cost Reimbursement Request for Payment must include the actual Expenditure Reports beginning with the first month of the contract.

B. Advance Payments - The Contractor may request up to two (2) months of advances at the start of the contract period to cover program administrative and service costs. The payment of an advance will be contingent upon the sufficiency and amount of funds released to the Department by the State of Florida ("budget release"). The Contractor's requests for advance require the approval of the DOEA Contract Manager. The Contractor shall provide the DOEA Contract Manager documentation justifying the need for an advance and describing how the funds will be distributed. If sufficient budget is available, the Department will issue approved advanced payments after January 1st of the contract year.

1. Any advanced payments the Contractor requested for subcontractors must be distributed within seven days of receipt of payment from the Department. The Contractor shall submit to the Department documentation to support full distribution of advanced funds with report number 5, due to the Department on April 15, 2016, in accordance with the **Invoice Schedule, ATTACHMENT VIII** to this contract.
2. All advanced payments retained by the Contractor must be fully expended no later than March 31, 2016. Any portion of advanced payments not expended must be recouped on the Request for Payment, report number 5, due to the Department on April 15, 2016, in accordance with the **Invoice Schedule, ATTACHMENT VIII** to this contract.
3. All advance payments made to the Contractor shall be reimbursed to the Department as follows: one-tenth of the advance payment received shall be reported as an advance recoupment on each Request for Payment, starting with report number five, in accordance with the **Invoice Schedule, ATTACHMENT VIII** to this contract.
4. Interest earned on advances must be identified separately by source of funds, state or federal. Contractors shall maintain advances of federal funds in FDIC interest bearing accounts unless otherwise exception is made in accordance with 45 CFR 74.22(k). Earned interest must be returned to the Department at the end of each quarter of the contract period.

C. Final Invoice Instructions-The Contractor shall submit the final Request for Payment to the Department no later than March 1, 2017.

D. Method of Invoice Payment

Payment shall be made upon the Contractor's presentation of an invoice subsequent to the acceptance and approval by the Department of the deliverables shown on the invoice. The form and substance of each invoice submitted by the Contractor shall be as follows:

1. Have a Remittance Address – this must correspond exactly to the "Remit To" address provided to MFMP during registration;
2. Request payment for services as established in **ATTACHMENT K** of the contract;
3. The Contractor shall consolidate all Request for Payment from subcontractors and Expenditure Reports that support requests for payment and shall submit to the Department using forms **Request for Payments (ATTACHMENT IX)**, **Receipt and Expenditure Reports (ATTACHMENT X)**, and **Cost Reimbursement Summary (ATTACHMENT XII)**.
4. The Contractor shall include with its fixed fee/unit rate portion of the invoice, the units of services provided based on rates as established in **ATTACHMENT K** of the contract, number of clients, and the rates for the services provided in conformance with the requirements as described in the deliverables and service tasks; and

5. All Requests for Payment shall be based on the submission of actual monthly Expenditure Reports beginning with the first month of the contract. The schedule for submission of advance requests (when available) and invoices is **Invoice Schedule, ATTACHMENT VIII.**

E. Financial Consequences

1. Contractor shall ensure 100% of the deliverables identified in SECTION II – MANNER OF SERVICE PROVISION are performed pursuant to contract requirements, and as described in Section II.D. are identified as major deliverables in this contract.
2. If at any time the Contractor is notified by the DOEA Contract Manager that it has failed to correctly, completely, or adequately perform these major deliverables, the Contractor will have 10 days to submit a Corrective Action Plan (“CAP”) to the DOEA Contract Manager that addresses the deficiencies and states how the deficiencies will be remedied within a time period approved by the DOEA Contract Manager. The Department shall assess a Financial Consequence for Non-Compliance on the Contractor for each deficiency identified in the CAP which is not corrected pursuant to the CAP. The Department will also assess a Financial Consequence for failure to timely submit a CAP.
3. In the event Contractor fails to correct an identified deficiency within the approved time period specified in the CAP, the Department shall deduct, from the payment for the invoice of the following month, 1% of the monthly value of the administrative funds in the contract for each day the deficiency is not corrected. The Department shall also deduct, from the payment for the invoice of the following month, 1% of the monthly value of the administrative funds in the contract for each day the Contractor fails to timely submit a CAP.
4. If Contractor fails to timely submit a CAP, the Department shall deduct 1% of the monthly value of the administrative funds in the contract for each day the CAP is overdue, beginning the 11th day after notification by the DOEA Contract Manager of the deficiency. The deduction will be made from the payment for the invoice of the following month.
5. **Remedies for Nonconforming Services**
The Contractor shall ensure that all goods and/or services provided under this contract are delivered timely, completely and commensurate with required standards of quality. Such goods and/or services will only be delivered to eligible program participants.
6. If the Contractor fails to meet the prescribed quality standards for services, such services will not be reimbursed under this contract. In addition, any nonconforming goods (including home delivered meals) and/or services not meeting such standards will not be reimbursed under this contract. The Contractor’s signature on the Request for Payment Form certifies maintenance of supporting documentation and acknowledgement that the Contractor shall solely bear the costs associated with preparing or providing nonconforming goods and/or services. The Department requires immediate notice of any significant and/or systemic infractions that compromise the quality, security or continuity of services to clients.

If, or to the extent, there is any conflict between Section D, 1-6 above, and paragraphs **39.1 and 39.2** of the Master Contract, this section shall take precedence.

IV. SPECIAL PROVISIONS

- A. **Final Budget and Funding Revision Requests** - Final requests for budget revisions or adjustments to contract funds based on expenditures for provided services must be submitted to the DOEA Contract Manager in writing no later than December 31, 2016; email requests are considered acceptable.

B. Contractor's Financial Obligations**1. Matching, Level of Effort, and Earmarking Requirements**

The Contractor shall provide match of at least 25 percent of the federal administrative funds received. The Contractor's match will be made in the form of cash, general revenue administrative funds, and/or in-kind resources. The Contractor will assure, through a provision in subcontracts, a match requirement of at least 10 percent of the cost for services funded through this contract, except for Title IIID. The subcontractor's match will be made in the form of cash and/or in-kind resources. The Contractor shall report match by title each month. At the end of the contract period, the Contractor must properly match OAA funds that require a match.

2. Consumer Contributions

Consumer contributions are to be used under the following terms:

- a. The Contractor assures compliance with Section 315 of the OAA as amended in 2006, in regard to consumer contributions;
- b. Voluntary contributions are not to be used for cost sharing or matching;
- c. Accumulated voluntary contributions are to be used prior to requesting federal reimbursement; and
- d. Voluntary contributions are to be used only to expand services.

3. Use of Service Dollars and Management of the Assessed Priority Consumer List

The Contractor is expected to spend all federal, state, and other funds provided by the Department for the purpose specified in the contract. The Contractor must manage the service dollars in such a manner so as to avoid having a wait list and a surplus of funds at the end of the contract period, for each program managed by the Contractor. If the Department determines that the Contractor is not spending service funds accordingly, the Department may transfer funds to other AAAs during the contract period and/or adjust subsequent funding allocations accordingly, as allowable under state and federal law.

4. The Contractor agrees to distribute funds as detailed in the area plan update and **ATTACHMENT VII**. Any change in the funds identified in **ATTACHMENT VII** require a contract amendment.

5. Title III Funds

The Contractor assures compliance with Section 306 of the OAA, as amended in 2006, that funds received under Title III will not be used to pay any part of a cost (including an administrative cost) incurred by the Contractor to maintain a contractual or commercial relationship that is not carried out to implement Title III.

6. Carry Forward Funds

Carry forward funds must be identified on **ATTACHMENT XI**, Computation of Carry Forward and Over Advance OAA Title III form and submitted with the Closeout Report. Requests for award of carry forward funds must be justified by the Contractor and approved by the Department. All OAA carry forward funds must be budgeted in the same title as originally awarded.

ATTACHMENT I
EXHIBIT 1
SUMMARY OF STANDARDS FOR PROFESSIONAL INFORMATION & REFERRAL
OLDER AMERICANS ACT PROGRAM

SERVICE DELIVERY

To provide guidance to the Elder Helplines in the delivery of quality information and assistance to elders, persons with disabilities, their caregivers and other interested individuals, the Department of Elder Affairs has adopted the following requirements based on the “Standards for Professional Information and Referral,” developed by the Alliance of Information & Referral Systems (AIRS) and amended by the Department to address the unique needs of the Elder Helpline system.

- 1) The Elder Helpline information and referral (I&R) services hours of operation shall be appropriate to community needs. At a minimum, the helpline must maintain business hours from 8:00 am to 5:00 pm Monday through Friday, with the exception of state and national holiday observances. If there is a planned office closure during normal business hours, the Elder Helpline manager must notify Department staff via email, at least 24 hours before the office closure.
 - a) If I&R services are not available 24 hours a day, an answering system must be in place that identifies the agency, provides hours of operation, gives the caller the option to leave a message and gives the number of an organization that will offer service in an emergency (e.g., directing callers to dial 9-1-1 if an emergency). Messages shall be responded to within the next business day.
 - b) If the Elder Helpline has arrangements with another agency to provide after hours or 24-hour coverage, the arrangement must be documented in a formal memorandum of agreement (MOA).
- 2) During hours of operation, the Elder Helpline shall provide timely access to an I&R specialist. Recorded messages to the helpline’s voicemail system must be responded to within the next business day, when possible. Exceptions will be during periods when helplines are experiencing higher than normal call volume (i.e., SHINE annual enrollment period, public awareness campaigns or disaster/weather-related events). The Elder Helpline shall have a method of tracking call volume, including timeliness of response, and call abandonment.
- 3) I&R services must be provided by trained I&R specialists. At a minimum, an I&R specialist must have a high school diploma or GED and three years of experience in I&R services, case management, call center services, or related social services work experience.
- 4) An I&R specialist shall:
 - a) Have the skills to meet the needs of people who are angry and hostile, manipulative, call frequently with the same problem or are otherwise difficult to serve;
 - b) Have the skills to meet the needs of older adults, adults with disabilities, and other special populations;
 - c) Establish rapport with the inquirer and use active listening skills and empathy to discern the presenting problem;
 - d) Respond to each inquirer in a professional, nonjudgmental, culturally appropriate and timely manner;
 - e) Use jargon-free language and an appropriate tone of voice and inflection to convey empathy and engagement with the inquirer’s situation;
 - f) Effectively utilize the resource information system to identify resources to meet the inquirer’s needs;
 - g) When possible, provide at least three referrals to give the inquirer a choice;
 - h) When warranted and with the inquirer’s permission, make direct contact and communicate effectively on behalf of the inquirer with other agency staff through three-way calling, notification of the inquirer’s forthcoming contact, or scheduling of appointments;

