



*FOUR-YEAR AREA PLAN FY 2020-2023*

*JULY 1, 2019 THROUGH JUNE 30, 2023*

*EASTERN NEBRASKA OFFICE ON AGING*

*ANNUAL BUDGET*

*JULY 1, 2020 THROUGH JUNE 30, 2021*

*Grantor:*

*State Unit on Aging*

*Division of Medicaid & Long-Term Care*

*Department of Health & Human Services*

*P.O. Box 95026*

*Lincoln, NE 68509*

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**AREA AGENCY ON AGING:** \_\_\_\_\_

Application to operate a service project for older Nebraskans under the Older Americans Act, as reauthorized and amended for the period beginning in planning and July 1, 2020 and ending June 30, 2021 service area \_\_\_\_\_

AND

Annual application for support for the period beginning **July 1, 2020** and ending **June 30, 2021**

The applicant agrees to comply with all federal state and local rules, regulations and policies as outlined in the Older Americans Act, as amended, the Nebraska Community Aging Services Act, the Nebraska Care Management Act, the Local Long-Term Care Ombudsman Program; policies and/or regulations established by the NRS-State Unit of Aging and all other applicable rules, regulations, assurances and ordinances. This includes assurances included in this document.

GRANTEE:		Area Agency on Aging Governing Board Chairperson (or comparable official authorized to sign this document):	
Name	<u>Eastern Nebraska Office on Aging</u>	Name	<u>Mary Ann Borgeson</u>
Address	<u>4780 South 13<sup>th</sup> Street</u>	Address	<u>12503 Anne</u>
City	<u>Omaha</u> , NE Zip <u>68137</u>	City	<u>Omaha</u> , NE Zip <u>68137</u>
Phone	<u>(402) 444-6444</u>	Phone	<u>(402) 676-2227</u>
Executive Officer	<u>Dennis Loose</u>		

**APPLICATION FOR FUNDS 7/1/2020 through 6/30/2021**

(Lines 7a, 7b, 17c, 18a, 18b, 18c & 19)

III-B - Supportive Services	<u>\$1,587,666.00</u>
III-C(1) - Congregate Meals	<u>\$1,052,480.00</u>
III-C(2) - Home-Delivered Meals	<u>\$1,423,395.00</u>
III-D - Disease Prevention & Health Promotion	<u>\$12,031.00</u>
III-E - Family Caregivers Support Program	<u>\$598,848.00</u>
VII-Ombudsman & Elder Abuse	<u>\$152,298.00</u>
State Funds (such as Care Management, ADRC, Senior Volunteer) (Lines 17a, 17b, 17c & 19)	<u>\$1,165,574.00</u>
<b>SUBTOTAL</b>	<b><u>\$6,970,088.00</u></b>
Area Agency on Aging Composite Match (Lines 14a-15b)	<u>\$886,350.00</u>
Area Agency on Aging Composite Non-Match (Lines 7D - 7E)	<u>\$1,685,595.00</u>
Area Agency on Aging Composite Gross Cost (Line 9)	<u>\$8,541,534.00</u>

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

Signed

Trish Bergman  
**Trish Bergman**  
 Executive Officer  
 Eastern Nebraska Office on Aging

Mary Ann Borgeson  
**Mary Ann Borgeson**  
 Chairperson  
 Eastern Nebraska Office on Aging

SIGNED COPY INCLUDED WITH STATE PLAN



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## SECTION A - ADMINISTRATIVE

### Description of the Eastern Nebraska Office on Aging

#### ENOA's Mission Statement

*"To help older Nebraskans live independently, live with dignity, and remain for as long as possible in their own homes".*

#### ENOA's History

The Eastern Nebraska Office on Aging (ENOA) was created in 1974 under an inter-local agreement between the counties of Douglas, Sarpy, Dodge, Washington, and Cass for the purpose of planning and providing services for elderly residents. Since 1974, ENOA has grown from providing congregate meal sites to the multi-million dollar agency it is today, contracting and providing a multitude of services and programs for older persons in the five counties.

ENOA's role is to ensure that the older adults within its region have access to a continuum of services that enable them to remain active, independent, and in their own homes for as long as possible. ENOA serves as a gateway to aging services that already exist in the community and also operates its own programs that fill previously unmet needs in the five-county area.