- i) Encourage inquirers to call back if the information proves incorrect, inappropriate or insufficient to link them with the needed service(s); and
 - j) Accurately record the disposition of the inquiry as well as the problems and needs that were addressed in the information and referral system for use in reports.
- 5) The Elder Helpline must have a policy to ensure the privacy, confidentiality and security of personal inquirer information and shall comply with state and federal law, including applicable HIPAA rules to ensure the protection of inquirer records. Staff that has access to confidential information shall have a signed agreement form on file that documents their agreement to comply with the confidentiality requirements of this paragraph. Provided that the release of information conforms to state and federal confidentiality laws and regulations, including HIPPA, the identity of inquirers, their requests and the information given to staff may be communicated to others if:
- a) Release of information is required by law or court order (e.g., reporting abuse);
 - b) Careful consideration indicates the presence or risk of serious harm to the inquirer or another person, and then communication may be only to those who must be informed in order to reduce harm or risk; or
 - c) The inquirer has authorized another person or agency to receive the information. If authorization is required, the agency shall have a written policy in place regarding when such authorization needs to be in writing and when it can be verbal.
- 6) The Elder Helpline shall provide barrier-free access to its services for individuals and groups who have special needs (i.e., access via applicable technology and/or communication methods for people with hearing or speech impairments; language access for inquirers with limited English proficiency and physical access for people with disabilities, if the helpline assist inquirers at its facility). Aging and Disability Resource Center staff assisting inquirers with limited English proficiency via the language interpreter service, shall document the activity in the information and referral system for use in reports.
- 7) The Elder Helpline shall make every effort to ensure that its telephone service is accessible from all telecommunication devices (e.g., wireless, competitive local exchanges) within its coverage area.
- 8) The Elder Helpline I&R service shall ensure that staffing is structured to meet the needs of callers and that the optimum number of staff is available at the times most inquiries occur. The Elder Helpline I&R service shall include at minimum, a staff of 2.5 dedicated information and referral staff.
- a) The Elder Helpline shall utilize technology that improves access to service and enhances its ability to serve inquirers efficiently and effectively while preserving the level and quality of its core services. The main role of technology is to enhance or strengthen person-to-person contact, not to reduce or discourage such contact or make it more difficult. "Technology" includes telephone systems, telephony, telecommunications, e-mail, online chat, I&R software packages, electronic directories and self-service mechanisms such as automated attendants/interactive voice response systems, fax-on-demand, video relay services, community kiosks and searchable I&R databases on the internet.
 - b) If the helpline service uses telephone technology which allows for the collection of identifying information about an inquirer without his or her explicit permission, it shall develop policies and procedures that protect the inquirer's right to privacy and anonymity while preserving the I&R specialist's ability to provide for the individual's safety should personal identification become necessary.
 - c) If the Elder Helpline provides resource information through an automated attendant (a menu-driven telephone system), it shall develop procedures to encourage inquirers to transfer to a live specialist if consultation or guidance is required. Inquirers shall be able to make the transfer without having to make another call.

Standard 1: Referral Provision

The Elder Helpline shall provide I&R services in which the inquirer has one-to-one interaction with an I&R specialist. The referral process consists of active listening and effective questioning to determine the needs of the inquirer, clarifying the need, identifying appropriate resources, selecting appropriate delivery mode(s), making referrals to organizations capable of meeting those needs, and providing enough information about each organization to help inquirers make an informed choice. In situations where services are unavailable, the I&R service shall engage in problem solving to help the inquirer identify alternative strategies and, when necessary, actively participate in linking the inquirer to needed services.

The referral process may require more in-depth interviewing and assessment to assist clients in either determining their need or linking them with an appropriate resource.

Follow-up is required within 14 business days for each referral when assistance and/or advocacy is provided, and is conducted with the referred person and/or the resource to determine the outcome of the referral/assistance. The referral cannot be counted until follow-up is complete.

- 1) The Elder Helpline shall strive to provide access to community resource information in a variety of formats and through a variety of paths which include supported access through an I&R worker or case manager and options for independent access by end users (including staff in other organizations).
- 2) The Elder Helpline shall serve the entire community of older individuals, particularly older individuals with the greatest social need, older individuals with the greatest economic need, older individuals with limited English proficiency, older individuals residing in rural areas and older individuals at risk of institutional placement.

Standard 2: Information Provision

The Elder Helpline shall provide current and pertinent information to an inquirer in response to a direct request for such information. Information can range from a limited response (such as an organization's name, telephone number, and address) to a detailed description of community service systems (such as explaining how intake works for a particular agency), agency policies, and procedures for application. Active listening is necessary to establish a positive contact with the inquirer, understand context and provide an appropriate response.

Every call, including information only calls, shall be documented in the Refer system. Documentation shall include the type of information requested/reason for call and the action taken.

- 1) The I&R specialist shall encourage inquirers to call back if the information proves incorrect, inappropriate, or insufficient to link them with needed service(s).
- 2) The I&R specialist shall accurately record the nature (disposition) of the inquiry, the problems/needs addressed by the inquiry if confirmed and, if applicable, the organization discussed in the course of the inquiry, for use in reports. Dispositions are as follows:
 - a) Met needs, i.e., information is made available (assistance without referrals); and
 - b) Unmet needs, i.e., information cannot be located or provided.

Standard 3: Methods of Access to Community Resource Information

The Elder Helpline shall provide community resource information in a variety of ways including supported access through an I&R specialist and independent access which allow end users to conduct their own searches without speaking to an I&R specialist or other professional.

1. Supported Access Methods: The Elder Helpline shall make its information and/or services available by telephone, email, social media or other methods of communication.

2. Independent Access Methods: The Elder Helpline shall make its information and/or services available by making all or a portion of its database available on the Internet at no cost and in a format that allows searching by:
 - a) Organization and program name.
 - b) Taxonomy and/or Taxonomy related keywords.
 - c) Geographic location.

Services searches shall be structured to allow the public to use natural language; and options such as user defined categories, and other user friendly search categories are employed, where possible.

Standard 4: Inquirer Advocacy

The Elder Helpline shall offer advocacy, when necessary, to ensure people receive the benefits and services for which they are eligible. Inquirer advocacy efforts seek to meet individual needs without attempting to change social institutions and, for purposes of these standards, do not include system advocacy or legislative advocacy (lobbying). All advocacy efforts shall be consistent with written policies established by the governing body of the Area Agency on Aging and shall proceed only with the permission of the inquirer.

The Elder Helpline shall intervene, when necessary, on behalf of individuals to help them establish eligibility for or obtain needed services when they have been denied benefits or services to which they are entitled, or when they need assistance to communicate their needs to a service provider.

The Elder Helpline shall make one or more additional calls or take another action on the inquirer's behalf, when necessary, to ensure that appropriate information or help was provided.

The Elder Helpline records the fact that advocacy was conducted and the advocacy is documented in the quarterly I & R report.

Standard 5: Crisis Intervention

The Elder Helpline shall be prepared to assess and meet the immediate, short-term needs of inquirers who are experiencing crisis situations and contact the helpline service for assistance. Included is assistance for individuals threatening suicide, homicide or assault; suicide survivors; victims of domestic abuse or other forms of violence, elder/dependent adult abuse/neglect; sexual assault survivors, people experiencing a psychiatric emergency; chemically dependent people in crisis; survivors of traumatic death; and others in distress.

- 1) The Elder Helpline shall have written crisis intervention policies and procedures that provide call-handling protocols for specific types of emergencies. Included shall be lethality assessment procedures, protective measures relating to inquiries from individuals in endangerment situations, protocols that address inquirers who wish to remain anonymous yet require rescue and the organization's rescue protocols. The I&R specialist shall have the skills to recognize when an inquirer is experiencing a crisis and shall determine whether the individual is in immediate danger and take steps to ensure that s/he is safe before continuing with the interview. In assault and sexual assault cases, for example, the specialist ensures that the assailant has left the vicinity and determines whether the individual needs emergency medical treatment. In domestic violence situations, the specialist ensures that the abusive person is not present and threatening the inquirer. The specialist shall follow the Elder Helpline's protocol established by the agency for when to access 911 or other emergency rescue services.
- 2) The Elder Helpline shall ensure through training and supervision that I&R specialists have the intervention skills to:
 - a) De-escalate and stabilize the individual and help him/her remain calm;
 - b) Help the inquirer talk about and work through his/her feelings as part of the assessment and problem solving

stages of the interview; and

- c) Keep the inquirer on the telephone pending referral or rescue.
- 3) In cases of suspected elder abuse, the I&R specialist shall comply with mandatory reporting statutes.
- 4) In situations involving suicide or homicide, the I&R specialist understands the circumstances under which a lethality assessment (an evaluation based on research of how dangerous a situation is, which addresses issues such as the person's intention, method, timing and state of mind) is required and shall conduct an appropriate assessment when necessary. Lethality assessments shall be recorded in writing and shall include a description of specific actions taken in response to the situation.
- 5) The I&R specialist shall have the skills to recognize when an inquirer is in immediate need of intervention and shall follow the agency's I&R service rescue protocol for when to access 911 or other emergency personnel to intervene and save the individual's life.
- 6) In cases of domestic violence and other endangerment situations, the specialist shall take special precautions to safeguard the inquirer's identity and all aspects of their interview.
- 7) The Elder Helpline may consider utilizing various means to support its ability to conduct rescue services including Caller ID or a call tracing arrangement with the telephone company or the appropriate 911 service. At a minimum, there must be a separate telephone that is available for initiating rescue procedures without interrupting the crisis call. I&R specialists shall follow the agency's I&R service protocol for addressing callers who wish to remain anonymous yet require rescue.
- 8) When necessary, the I&R specialist shall connect inquirers in crisis situations to a formal crisis intervention service in the community for long-term assistance and support once the inquirer's immediate, short-term needs have been met. The connection shall be made by direct transfer, when possible, and the specialist shall follow the protocol established by the agreement with the crisis center.
- 9) In cases where the inquirer has been referred to a formal crisis intervention service rather than transferred directly, the I&R specialist shall follow-up to ensure that the individual has the ongoing support s/he needs.
- 10) If the Elder Helpline does not provide a formal crisis intervention service, it shall have prearranged protocols with an appropriate crisis center that does. The arrangements shall be documented in a written memorandum of understanding (MOU) or memorandum of agreement (MOA).

Standard 6: Follow-Up

Follow-up is required for each referral when assistance and/or advocacy is provided and must be completed within 14 business days unless a crisis situation suggests a more immediate follow-up. Follow-up shall consist of contacting the inquirer or organization to which a referral has been made to determine if the need is being met. The specialist will contact the organization when the inquirer does not have the necessary capacity to follow through and resolve his/her problems. Additional assistance in locating or accessing services may be necessary.

- 1) The primary purpose of the follow-up is for the benefit of inquirers to see if their needs were met.
- 2) Examples of situations in which follow-up should normally occur include:
 - a) Vulnerable households that are without heat during winter.
 - b) Older adults having trouble expressing their needs.
 - c) Older adults with disabilities who have received an eviction order.
 - d) Older adults with no health insurance who need health care.
 - e) Individuals needing emergency shelter.

- 3) If the inquirer has not received services or the need has not been met, the I&R specialist determines whether there is a need and makes additional referrals if appropriate. The I&R specialist also determines whether the inquirer has additional new needs and makes appropriate referrals prior to completing the contact.
- 4) Follow-up results (whether service was received or there was an unmet need) must be documented in the I&R system.

RESOURCE DATABASE

Standard 7: Inclusion/Exclusion Criteria

To ensure that the needs of the community are met, the Elder Helpline shall develop criteria for the inclusion or exclusion of agencies and programs in the resource database. These criteria shall be uniformly applied and published so that staff and the public are aware of the scope and limitations of the database.

- 1) The inclusion/exclusion criteria shall adequately address the needs of elders and persons with disabilities.
- 2) The inclusion/exclusion criteria shall be reviewed on a regular basis (at minimum, every three years) to ensure they continue to meet the changing needs of the community.

Standard 8: Data Elements

The resource database shall contain standardized information about organizations that meet criteria for inclusion, the services provided by each organization, and the locations (sites) where those services are available. The standardized entry must contain all required data elements, where applicable (e.g., a mailing address is included if one exists). However, the specific data elements that are seen by a particular group of users (e.g., resource specialists, I&R specialist, the general public) may vary.

Agency/Main Site Data Elements

- 1) **Mandatory Data Elements:** The agency profile shall include, but is not limited to, the following data, which the Elder Helpline shall collect when appropriate:
 - a) Unique ID Number;
 - b) Record Ownership Code;
 - c) Agency Name;
 - d) Program name if applicable;
 - e) Street/Physical Address;
 - f) Telephone number (s) including TDD/TTY and Fax;
 - g) Website(s)/URL(s);
 - h) E-mail Address(es)
 - i) Agency Description;
 - j) Administrative Hours/Days of Operation;
 - k) Geographic area served; and
 - l) Date the information was last verified.
- 2) **Recommended Data Elements:**
 - a) AKA (Also Known As) Names;
 - b) Eligibility requirements and exclusions;
 - c) Documents which may be required by the organization for application;

- d) Languages other than English in which the service is offered;
- e) Legal status;
- f) Fee structure; and
- g) Method of payment.

Standard 9: Classification System (Taxonomy)

The Elder Helpline shall use the AIRS/211 LA County Taxonomy of Human Service classification system. Additional classification structures such as keywords may supplement the Taxonomy.

Standard 10: Content Management and Indexing

The Elder Helpline shall ensure through training, database management procedures and supervision that a resource specialist organizes information about organizations into database records that accurately and concisely reflect the agency, its location and its services/programs; index the services provided by each organization using the AIRS/211 LA County Taxonomy of Human Services in accordance with recognized and consistently applied practices; and assign other search keys in a way that accurately reflects the conditions under which services are available.

Standard 11: Database Search Methods

Information in the resource database shall be accessible in ways that support the I&R process including search and retrieval by organization, site and program name and by the type of service available.

Standard 12: Database Maintenance

The Elder Helpline shall have procedures that ensure information in the resource database is accurate and complete. At a minimum, an annual survey to review and update records must be conducted of all organizations in the database. Interim updates of records are required throughout the year as new information becomes available.

- 1) The Elder Helpline shall use software that supports the Resource Database standard.
- 2) The Elder Helpline shall have a documented process for updating the resource database and adding new resources at least annually or on a continuing basis throughout the year that involves multiple attempts to achieve a 100% update rate within a 12-month cycle. Resources may be updated by mail/electronic surveys, fax, telephone contact, onsite visits to organizations listed in the database or follow-up correspondence. Information that cannot be verified is considered for removal from the database. Records in the database shall include the date of last update.

REPORTS AND MEASURES**Standard 13: Inquirer Data Collection**

The Elder Helpline shall establish and use a secure computerized system for collecting and organizing inquirer data and related management information that facilitate appropriate referrals and provide a basis for describing requests for service and unmet needs, identifying service gaps and overlaps, assisting with needs assessments, supporting the development of products, identifying issues for staff training and facilitating the expansion of the resource database. Inquirer data includes information gathered during follow-up and customer satisfaction/quality assurance calls as well as that acquired during the original contact. The primary goal of data collection is to garner enough information about inquirers to help them address and/or resolve their problems. Inquirer data must always be made available in aggregated form to protect the confidentiality of individual inquirers.

- 1) The Elder Helpline shall maintain documentation on all inquiries, including but not limited to and have a defined set of inquirer data elements that are used for reporting purposes. Data collected for Elder Helpline analysis and reporting purposes are based on the agency's policy and local, state and national requirements. As agreed by the Refer workgroup, to capture all I&R/A calls reports must include AIRS Problem Needs for Referred Services, Reason for Contact, Out of Database Referrals, and Unmet Need.
- 2) Inquirer data collection and reporting activities shall facilitate the analyses needed to support:

- a) The human service needs of inquirers;
 - b) Management information needs (i.e. planning for staffing needs);
 - c) Community needs assessment;
 - d) Community planning;
 - e) Allocation of funding; and
 - f) Research
- 3) The data collected must provide enough information about inquirers' needs to identify:
- a) Service requests;
 - b) Met and unmet needs;
 - c) Trends in community service provision and/or gaps in services;
 - d) Demographic data; and
 - e) Profiles of inquirers served (aggregate data only)
- 4) Data collected for reporting purposes may include, but not be limited to, the following:
- a) Total number of incoming contacts/inquiries by phone (incoming calls) recorded by the phone system and answered by the I&R specialist.
 - b) Total number of contacts/inquiries from calls and other sources (generally recorded in the I&R software) in which inquirer problems or needs are addressed. Included are:
 - i) Transaction calls;
 - ii) Face-to-face contacts (walk-ins or I&R interactions in other settings such as community facilities);
 - iii) E-mail contacts;
 - iv) Voicemail contacts responses;
 - v) IM (Instant Message) contacts;
 - vi) Online chat contacts;
 - vii) Fax responses; and
 - viii) Regular mail contacts
 - c) Total number and types of problems/needs presented by inquirers.
 - d) Geographic and demographic profiles of inquirers (e.g., who is calling and where they are calling from).
 - e) The organizations discussed during the course of an inquiry or to which referrals were made.
- 5) To support management information needs, it is recommend the Elder Helpline have a method for tracking call volume, average speed of answer, abandoned calls, average call handling and incoming call patterns.

Standard 14: Inquirer Data Analysis and Reporting

The Elder Helpline shall have a reporting tool and utilize inquirer data and data from the resource database to support community planning activities (or planning at other levels), internal analysis for management purposes and system advocacy. The Elder Helpline shall provide quarterly I&R activity reports to the Department of Elder Affairs. Reports shall be submitted in accordance with ATTACHMENT VIII, Exhibit 1.

- 1) At a minimum, reports shall include the following:
 - a) Total number of inquiries.
 - b) Types of problems/needs presented by the inquirers.
 - c) The number of inquiries by call/contact type.
 - d) Unmet needs/gap in service.
- 2) The Elder Helpline shall be responsive to specific requests for data to support planning functions and advocacy.

COOPERATIVE RELATIONSHIPS

Standard 15: Cooperative Relationships within the I&R System

In communities that have comprehensive and specialized I&R providers, the Elder Helpline shall develop cooperative working relationships to build a coordinated I&R system which ensures broad access to I&R services, maximizes the utilization of existing I&R resources, avoids duplication of effort and encourages seamless access to community resource information. The Elder Helpline must develop and define its working relationships with comprehensive/2-1-1 services and formalize them through a MOU or MOA.

Attempts should also be made to participate in local database collaboration as a means of avoiding duplication of database maintenance activities and achieving broader coverage of different types of community resources. The Helpline must maintain comprehensive, accurate, and up-to-date information on the community resources for which it has maintenance responsibility.

The Elder Helpline shall:

- a) Identify and develop cooperative working relationships with key state and national I&R providers to provide an alternative source for specialized referrals when local resources are not available.
- b) Develop access to a broader spectrum of useful Web-based resources, written materials and other products in specialized areas.
- c) Better meet the needs of low incidence populations.
- d) Obtain broader perspectives on changing needs, available resources, legislation and policy issues.

Standard 16: Cooperative Relationships with Service Providers

The Elder Helpline shall strive to develop cooperative working relationships with local human service providers to build an integrated service delivery system that ensures broad access to community services, maximizes the utilization of existing resources and facilitates the ability of people who need services to easily find the most appropriate provider.

The Elder Helpline shall work with state and local providers to assess the viability of using its call center capacity as the first point of contact for calls into the system. Helplines shall encourage collaborating service providers to participate in community and statewide data collection, analysis and reporting activities where appropriate.

DISASTER PREPAREDNESS

Standard 17: Emergency Operations and Business Contingency Plan

The Elder Helpline shall have a written emergency operations and business contingency plan that specifically addresses disasters common to the area, but one that also prepares for emergencies in general. The plan shall reference emergency preparedness and changes in business operations and shall address the steps to take before, during and after an emergency to prevent or minimize interruptions in business operations and assure long-term recovery.