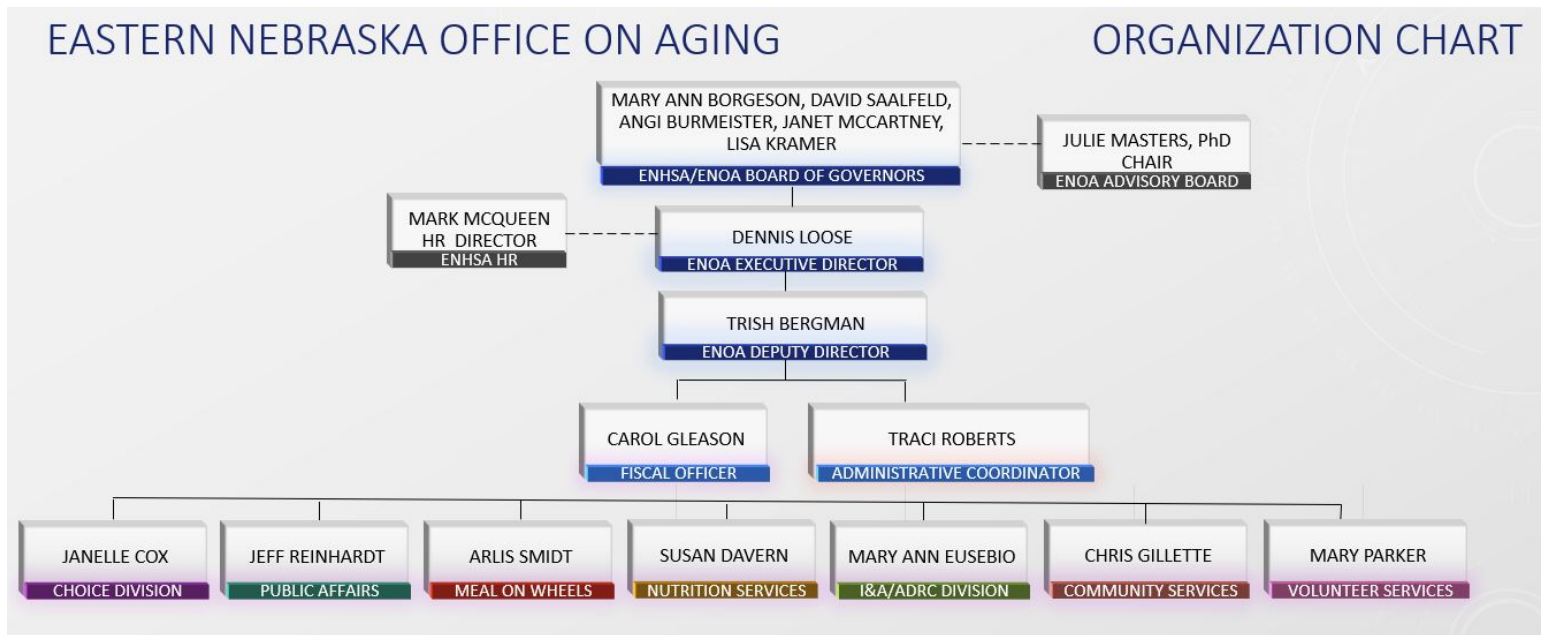
#### Demographic Information

ENOA CLIENTS SERVED BY COUNTY							
	CASS COUNTY	DODGE COUNTY	DOUGLAS COUNTY	SARPY COUNTY	WASHINGTON COUNTY	OTHER	TOTALS
Clients Served	312	805	4591	1,102	398	55	7,263
% by County	4%	11%	63%	15%	6%	<1%	100%



POPULATION OF PLANNING AND SERVICE AREA OVER THE AGE OF 60								
AGE RANGE	ENTIRE STATE	CASS COUNTY	DODGE COUNTY	DOUGLAS COUNTY	SARPY COUNTY	WASHINGTON COUNTY	TOTAL SERVICE AREA	% OF POPULATION
60 - 64	119,111	1,840	2,462	31,563	9,448	1,216	46,529	39%
65 - 74	172,853	2,535	3,500	44,590	13,398	2,054	66,077	38%
75 - 84	89,193	1,262	2,343	19,531	5,890	981	30,007	34%
85+	41,952	454	1,033	9,740	2,881	436	14,544	35%
<b>TOTALS</b>	423,109	6,091	9,338	105,424	31,617	4,687	157,157	<b>37%</b>
# Clients Served		312	805	4591	1102	398		
% Served of County 60+ Population		5%	8%	4%	3%	8%		