- 1) The Elder Helpline shall have written procedures that address specific types of emergencies including power outages, fires, medical emergencies, bomb threats, workplace violence and other incidents that may require different forms of response. Procedures for contacting the police/paramedics shall be included.
- 2) The Elder Helpline shall have written procedures for emergency evacuation of the facility following a disaster that impacts the immediate area surrounding the facility and potentially threatens safety. Special arrangements for helping staff or visitors with a disability exit the building should also be addressed.
- 3) The Elder Helpline shall have procedures for maintaining service delivery during and after an emergency including relocation or alternative modes of service delivery, e.g., through an MOU with an I&R service outside

the area. If the helpline plans to relocate in the event of loss of facilities, it must have identified alternative sites.

Standard 18: Formal Relationships with Government and Private Sector Emergency Operations and Relief Agencies

The Elder Helpline shall consider participating in ongoing cooperative disaster response planning in the community and establish relationships, as necessary, to become recognized as an integral part of the community's emergency preparedness and response network.

Standard 19: Disaster Resources

The Elder Helpline shall develop, maintain and/or use an accurate, up-to-date resource database containing information about available community resources that provide services in times of disaster. Database records shall include descriptions of the services organizations provide and the conditions under which services are available.

- 1) The Elder Helpline shall include in the resource database information about permanent local, state and federal disaster-related resources.
- 2) The Elder Helpline shall add information about organizations that have no formal role in emergency response but emerge in the context of particular disaster, specific relief and recovery services that come to life in response to the specific needs of the community and information about specific services offered by agencies in the standing disaster database (such as Red Cross Service Centers, special needs shelters, etc.).
- 3) The Elder Helpline shall update the disaster resources prior to an anticipated disaster and throughout the response, relief and recovery periods.
- 4) The Elder Helpline shall have an alternative means for allowing staff to access disaster resources in the event that computerized access is unavailable.

Standard 20: Disaster-Related I&R Service Delivery

The Elder Helpline shall provide I&R services to the community during (when appropriate) and following a disaster or other emergency. This service shall include assessing the needs of the inquirer, evaluating appropriate resources, indicating organizations capable of meeting those needs, helping inquirers for whom services are unavailable by locating alternative resources and actively participating in linking inquirers to needed services or volunteer opportunities.

- 1) The Elder Helpline shall ensure adequate staff to meet potential increases in inquirer needs.
- 2) The Elder Helpline shall have in place mutual aid agreements with other I&R services that include provisions for relocation of staff and/or redirection of calls.
- 3) I&R specialist shall have the skills to respond effectively to people in crisis, work cooperatively with other organizations, remain flexible in a rapidly changing environment, be willing to work under adverse conditions (e.g., long hours, uncomfortable surroundings), be aware of their own stress level and coping mechanisms, respond appropriately face-to-face communications and work within boundaries of their I&R role.

Standard 21: Disaster-Related Inquirer Data Collection/Reports

The Elder Helpline shall track inquirer requests for service, referrals and when appropriate, demographic information from inquirers, and be prepared to produce reports regarding requests for disaster-related services and referral activity.

Following all emergencies that necessitate implementation of the provisions of the Disaster Preparedness standards, the I&R service shall produce an after action report that documents the special activities of the agency with a focus on what worked well and what needs to be improved through revisions of the agency's disaster plan and/or additional training or staff.

Standard 22: Disaster-Related Technology Requirements

The Elder Helpline shall have technology in place that facilitates the ability of the organization to maintain service delivery during times of disaster or a localized emergency.

- 1) The Elder Helpline shall have the ability to reroute calls to another location if their own business site is not accessible.
- 2) It is recommended that the Elder Helpline have an emergency generator or other power back-up that will allow operations to continue on a longer term basis during a power failure.
- 3) It is recommended that the Elder Helpline have back-up systems for its telephones to ensure ongoing access in situations where there is no local electricity.
- 4) It is recommended that the Elder Helpline have an alternate phone number in a different location for staff to access the agency in case of an emergency that makes the regular phone lines inaccessible.

Standard 23: Disaster Training and Exercise

The Elder Helpline shall train staff on emergency operations and business expectations and include such training as part of the new employee orientation required by standard 27. It is recommended that the agency provide ongoing training thereafter.

ORGANIZATIONAL EFFECTIVENESS**Standard 24: Governance**

The auspices under which the Elder Helpline operates shall ensure the achievement of the Area Agency on Aging's mission and I&R goals and meet the standards set forth by the Area Agency on Aging and the Department of Elder Affairs.

- 1) Goals shall include but are not limited to:
 - Provide for a regular cycle of needs assessment, program planning and service delivery, and conduct an annual evaluation of I&R activities;
 - Formulate policies needed to successfully implement and sustain a quality I&R service;
 - Assist in procuring financial and technical assistance to sustain the I&R service;
 - Provide human resources to adequately staff the I&R service; and
 - Promote the I&R system throughout the community ensuring appropriate publicity, public relations, marketing, and outreach.
- 2) The Elder Helpline shall have formally adopted, regularly reviewed, dated and formatted written policies that clearly articulate the general principles by which it manages the I&R service. Organizational policies should be available to all employees.
- 3) The Elder Helpline shall have a process for registering and resolving complaints from inquirers, staff members and the community.
- 4) The Elder Helpline shall have in place a statement approved by the organization's governing body prohibiting discrimination in all of its forms and documenting its intention to comply with all laws, orders and regulations addressing this issue.
- 5) The Elder Helpline shall provide adequate, accessible space and equipment to ensure that staff can effectively perform their duties, including sufficient space to ensure confidential interviewing, files and technology needs. The office must be equipped with sufficient desks, tables, chairs, supplies, and lockable filing cabinets and must be free of architectural barriers to people with physical disabilities per Americans with Disabilities Act (ADA) requirements. If the Elder Helpline is designed to serve walk-ins, the office shall be accessible by public transportation, have available parking and be geographically convenient to the elder population and persons with disabilities.

Standard 25: Technology

The Elder Helpline shall use technology that improves access to information and enhances its ability to serve inquirers efficiently and effectively. The main role of technology is to enhance and strengthen information sharing while accommodating people's communication preferences. Technology includes telephone systems, telecommunications, computer systems and applications, searchable I&R databases on the Internet, etc.

Standard 26: Personnel Administration

The Elder Helpline shall provide a framework and mechanisms for program and personnel management and administration that guarantee the continuity and consistency required for effective service delivery.

- 1) Staff - The Elder Helpline shall recruit and hire service and administrative staff who are competent, ethical, qualified, and sufficient in number to implement service policies.
- 2) Job Descriptions - The Elder Helpline must have written, up-to-date job descriptions for all employees and volunteers outlining responsibilities, essential job functions and lines of accountability. The job descriptions must be dated within the last three years.
- 3) Staff Supervision - The Elder Helpline must provide for the ongoing supervision and annual evaluation of employees and volunteers by qualified I&R managers. The organization must have a written supervision plan for staff and use standardized observation and performance appraisal forms.
- 4) Quality indicators for I&R specialists and the Elder Helpline as a whole may include the following:
 - a) Call Monitoring/Remote Listening: Live or recorded calls that are randomly selected for review and feedback on a regular basis.
 - b) Mentoring/Coaching: The use of individual sessions, team discussions, role playing and other techniques to mentor and coach I&R specialist to ensure quality service delivery.
 - c) Call Management System Reports, Measures and Metrics: The call management component of the telephone system produces weekly and monthly reports that provide the following figures which may be analyzed to assess individual and Departmental efficiency and productivity:
 - i) Calls received.
 - ii) Calls answered.
 - iii) Calls abandoned.
 - iv) Service level.
 - v) Average speed of answer.
 - vi) Average abandonment time
 - vii) Average call handling time.
 - viii) Occupancy rates.
 - d) Complaints and Commendations: The complaints and commendations a particular I&R specialist has received.

Standard 27: Staff Training

The Elder Helpline shall have a training policy and make training available to employees and volunteers.

- 1) The Elder Helpline shall provide training for employees and volunteers based on pre-determined written training goals with written curriculum objectives defining behavioral outcomes for each module.
- 2) The Elder Helpline shall provide an orientation for new employees and volunteers that addresses the role, mission, function of the I&R service; the role of governing body; federal, state and local laws affecting service delivery (e.g., abuse reporting); emergency operations and business expectations; and the administrative structure, policies and procedures of the organization.

- 3) Training for the I&R specialist includes:
 - a) Pre-service training appropriate to the knowledge and skills of new staff to ensure that they meet organizational expectations.
 - b) On-the-job training that involves increasing levels of responsibility in handling inquiries.
 - c) In-service training that focuses on refining and updating the staff's information and referral skills, and knowledge of state and federally funded programs.
- 4) The content of the staff training program shall be consistent with the ABC's of I&R published by AIRS or the Department of Elder Affairs Information and Referral/Assistance training module.
- 5) The Elder Helpline shall systematically evaluate the effectiveness of its training program and the performance of its trainers and modify the training based on evaluation results.

Standard 28: Promotion and Outreach

The Elder Helpline shall establish and maintain a program that increases public awareness of I&R services, its objectives, and its value to the community. At least two outreach projects targeting low-income older individuals including low-income minority, older individuals with limited English proficiency and older individuals residing in rural areas must be completed annually. The Helpline shall use various methods to publicize I&R; methods shall be tailored to meet the needs of diverse populations and may include:

- | | |
|---------------------------------------------|-----------------------------------------|
| 1) Personal contact | 8) Telephone Directories |
| 2) Speaking engagements | 9) Printed materials such as brochures, |
| 3) Community meetings | 10) Posters, and billboards |
| 4) Feature articles | 11) Booths at fairs |
| 5) News stories | 12) Radio |
| 6) Displays | 13) Television |
| 7) Public service announcements or listings | 14) Internet web page |

Standard 29: Program Evaluation and Quality Assurance

The Elder Helpline shall have the ability to assess the quality and effectiveness of all aspects of its operation including its service delivery, resource database, reports and measures, cooperative relationships, disaster preparedness and organizational structure. These determinations shall be made both through on-going quality assurance procedures and periodic, formal evaluations that are used to implement measurable improvements.

- 1) The Elder Helpline shall provide for a regular cycle of needs assessment, program planning and service delivery and shall conduct an annual evaluation of I&R activities. Steps in the evaluation process include:
 - a) Formulating annual service goals, objectives and work plans that reflect priorities for service and desired outcomes; and
 - b) Conducting a structured evaluation on an annual basis to measure the effectiveness and cost-efficiency of the I&R service and its impact on the people it serves (outcomes).

The Elder Helpline shall conduct regular customer satisfaction/quality assurance surveys with a specified percentage of inquirers to assess overall service performance and I&R service outcomes. The surveys may occur during the original contact with an inquirer or in a separate call made for quality assurance purposes.

If during the course of conducting client satisfaction/quality assurance surveys, it is determined that the original need of the inquirer has not been met or that the inquirer has new needs, the Elder Helpline shall have procedures in place to provide additional information, referrals or advocacy.

Reference: The Older Americans Act (OAA) contract standards have been adopted with modifications from the AIRS Standards for Professional Information and Referral.

**ATTACHMENT II
CERTIFICATION REGARDING LOBBYING**

Certification for Contracts, Grants, Loans and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or an employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in the connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment or modification of any Federal contract, grant, loan or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid, to any person for influencing or attempting to influence an officer or an employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in the connection with this Federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit *Standard Form-LLL, Disclosure Form to Report Lobbying*, in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants and contracts under grants, loans and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by §1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Theodora Williams

Signature

12-29-2015

Date

THEODORA WILLIAMS, 1ST VICE PRESIDENT

Name of Authorized Individual

JA016

Contract/Agreement
Number

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.

Name of the Organization

5300 HIATUS ROAD, SUNRISE, FL 33351

Address of Organization

ATTACHMENT III FUNDING SUMMARY

Note: Title 2 CFR § 200.331, as revised, and section 215.97(5), Florida Statutes, require that the information about federal programs and State Projects included in exhibit 1 be provided to the recipient. Information contained herein is a prediction of funding sources and related amounts based on the contract budget.

1. FEDERAL RESOURCES AWARDED TO THE SUBRECIPIENT PURSUANT TO THIS CONTRACT CONSIST OF THE FOLLOWING:

GRANT AWARD (FAIN#): 16AAFLT3SS, 16AAFLT3CM, 16AAFLT3HD, 16AAFLT3PH, 16AAFLT3FC			
DUNS NUMBER: 039652961		FEDERAL AWARD DATE: OCTOBER 20, 2015	
PROGRAM TITLE	FUNDING SOURCE	CFDA	AMOUNT
Older Americans Act Administration	U.S. Health and Human Services	93.044-045 & 93.052	\$639,294.00
Older Americans Act Administration Carry Forward	U.S. Health and Human Services Carry Forward	93.044-045 & 93.052	\$0.00
Older Americans Act Administration Title III B – Support Services	U.S. Health and Human Services	93.044	\$2,839,584.22
Older Americans Act Administration Title III B – Carry Forward	U.S. Health and Human Services Carry Forward	93.044	\$0.00
Older Americans Act Administration Title III C1 – Congregate Meals	U.S. Health and Human Services	93.045	\$998,231.14
Older Americans Act Administration Title III C1 – Carry Forward	U.S. Health and Human Services Carry Forward	93.045	\$0.00
Older Americans Act Administration Title III C2 – Home Delivered Meals	U.S. Health and Human Services	93.045	\$1,464,425.64
Older Americans Act Administration Title III C2 – Carry Forward	U.S. Health and Human Services Carry Forward	93.045	\$0.00
Older Americans Act Administration Title III D – Preventive Health	U.S. Health and Human Services	93.043	\$107,141.00
Older Americans Act Administration Title III D – Carry Forward	U.S. Health and Human Services Carry Forward	93.043	\$0.00
Older Americans Act Administration Title III E – Caregiver Support Services	U.S. Health and Human Services	93.052	\$717,575.00
Older Americans Act Administration Title III E – Carry Forward	U.S. Health and Human Services Carry Forward	93.052	\$0.00
TOTAL FEDERAL AWARD			\$6,766,251.00

ATTACHMENT III FUNDING SUMMARY

COMPLIANCE REQUIREMENTS APPLICABLE TO THE FEDERAL RESOURCES AWARDED PURSUANT TO THIS CONTRACT ARE AS FOLLOWS:

FEDERAL FUNDS:

2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
OMB Circular A-133 – Audits of States, Local Governments, and Non-Profit Organizations

2. STATE RESOURCES AWARDED TO THE RECIPIENT PURSUANT TO THIS CONTRACT CONSIST OF THE FOLLOWING:

MATCHING RESOURCES FOR FEDERAL PROGRAMS

PROGRAM TITLE	FUNDING SOURCE	CFDA	AMOUNT
TOTAL STATE AWARD			

STATE FINANCIAL ASSISTANCE SUBJECT TO Sec. 215.97, F.S.

PROGRAM TITLE	FUNDING SOURCE	CSFA	AMOUNT
Older Americans Act Administration	General Revenue	N/A	\$27,798.00
TOTAL AWARD			\$27,798.00

COMPLIANCE REQUIREMENTS APPLICABLE TO STATE RESOURCES AWARDED PURSUANT TO THIS CONTRACT ARE AS FOLLOWS:

STATE FINANCIAL ASSISTANCE

Section 215.97, F.S., Chapter 69I-5, FL Admin Code

REMAINDER OF PAGE INTENTIONALLY LEFT BLANK

ATTACHMENT IV
Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion
Contracts / Subcontracts

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, signed February 18, 1986. The guidelines were published in the May 29, 1987 Federal Register (52 Fed. Reg., pages 20360-20369). (2 CFR 180.5-180.1020, as supplemented by 2 CFR 376.10-376.995).

Instructions

1. Each provider whose contract/subcontract contains federal monies or state matching funds must sign this certification prior to execution of each contract/subcontract. Additionally, providers who audit federal programs must also sign, regardless of the contract amount. Florida Department of Elder Affairs (DOEA or Department) cannot contract with these types of providers if they are debarred or suspended by the federal government.
2. This certification is a material representation of fact upon which reliance is placed when this contract/subcontract is entered into. If it is later determined that the signer knowingly rendered an erroneous certification, the Federal Government may pursue available remedies, including suspension and/or debarment.
3. The provider shall provide immediate written notice to the DOEA Contract Manager at any time the provider learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "debarred", "suspended", "ineligible", "person", "principal", and "voluntarily excluded", as used in this certification, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the DOEA Contract Manager for assistance in obtaining a copy of those regulations.
5. The provider agrees by submitting this certification that, it shall not knowingly enter into any subcontract with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this contract/subcontract unless authorized by the Federal Government.
6. The provider further agrees by submitting this certification that it will require each subcontractor of this contract/subcontract, whose payment will consist of federal monies, to submit a signed copy of this certification.
7. DOEA may rely upon a certification of a provider that it is not debarred, suspended, ineligible, or voluntarily excluded from contracting/subcontracting unless it knows that the certification is erroneous.
8. This signed certification must be kept in the DOEA Contract Manager's file and provided to DOEA Contract Administration. Subcontractor's certifications must be kept at the contractor's business location.

CERTIFICATION

- (1) The prospective provider certifies, by signing this certification, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this contract/subcontract by any federal department or agency.
- (2) Where the prospective provider is unable to certify to any of the statements in this certification, such prospective provider shall attach an explanation to this certification.
- (3) By initialing, DOEA Contract Manager confirms that prospective provider has not been listed in the [EPLS database](#) _____ Verification Date _____

 Signature (must be same as contract signature)

 Date

Title and Organization 1ST VICE PRESIDENT, AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.

ATTACHMENT VII BUDGET SUMMARY

C.II.B. OAA Budget Summary

	(1) Federal Funding	(2) General Revenue	(3) Local Match/ CCE/HCE	(4) TOTAL FUNDS
1. Area Agency Admin				
A. Current Year	639,294.00	\$27,798.00		\$667,092.00
B. Prior Year CF* (2015)	0.00			\$0.00
CONTRACT TOTAL	\$639,294.00	\$27,798.00	\$0.00	\$667,092.00
C. CCE GR Administration			\$34,035.00	\$34,035.00
D. HCE GR Administration			\$79,785.00	\$79,785.00
E. LSP Admin			\$21,984.00	\$21,984.00
F. ADI Admin			\$18,063.00	\$18,063.00
G. Local Match			\$31,433.00	\$31,433.00
TOTAL ADMIN	\$639,294.00	\$27,798.00	\$185,300.00	\$852,392.00
2. Title IIIB				
A. Supportive Services				
(1) Current Year	\$2,839,584.22		\$315,509.36	\$3,155,093.58
(2) Prior Year CF* (2015)	\$0.00			\$0.00
TOTAL	\$2,839,584.22		\$315,509.36	\$3,155,093.58
B. IIIB Set-Aside (also included in Total)	\$105,000.00			\$105,000.00
3. Title IIIC1 Nutrition Services				
A. Current Year	\$998,231.14		\$110,914.57	\$1,109,145.71
B. Prior Year CF* (2015)	\$0.00			\$0.00
TOTAL	\$998,231.14		\$110,914.57	\$1,109,145.71
4. Title IIIC2 Nutrition Services				
A. Current Year	\$1,464,425.64		\$162,713.96	\$1,627,139.60
B. Prior Year CF* (2015)	\$0.00			\$0.00
TOTAL	\$1,464,425.64		\$162,713.96	\$1,627,139.60
5. Title IIID Preventive Health				
A. Current Year	\$107,141.00			\$107,141.00
B. Prior Year CF* (2015)	\$0.00			\$0.00
TOTAL	\$107,141.00		\$0.00	\$107,141.00
6. Title IIIE Caregiver Support Services				
A. Current Year	\$717,575.00		\$79,730.56	\$797,305.56
B. Prior Year CF* (2015)	\$0.00			\$0.00
TOTAL	\$717,575.00		\$79,730.56	\$797,305.56
7. Total Federal Current Year Funds Awarded (Sum of 1.A, 2.A(1), 3.A, 4.A, 5.A., 6.A, 7.A)	\$6,766,251.00			
8. Total CF Funds Awarded (Sum of 1.B, 2.A(2), 3.B, 4.B, 5.B, 6.B, 7.B)	\$0.00			
9. Total GR Awarded (Total of column (2))	\$27,798.00			
10.Total of All Funds to be Received (Sum of 8, 9, 10)	\$6,794,049.00			

* Carry Forward

**ATTACHMENT VIII
INVOICE SCHEDULE**

Report Number	Based On	Submit to State On This Date
1	January Advance*	January 1
2	February Advance*	January 1
3	January Expenditure Report	February 15
4	February Expenditure Report	March 15
5	March Expenditure Report	April 15
6	April Expenditure Report	May 15
7	May Expenditure Report	June 15
8	June Expenditure Report	July 15
9	July Expenditure Report	August 15
10	August Expenditure Report	September 15
11	September Expenditure Report	October 15
12	October Expenditure Report	November 15
13	November Expenditure Report	December 15
14	December Expenditure Report	January 15
15	Final Expenditure and Request for Payment	March 1
16	Closeout Report	March 15

Legend: * Advance based on projected cash need.