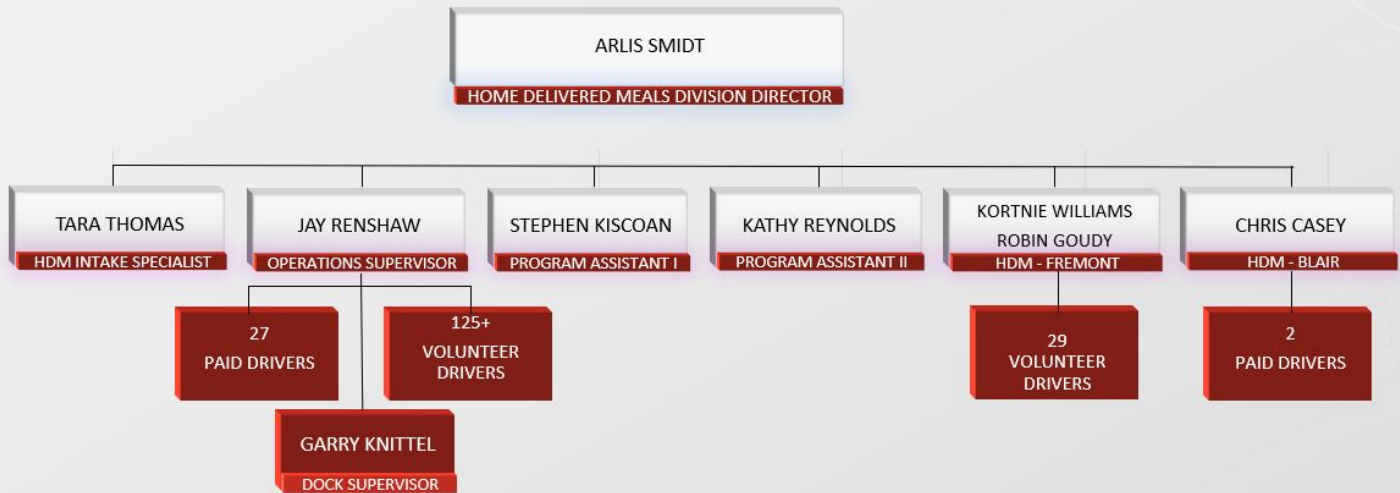
Organizational Charts



## I&A/ADRC DIVISION ORGANIZATION CHART

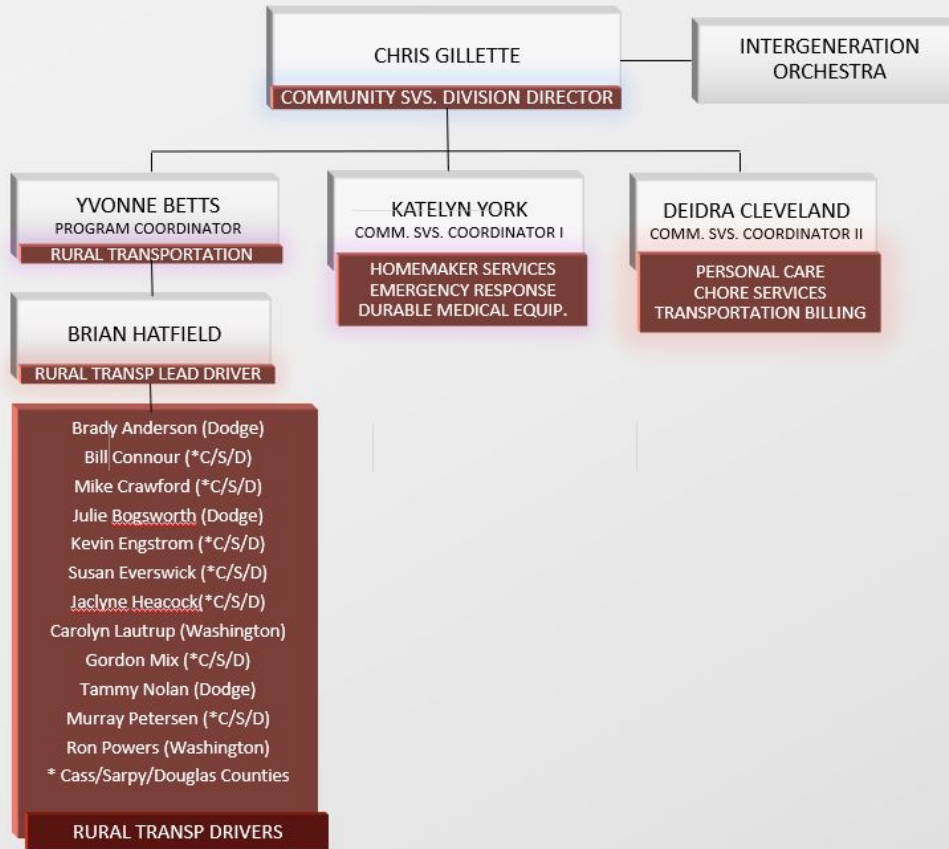


## HOME DELIVERED MEALS DIVISION ORGANIZATION CHART



## COMMUNITY SERVICES DIVISION

## ORGANIZATION CHART



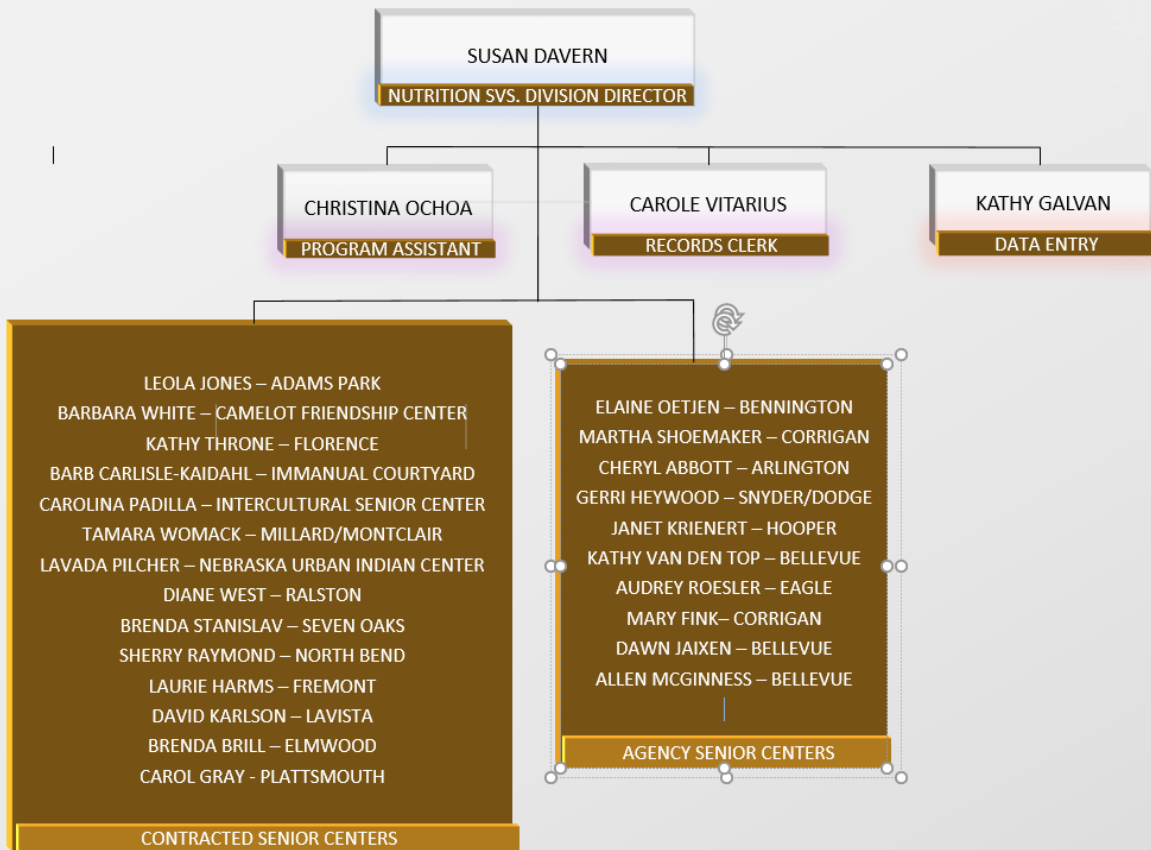
## PUBLIC AFFAIRS DIVISION ORGANIZATION CHART