Note # 1: Report #1 for Advance Basis Agreements cannot be submitted to the Department of Financial Services (DFS) prior to January 1 or until the agreement with the Department has been executed and a copy sent to DFS. Actual submission of the vouchers to DFS is dependent on the accuracy of the expenditure report.

Note # 2: Report numbers 5 through 14 shall reflect an adjustment of one tenth of the total advance amount, on each of the reports, repaying advances issued the first two months of the agreement. The adjustment shall be recorded in Part C, 1 of the report (ATTACHMENT IX).

Note #3: Submission of expenditure reports may or may not generate a payment request. If final expenditure report reflects funds due back to the Department, payment is to accompany the report.

**ATTACHMENT VIII
EXHIBIT 1
INFORMATION AND REFERRAL REPORT SCHEDULE**

Program Name	Report	Reporting Requirement	Report Due Date(s)
Information and Referral	Quarter 1	Reports must include the data elements identified in Attachment I, Exhibit 1, Standard 14: Data Analysis and Reporting for January – March.	April 11, 2016
Information and Referral	Quarter 2	Reports must include the data elements identified in Attachment I, Exhibit 1, Standard 14: Data Analysis and Reporting for April – June.	July 11, 2016
Information and Referral	Quarter 3	Reports must include the data elements identified in Attachment I, Exhibit 1, Standard 14: Data Analysis and Reporting for July – September.	October 11, 2016
Information and Referral	Quarter 4	Reports must include the data elements identified in Attachment I, Exhibit 1, Standard 14: Data Analysis and Reporting for October – December.	January 11, 2017

**ATTACHMENT VIII
EXHIBIT 2**

Title IID Programmatic Reporting Schedule

Program Name	Report	Reporting Requirement	Month Services were completed/delivered	Reports Due Date on or before
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 1	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	January	February 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 2	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	February	March 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 3	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	March	April 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 4	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	April	May 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 5	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	May	June 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 6	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	June	July 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 7	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	July	August 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 8	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	August	September 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 9	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	September	October 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 10	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	October	November 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 11	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	November	December 15
Title III D Evidence-based Disease Prevention and Health Promotion Services	Report 12	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IID Reports (this report is on Excel)	December	January 15

ATTACHMENT IX REQUEST FOR PAYMENT

REQUEST FOR PAYMENT OLDER AMERICANS ACT							
PROVIDER NAME, ADDRESS, PHONE AND FED ID NUMBER			TYPE OF REPORT:		THIS REQUEST PERIOD:		
			Advance _____		Report # _____		
			Reimbursement _____		Contract # : _____		
					Contract Period: _____		
					PSA : _____		
CERTIFICATION: I hereby certify to the best of my knowledge that this request conforms with the terms and the purposes set forth in the above contract.							
Prepared By: _____ Date: _____ Approved By: _____ Date: _____							
PART A:	(1)	(2)	(3)	(4)	(5)	(6)	(7)
BUDGET SUMMARY	ADMIN.	IIIB	IIIC1	IIIC2	IIID	IIIE	TOTAL
1. Approved							
Contract Amount	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2. Previous Funds RECEIVED for							
Contract period	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3. Contract Balance							
(Line 1 minus line 2)	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4. Previous Funds REQUESTED and							
Not Received.	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5. Contract Balance							
(Line 3 minus line 4)	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PART B:							
FUNDS REQUESTED							
1. 1st-2nd Months							
Request Only	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2. Net Expenditures							
For Month	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3. Total							
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PART C:							
NET FUNDS REQUESTED:							
1. Less: Over-Advance							
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2. Contract Funds are							
Hereby Requested For	0.00	0.00	0.00	0.00	0.00	0.00	0.00
List of Services / Units / Rates provided - See attached report.							
DOEA FORM 106A revised 9/14							

**ATTACHMENT X
EXHIBIT 1
RECEIPTS AND EXPENDITURE REPORT**

RECEIPTS AND EXPENDITURE REPORT OLDER AMERICAN ACT		
PROVIDER NAME, ADDRESS, PHONE# AND FEID#	PROGRAM FUNDING SOURCE: Title III & General Revenue Administration	THIS REPORT PERIOD FROM: TO: CONTRACT PERIOD: CONTRACT # REPORT # PSA#
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.		
Prepared by : _____ Date : _____ Approved by : _____ Date : _____		
PART A : CONTRACTED INCOME/ RECEIPTS	1. Approved Budget	2. Actual Receipts For This Report
1. Federal Funds	\$0.00	\$0.00
2. State Funds	\$0.00	\$0.00
3. Local Cash Match	\$0.00	\$0.00
4. State Match	\$0.00	\$0.00
5. Local In-Kind Match	\$0.00	\$0.00
6. TOTAL RECEIPTS	\$0.00	\$0.00
PART B : CONTRACTED EXPENDITURES	1. Approved Budget	2. Expenditures For This Report
1. Administrative Expenses	\$0.00	\$0.00
2. TOTAL EXPENDITURES	\$0.00	\$0.00
C: INTEREST		
1. Earned on Advances	\$0.00	
2. Returned on Advances	\$0.00	

**ATTACHMENT X
EXHIBIT 2
RECIEPTS AND EXPENDITURE REPORT**

RECEIPTS AND EXPENDITURE REPORT OLDER AMERICAN ACT		
PROVIDER NAME, ADDRESS, PHONE# AND FEID#	PROGRAM FUNDING SOURCE: Title III C1	THIS REPORT PERIOD FROM: TO: CONTRACT PERIOD: CONTRACT # REPORT # PSA#
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.		
Prepared by : _____ Date : _____ Approved by : _____ Date : _____		
PART A : CONTRACTED INCOME/ RECEIPTS 1. Federal Funds 2. State Match 3. Local Cash Match 4. Local In-Kind Match 5. TOTAL RECEIPTS	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	2. Actual Receipts For This Report \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
		3. Total Receipts Year to Date \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
		4. Percent of Approved Budget _____ % _____ % _____ % _____ % _____ %
PART B : CONTRACTED EXPENDITURES AND PROGRAM INCOME 1. Subcontractor 2. EXPENDITURES SUB TOTAL 3. Program Income Collected (This will be deducted from Expenditures Sub total Line) 4. TOTAL NET EXPENDITURES (to be reported on form 106A, part B, line 2, column 3)	1. Approved Budget \$0.00 \$0.00 \$0.00	2. For This Report \$0.00 \$0.00 \$0.00 \$0.00
		3. Year to Date \$0.00 \$0.00 \$0.00
		4. Percent of Approved Budget _____ % _____ % _____ %
PART C: INTEREST 1. Earned on Advances <u> \$0.00 </u> 2. Returned on Advances <u> \$0.00 </u>		

**ATTACHMENT X
EXHIBIT 3
RECIEPTS AND EXPENDITURE REPORT**

RECEIPTS AND EXPENDITURE REPORT OLDER AMERICAN ACT				
PROVIDER NAME, ADDRESS, PHONE# AND FEID#	PROGRAM FUNDING SOURCE: <div style="text-align: center;">Title III C2</div>		THIS REPORT PERIOD FROM: _____ TO: _____ CONTRACT PERIOD: CONTRACT # REPORT # PSA#	
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A : CONTRACTED INCOME/ RECEIPTS 1. Federal Funds 2. State Match 3. Local Cash Match 4. Local In-Kind Match 5. TOTAL RECEIPTS	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	2. Actual Receipts For This Report \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	3. Total Receipts Year to Date \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget _____ % _____ % _____ % _____ % _____ %
PART B : CONTRACTED EXPENDITURES AND PROGRAM INCOME 1. Subcontractor 2. EXPENDITURES SUB TOTAL 3. Program Income Collected (This will be deducted from Expenditures Sub total Line) 4. TOTAL NET EXPENDITURES (to be reported on form 106A, part B, line 2, column 4)	1. Approved Budget \$0.00 \$0.00 \$0.00	2. For This Report \$0.00 \$0.00 \$0.00	3. Year to Date \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget _____ % _____ % _____ %
PART C: INTEREST 1. Earned on Advances <u>\$0.00</u> 2. Returned on Advances <u>\$0.00</u>				