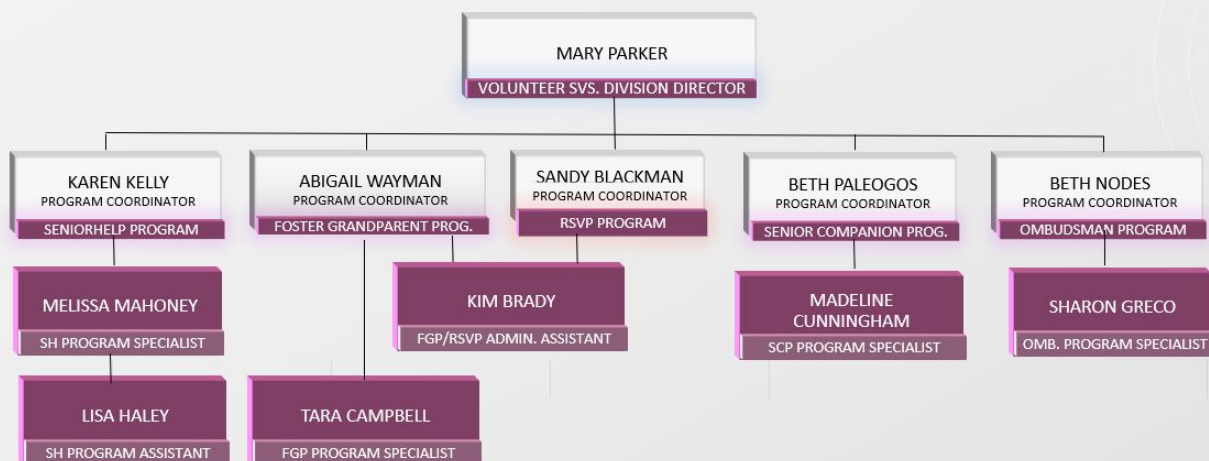
## NUTRITION SERVICES DIVISION

## ORGANIZATION CHART

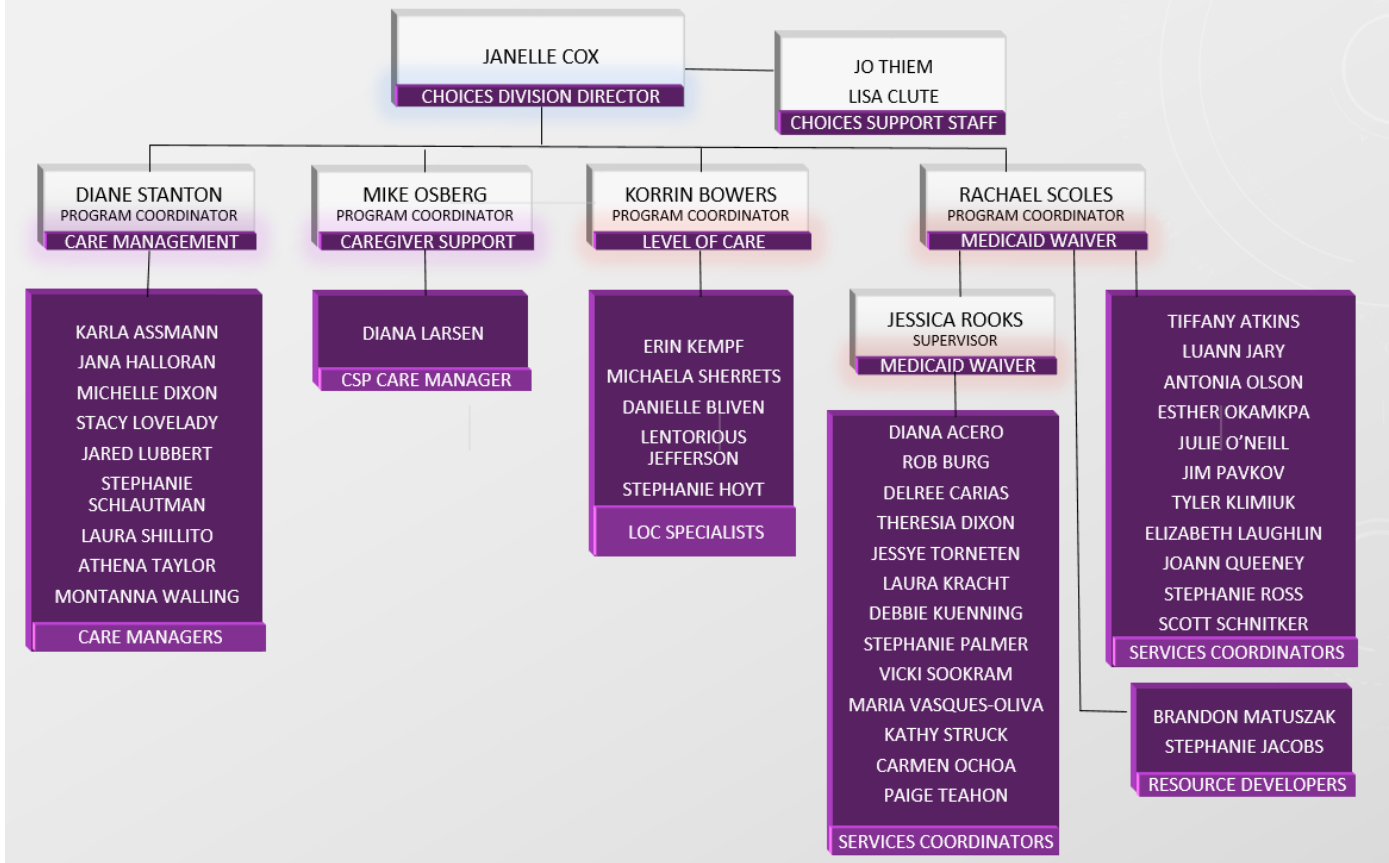


## VOLUNTEER SERVICES DIVISION

## ORGANIZATION CHART



## CHOICES DIVISION ORGANIZATION CHART



## FISCAL DIVISION ORGANIZATION CHART





**Staffing**

<b>ADMINISTRATION</b>		
<b>STAFF MEMBER</b>	<b>TITLE</b>	<b>FTE</b>
Bergman, Trish	Deputy Director	1.0
Foster, Doug	Accounting Clerk	1.0
Gleason, Carol	Fiscal Officer	1.0
VACANT	Executive Director	1.0
Miles, Cynthia	Fiscal Specialist	1.0
Roberts, Traci	Administrative Coordinator	1.0

<b>INFORMATION &amp; ASSISTANCE/ADRC</b>		
<b>STAFF MEMBER</b>	<b>TITLE</b>	<b>FTE</b>
Andersen, Kieran	ADRC Options Counselor	1.0
Cervantes, Petrita	Communications Specialist	1.0
Casey, Chris	Community Resource Specialist	1.0
Eusebio, Mary Ann	I&A/ADRC Division Director	1.0
Root, Peggy	I&A Intake Specialist	1.0

<b>PUBLIC AFFAIRS DIVISION</b>		
<b>STAFF MEMBER</b>	<b>TITLE</b>	<b>FTE</b>
Laudenback, Mitch	Communications Coordinator	1.0
Reinhardt, Jeff	Public Affairs Division Director	1.0



<b>HOME DELIVERED MEALS DIVISION</b>		