**ATTACHMENT X
EXHIBIT 4
RECIEPTS AND EXPENDITURE REPORT**

RECEIPTS AND EXPENDITURE REPORT OLDER AMERICAN ACT				
PROVIDER NAME, ADDRESS, PHONE# AND FEID#	PROGRAM FUNDING SOURCE: <div style="text-align: center;">Title III IIIB</div>	THIS REPORT PERIOD FROM: _____ TO: _____ CONTRACT PERIOD: CONTRACT # REPORT # PSA#		
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A : CONTRACTED INCOME/ RECEIPTS 1. Federal Funds 2. State Match 3. Local Cash Match 4. Local In-Kind Match 5. TOTAL RECEIPTS	1. Approved Budget <div style="text-align: right;">\$0.00</div>	2. Actual Receipts For This Report <div style="text-align: right;">\$0.00</div>	3. Total Receipts Year to Date <div style="text-align: right;">\$0.00</div>	4. Percent of Approved Budget <div style="text-align: right;">_____ %</div>
1. Federal Funds 2. State Match 3. Local Cash Match 4. Local In-Kind Match 5. TOTAL RECEIPTS	<div style="text-align: right;">\$0.00</div>	<div style="text-align: right;">\$0.00</div>	<div style="text-align: right;">\$0.00</div>	<div style="text-align: right;">_____ %</div>
PART B : CONTRACTED EXPENDITURES AND PROGRAM INCOME 1. AAA Direct Services 2. Subcontractor 3. IIIB Set Aside 4. EXPENDITURES SUB TOTAL 5. Program Income Collected (This will be deducted from Expenditures Sub total Line) 6. TOTAL NET EXPENDITURES (to be reported on form 106A, part B, line 2, column 2)	1. Approved Budget <div style="text-align: right;">\$0.00</div>	2. For This Report <div style="text-align: right;">\$0.00</div>	3. Year to Date <div style="text-align: right;">\$0.00</div>	4. Percent of Approved Budget <div style="text-align: right;">_____ %</div>
1. AAA Direct Services 2. Subcontractor 3. IIIB Set Aside 4. EXPENDITURES SUB TOTAL 5. Program Income Collected (This will be deducted from Expenditures Sub total Line) 6. TOTAL NET EXPENDITURES (to be reported on form 106A, part B, line 2, column 2)	<div style="text-align: right;">\$0.00</div>	<div style="text-align: right;">\$0.00</div>	<div style="text-align: right;">\$0.00</div>	<div style="text-align: right;">_____ %</div>
PART C: INTEREST 1. Earned on Advances <u>\$0.00</u> 2. Returned on Advances <u>\$0.00</u>				

**ATTACHMENT X
EXHIBIT 5
RECIEPTS AND EXPENDITURE REPORT**

RECEIPTS AND EXPENDITURE REPORT OLDER AMERICAN ACT				
PROVIDER NAME, ADDRESS, PHONE# AND FEID#	PROGRAM FUNDING SOURCE: <div style="text-align: center;">Title III IIID</div>		THIS REPORT PERIOD FROM: _____ TO: _____ CONTRACT PERIOD: CONTRACT # REPORT # PSA#	
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A : CONTRACTED INCOME/ RECEIPTS 1. Federal Funds 2. TOTAL RECEIPTS	1. Approved Budget \$0.00 \$0.00	2. Actual Receipts For This Report \$0.00 \$0.00	3. Total Receipts Year to Date \$0.00 \$0.00	4. Percent of Approved Budget _____ % _____ %
PART B : CONTRACTED EXPENDITURES AND PROGRAM INCOME 1. AAA Direct Services 2. Subcontractor 3. EXPENDITURES SUB TOTAL 4. Program Income Collected (This will be deducted from Expenditures Sub total Line) 5. TOTAL NET EXPENDITURES (to be reported on form 106A, part B, line 2, column 5)	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00	2. For This Report \$0.00 \$0.00 \$0.00 \$0.00	3. Year to Date \$0.00 \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget _____ % _____ % _____ % _____ %
PART C: INTEREST 1. Earned on Advances <u> \$0.00 </u> 2. Returned on Advances <u> \$0.00 </u>				

**ATTACHMENT X
EXHIBIT 6
RECIEPTS AND EXPENDITURE REPORT**

RECEIPTS AND EXPENDITURE REPORT OLDER AMERICAN ACT				
PROVIDER NAME, ADDRESS, PHONE# AND FEID#	PROGRAM FUNDING SOURCE : <div style="text-align: center;">Title III IIIE</div>		THIS REPORT PERIOD FROM: _____ TO: _____ CONTRACT PERIOD: _____ CONTRACT # _____ REPORT # _____ PSA# _____	
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A : CONTRACTED INCOME/ RECEIPTS 1. Federal Funds 2. State Match 3. Local Cash Match 4. Local In-Kind Match 5. TOTAL RECEIPTS	1. Approved Budget	2. Actual Receipts For This Report	3. Total Receipts Year to Date	4. Percent of Approved Budget
	\$0.00	\$0.00	\$0.00	_____ %
	\$0.00	\$0.00	\$0.00	_____ %
	\$0.00	\$0.00	\$0.00	_____ %
	\$0.00	\$0.00	\$0.00	_____ %
	\$0.00	\$0.00	\$0.00	_____ %
PART B : CONTRACTED EXPENDITURES AND PROGRAM INCOME 1. AAA Direct Services 2. Sub-Contracted Services 3. EXPENDITURES SUB TOTAL 4. Program Income Collected (This will be deducted from Expenditures Sub total Line) 5. TOTAL NET EXPENDITURES (to be reported on form 106A, part B, line 2, column 6)	1. Approved Budget	2. For This Report	3. Year to Date	4. Percent of Approved Budget
	\$0.00	\$0.00	\$0.00	_____ %
	\$0.00	\$0.00	\$0.00	_____ %
	\$0.00	\$0.00	\$0.00	_____ %
		\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	_____ %
PART C : EXPENDITURES ANALYSIS 1. Expenditures by Services Year to Date: 1. Information..... 2. Assistance..... 3. Counseling..... 4. Respite..... 5. Supplemental Services..... 6. TOTAL.....	2. Units of Services Year to Date 		3. Number of People Served Year to Date 	
	\$0.00	0	0	
	\$0.00	0	0	
	\$0.00	0	0	
	\$0.00	0	0	
	\$0.00	0	0	
	\$0.00	0	0	
Part B Line 3, column 3 should be equal to this total.				
PART D : GRANDPARENT SERVICES (reported by Federal Fiscal Year) FFY _____ \$ _____ FFY _____ \$ _____ FFY _____ \$ _____ Match \$ _____ Match \$ _____ Match \$ _____				
PART E: INTEREST 1. Earned on Advances _____ \$0.00 2. Returned on Advances _____ \$0.00				

**ATTACHMENT XI
COMPUTATION OF CARRYFORWARD AND OVERADVANCE OAA TITLE III**

COMPUTATION OF CARRYFORWARD AND OVERADVANCE OAA TITLE III

PSA NO. _____

CONTRACT PERIOD: _____

CONTRACT NUMBER _____

	AAA ADMINISTRATION		TITLE III B	TITLE III C1	TITLE III C2	TITLE III D	TITLE III E	TOTAL
	FED FUND	GEN REV	FED FUND	FED FUND	FED FUND	FED FUND	FED FUND	
<u>CARRYFORWARD</u>								
1. CURRENT YEAR FUNDING : FFY _____	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2. PRIOR YEAR CARRYFORWARD: FFY _____	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3. PRIOR YEAR CARRYFORWARD: FFY _____	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4. CONTRACT TOTALS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5. NET EXPENDITURES FOR CONTRACT YEAR	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6. CURRENT FFY CARRYFORWARD	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7. CARRYFORWARD PERCENTAGE	✔ #DIV/0!	✔ #DIV/0!	✔ #DIV/0!	✔ #DIV/0!	✔ #DIV/0!	✔ #DIV/0!	✔ #DIV/0!	✔ #DIV/0!
<u>OVERADVANCES</u>								
8. TOTAL FUNDS ADVANCED AND/OR REIMBURSED	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9. LESS: EXPENDITURES FROM LINE 5	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
10. AMOUNT OF OVERADVANCE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
11. REPORT APPROVED FOR AAA BY:			12. REPORT APPROVED BY DOEA DIVISION OF FINANCIAL ADMINISTRATION:					
<div style="display: flex; justify-content: space-between;"> <div>_____ Signature</div> <div>_____ Date</div> </div>			<div style="display: flex; justify-content: space-between;"> <div>_____ Signature</div> <div>_____ Date</div> </div>					
			13. REPORT APPROVED BY DOEA CONTRACT MANAGEMENT:					
			<div style="display: flex; justify-content: space-between;"> <div>_____ Signature</div> <div>_____ Date</div> </div>					

DOEA FORM 124A, Revised 9/2014

ATTACHMENT XII

Cost Reimbursement Summary				
			Contract #	
			Report Number:	
Budget Category	Description		Number of units	Amount
Administration				
			TOTAL ADMINISTRATION	\$0.00
Expenses				
			TOTAL EXPENSES	\$0.00

DOEA Cost Analysis For Non-Competitively Procured Contracts in Excess of Category II

Contract #: _____

CONTRACT PERIOD: _____

1	2	3
---	---	---

CERTIFICATION (to be signed by DOE Contract Manager)
 I certify that the cost for each line item budget category has been evaluated and determined to be allowable, reasonable, and necessary as required by Section 216.3475, F.S. documentation is on file evidencing the methodology used and the conclusions reached.

Name: _____	Title: _____
_____	_____
Signature: _____	Date: _____
_____	_____

ATTACHMENT F**Exhibit 1****INSTRUCTIONS: COST ANALYSIS FOR NON-COMPETITIVELY PROCURED
CONTRACTS IN EXCESS OF CATEGORY II**

The purpose of the ATTACHMENT F, Exhibit 1, is to document that costs in non-competitively procured contracts in excess of \$35,000 are allowable, reasonable and necessary.

Upon receipt of the form completed by the AAA, the DOEA contract manager will:

1. Evaluate each separate line item to determine whether the cost is allowable, reasonable and necessary.
 - a. To be allowable, a cost must be allowable pursuant to state and federal expenditure laws, rules and regulations and authorized by the agreement between the state and the contractor.
 - b. To be reasonable, a cost must be evaluated to determine that the amount does not exceed what a prudent person would incur given the specific circumstances.
 - c. To be necessary, a cost must be essential to the successful completion of the program.
2. Place the Cost Analysis for Non-Competitively Procured Agreements in Excess of Category II form in the official file for this contract at the Department of Elder Affairs.
 - (1) In accordance with the following instructions for the DOEA Cost Analysis For Non-Competitively Procured Contracts In Excess Of Category II worksheet (ATTACHMENT F, EXHIBIT 1), the contractor must complete COLUMNS 3 and 4 AND ensure COLUMN 5 calculates accurately. This form is required for the original contract and for any amendment that affects the amount of compensation and/or the level of services provided.
 - (2) Definition of Administrative Costs –
 - a. Salaries/Wages: The charges to directly hire someone and put them on payroll.
 - b. Fringe Benefits: The costs of health insurance, Social Security, Medicare, unemployment and other benefits paid on behalf of each employee. If fringe benefits will be based on a specified percentage, rather than the actual cost of fringe benefits, then the calculation for the fringe benefits amount must be shown.
 - c. Equipment: An article of nonexpendable, tangible personal property generally having a useful life of more than one year and an acquisition cost that equals or exceeds the lesser of the established capitalization level of \$5,000 (federal funds) or \$1,000 or hardback bound books not circulated, with a value of \$250.00 or more (state funds).
 - d. Telephone and Utilities: Expenses such as utilities and telephone service costs.
 - e. Travel: Expenses that are necessary, reasonable and allowable for carrying out the project. Travel must be in accordance with Section 112.061, Florida Statutes, which includes submission of the claim on the approved State travel voucher or electronic means and at the authorized meal, per diem and state mileage reimbursement rates.
 - f. Printing and Supplies: Expenses such as office supplies, postage, and printing.
 - g. Building Space: Costs related to lease or mortgage payments.
 - h. Other Costs: Identify these by individual line item and include their associated costs.
 - (3) Client Service costs should be documented via Area Agency on Aging Area Plans, Unit Cost information input into CIRTS, or some other form of documentation to support the cost analysis.
 - (4) The allocation to the agreement will be calculated based on the cost by line item cost divided by the total agreement amount.