<b>STAFF MEMBER</b>	<b>TITLE</b>	<b>FTE</b>
Goudy, Robin	HDM Route Supervisor - Fremont	Temp
Kiscoan, Stephen	HDM Support	1.0
Knittel, Gary	HDM Dock Supervisor	0.6
Renshaw, Jay	HDM Operations Supervisor	1.0
Reynolds, Kathy	HDM Admin Support	0.5
Smidt, Arlis	HDM Division Director	1.0
Thomas, Tara	HDM Specialist	1.0
Williams, Kortnie	HDM Specialist	1.0
27 paid drivers	HDM drivers	Part-time

<b>CONGREGATE MEAL SERVICES</b>		
<b>STAFF MEMBER</b>	<b>TITLE</b>	<b>FTE</b>
Abbott, Cheryl	Senior Center Staff	0.8
Fink, Mary	Senior Center Staff	0.6
Heywood, Gerri	Senior Center Staff	0.3
Jaixon, Dawn	Senior Center Staff	1.0
Krienert, Janet	Senior Center Staff	0.4
McGinness, Al	Senior Center Staff	0.6
Oetjen, Elaine	Senior Center Staff	0.1
Roesler, Audrey	Senior Center Staff	0.1
Shoemaker, Martha	Senior Center Staff	1.0
Van Den Top, Kathy	Senior Center Staff	1.0



<b>NUTRITION DIVISION</b>		
<b>STAFF MEMBER</b>	<b>TITLE</b>	<b>FTE</b>
Davern, Susan	Nutrition Division Director	1.0
Galvan, Kathy	Nutrition Admin Support	1.0
Ochoa, Christina	Nutrition Program Assistant	1.0
Vitarius, Carole	Nutrition Admin Support	0.7