**ATTACHMENT K
SERVICE RATE REPORT**

Service Rate Report				
PSA: 10				
	Program: Federally Funded	From 01/01/2015 to 12/31/2015		
Program	SERVICE	Method of Payment	High Reimbursement Rate	Unit Type
ADMINISTRATION	ADMINISTRATIVE COSTS*	Cost Reimbursement	Cost Reimbursement	EPISODES
O3C1	CONGREGATE MEALS	Fixed Fee/Unit Rate	\$6.31	MEALS
	NUTRITION EDUCATION	Fixed Fee/Unit Rate	\$1.86	PARTICIPANT
O3C2	HOME DELIVERED MEALS	Fixed Fee/Unit Rate	\$3.26	MEALS
	NUTRITION EDUCATION	Fixed Fee/Unit Rate	\$0.37	PARTICIPANT
	SCREENING & ASSESSMENT	Fixed Fee/Unit Rate	\$67.90	HOURS
OA3B	ADMINISTRATIVE COSTS (LAN/SET-ASIDE)*	Cost Reimbursement	Cost Reimbursement	EPISODES
	ADULT DAY CARE	Fixed Fee/Unit Rate	\$9.62	HOURS
	CHORE	Fixed Fee/Unit Rate	\$68.29	HOURS
	COUNSELING (GERONTOLOGICAL)- GROUP	Fixed Fee/Unit Rate	\$107.09	HOURS
	COUNSELING (GERONTOLOFICAL)- INDIVIDUAL	Fixed Fee/Unit Rate	\$86.38	HOURS
	EDUCATION/TRAINING- GROUP	Fixed Fee/Unit Rate	\$183.83	EPISODES
	HEALTH SUPPORT - GROUP	Fixed Fee/Unit Rate	\$102.31	HOURS
	HEALTH SUPPORT - INDIVIDUAL	Fixed Fee/Unit Rate	\$65.00	HOURS
	HOMEMAKER	Fixed Fee/Unit Rate	\$20.61	HOURS
	HOUSING IMPROVEMENT	Fixed Fee/Unit Rate	\$73.65	HOURS
	INFORMATION	Fixed Fee/Unit Rate	\$10.16	EPISODES
	INTAKE	Fixed Fee/Unit Rate	\$98.19	HOURS
	LEGAL ASSISTANCE	Fixed Fee/Unit Rate	\$57.31	HOURS
	OUTREACH	Fixed Fee/Unit Rate	\$176.13	EPISODES
	PERSONAL CARE	Fixed Fee/Unit Rate	\$19.36	HOURS
	RECREATION	Fixed Fee/Unit Rate	\$50.95	HOURS
	REFERRAL/ASSISTANCE	Fixed Fee/Unit Rate	\$75.24	EPISODES
	RESPIRE IN-FACILITY	Fixed Fee/Unit Rate	\$10.70	HOURS
	RESPIRE IN-HOME	Fixed Fee/Unit Rate	\$19.36	HOURS
	SCREENING & ASSESSMENT	Fixed Fee/Unit Rate	\$141.53	HOURS
	TRANSPORTATION	Fixed Fee/Unit Rate	\$9.72	TRIPS
OA3D	A MATTER OF BALANCE	Fixed Fee/Unit Rate	\$4,945.17	EPISODES
	ARTHRITIS FOUNDATION EXERCISE PROGRAM	Fixed Fee/Unit Rate	\$1,875.00	EPISODES
	CHRONIC DISEASE SELF-MANAGEMENT PROGRAM	Fixed Fee/Unit Rate	\$1,735.87	EPISODES
	DIABETES SELF-MANAGEMENT PROGRAM	Fixed Fee/Unit Rate	\$1,773.37	EPISODES
	STAY ACTIVE AND INDEPENDENT FOR LIFE (EVIDENCE BASED PROGRAM)	Fixed Fee/Unit Rate	\$18.85	HOURS
	TAI CHI: MOVING FOR BETTER BALANCE	Fixed Fee/Unit Rate	\$2,545.59	EPISODES
	WALK WITH EASE (EVIDENCE BASED PROGRAM)	Fixed Fee/Unit Rate	\$664.29	EPISODES

**ATTACHMENT K
SERVICE RATE REPORT**

<u>Service Rate Report</u>				
PSA: 10				
	Program: Federally Funded	From 01/01/2015 to 12/31/2015		
Program	SERVICE	Method of Payment	High Reimbursement Rate	Unit Type
ADMINISTRATION	ADMINISTRATIVE COSTS	Cost Reimbursement	Cost Reimbursement	EPISODES
O3C1	CONGREGATE MEALS	Fixed Fee/Unit Rate	\$6.31	MEALS
	NUTRITION EDUCATION	Fixed Fee/Unit Rate	\$1.86	PARTICIPANT
O3C2	HOME DELIVERED MEALS	Fixed Fee/Unit Rate	\$3.26	MEALS
	NUTRITION EDUCATION	Fixed Fee/Unit Rate	\$0.37	PARTICIPANT
	SCREENING & ASSESSMENT	Fixed Fee/Unit Rate	\$67.90	HOURS
OA3B	ADMINISTRATIVE COSTS (LAN/SET-ASIDE)	Cost Reimbursement	Cost Reimbursement	EPISODES
	ADULT DAY CARE	Fixed Fee/Unit Rate	\$9.62	HOURS
	CHORE	Fixed Fee/Unit Rate	\$68.29	HOURS
	COUNSELING (GERONTOLOGICAL)- GROUP	Fixed Fee/Unit Rate	\$107.09	HOURS
	COUNSELING (GERONTOLOFICAL)- INDIVIDUAL	Fixed Fee/Unit Rate	\$86.38	HOURS
	EDUCATION/TRAINING- GROUP	Fixed Fee/Unit Rate	\$183.83	EPISODES
	HEALTH SUPPORT - GROUP	Fixed Fee/Unit Rate	\$102.31	HOURS
	HEALTH SUPPORT - INDIVIDUAL	Fixed Fee/Unit Rate	\$65.00	HOURS
	HOMEMAKER	Fixed Fee/Unit Rate	\$20.61	HOURS
	HOUSING IMPROVEMENT	Fixed Fee/Unit Rate	\$73.31	HOURS
	INFORMATION	Fixed Fee/Unit Rate	\$10.86	EPISODES
	INTAKE	Fixed Fee/Unit Rate	\$98.19	HOURS
	LEGAL ASSISTANCE	Fixed Fee/Unit Rate	\$57.31	HOURS
	OUTREACH	Fixed Fee/Unit Rate	\$176.13	EPISODES
	PERSONAL CARE	Fixed Fee/Unit Rate	\$19.36	HOURS
	RECREATION	Fixed Fee/Unit Rate	\$50.95	HOURS
	REFERRAL/ASSISTANCE	Fixed Fee/Unit Rate	\$75.24	EPISODES
	RESPIRE IN-FACILITY	Fixed Fee/Unit Rate	\$10.70	HOURS
	RESPIRE IN-HOME	Fixed Fee/Unit Rate	\$19.36	HOURS
	SCREENING & ASSESSMENT	Fixed Fee/Unit Rate	\$141.53	HOURS
	TRANSPORTATION	Fixed Fee/Unit Rate	\$9.74	TRIPS
OA3D	A MATTER OF BALANCE	Fixed Fee/Unit Rate	\$4,945.17	EPISODES
	ARTHRITIS FOUNDATION EXERCISE PROGRAM	Fixed Fee/Unit Rate	\$1,875.00	EPISODES
	CHRONIC DISEASE SELF-MANAGEMENT PROGRAM	Fixed Fee/Unit Rate	\$1,735.87	EPISODES
	DIABETES SELF-MANAGEMENT PROGRAM	Fixed Fee/Unit Rate	\$1,773.37	EPISODES
	STAY ACTIVE AND INDEPENDENT FOR LIFE (EVIDENCE BASED PROGRAM)	Fixed Fee/Unit Rate	\$18.85	HOURS
	TAI CHI: MOVING FOR BETTER BALANCE	Fixed Fee/Unit Rate	\$2,545.59	EPISODES
	WALK WITH EASE (EVIDENCE BASED PROGRAM)	Fixed Fee/Unit Rate	\$664.29	EPISODES
	ADULT DAY CARE	Fixed Fee/Unit Rate	\$9.62	HOURS

OA3E	CAREGIVER TRAIN/SUPPORT (GRP)	Fixed Fee/Unit Rate	\$2,628.00	HOURS
	CAREGIVER TRAIN/SUPPORT (INDV)	Fixed Fee/Unit Rate	\$83.35	HOURS
	RESPIRE IN-HOME	Fixed Fee/Unit Rate	\$15.00	HOURS
	CAREGIVER TRAIN/SUPPORT (GRP)	Fixed Fee/Unit Rate	\$106.40	HOURS
OA3EG	CAREGIVER TRAIN/SUPPORT (INDV)	Fixed Fee/Unit Rate	\$68.74	HOURS
	CHILD DAY CARE	Fixed Fee/Unit Rate	\$3.74	HOURS
	HOUSING IMPROVEMENT	Fixed Fee/Unit Rate	\$73.65	HOURS
OA3ES	LEGAL ASSISTANCE	Fixed Fee/Unit Rate	\$57.31	HOURS