<b>VOLUNTEER SERVICES DIVISION</b>		
<b>STAFF MEMBER</b>	<b>TITLE</b>	<b>FTE</b>
Walker, Sandy	RSVP Program Coordinator	1.0
Brady, Kim	FGP/RSVP Administrative Assistant	0.6
Campbell, Tara	FGP Program Specialist	1.0
Cunningham, Maddie	SCP Program Specialist	1.0
Greco, Sharon	Ombudsman Program Specialist	0.6
Haley, Lisa	SeniorHelp Program Assistant	0.9
Kelly, Karen	SeniorHelp Program Coordinator	1.0
Mahoney, Melissa	SeniorHelp Program Specialist	1.0
Nodes, Beth	Ombudsman Program Coordinator	1.0
Paleogos, Beth	SCP Program Coordinator	1.0
Parker, Mary	Volunteer Services Division Director	1.0
Wayman, Abigail	FGP Program Coordinator	1.0



<b>COMMUNITY SERVICES DIVISION</b>		
<b>STAFF MEMBER</b>	<b>TITLE</b>	<b>FTE</b>
Anderson, Brady	Rural Transportation Driver	(Temp.)
Betts, Yvonne	Rural Transp. Prog. Coordinator	1.0
Bogseth, Julie	Rural Transportation Driver	
Cleveland, Deidra	Community Services Coordinator II	1.0
Connour, William	Rural Transportation Driver	0.7
Crawford, Michael	Rural Transportation Driver	0.9
Engstrom, Kevin	Rural Transportation Driver	1.0
Everswick, Susan	Rural Transportation Driver	1.0
Gillette, Chris	Comm Svs. Division Director	1.0
Hatfield, Brian	Rural Transportation Lead Driver	1.0
Heacock, Jaclyne	Rural Transportation Driver	1.0
Lautrup, Carolyn	Rural Transportation Driver	1.0
Mix, Gordon	Rural Transportation Driver	1.0
Nolan, Tammy	Rural Transportation Driver	1.0
Petersen, Murray	Rural Transportation Driver	0.8
Powers, Ronald	Rural Transportation Driver	1.0
York, Katelyn	Community Services Coordinator I	1.0



<b>CHOICES Division</b>		
<b>STAFF MEMBER</b>	<b>TITLE</b>	<b>FTE</b>
Acerro, Diana	Waiver Services Coordinator	0.9
Assmann, Karla	Care Manager	1.0
Atkins, Tiffany	Waiver Services Coordinator	1.0
Bliven, Danielle	LOC Specialist	1.0
Bowers, Korrin	LOC Program Coordinator	1.0
Burg, Robert	Waiver Services Coordinator	1.0
Carias, Delree	Waiver Services Coordinator	1.0
Clute, Lisa	Waiver Services Support	1.0
Cox, Janelle	CHOICES Division Director	1.0
Dixon, Michelle	Care Manager	1.0
Dixon, Theresia	Waiver Services Coordinator	1.0
Halloran, Jana	Care Manager	1.0
Hoyt, Stephanie	Waiver Services Coordinator	1.0
Jacobs, Stephanie	MW Resource Developer	1.0
Jary, Luann	Waiver Services Coordinator	1.0
Jefferson, Lentorious	LOC Specialist	1.0
Kempf, Erin	LOC Specialist	1.0
Klimiuk, Tyler	Waiver Services Coordinator	1.0
Kracht, Laura	Waiver Services Coordinator	1.0
Kuenning, Debbie	Waiver Services Coordinator	1.0
Larsen, Diana	Care Manager – Caregiver Support	1.0
Laughlin, Liz	Waiver Services Coordinator	1.0
Lovelady, Stacy	Care Manager	1.0



<b>CHOICES Division (continued)</b>		
<b>STAFF MEMBER</b>	<b>TITLE</b>	<b>FTE</b>
Luebbert, Jared	Care Manager II	1.0
Matuszak, Brandon	Resource Development Clerk	1.0
Ochoa, Carmen	Waiver Services Coordinator	1.0
Okamkpa, Esther	Waiver Services Coordinator	1.0
Olson, Antonia	Waiver Services Coordinator	1.0
O'Neill, Julie	Waiver Services Coordinator	1.0
Osberg, Mike	Caregiver Support Pgm Coordinator	1.0
Palmer, Stephanie	Waiver Services Coordinator	1.0
Pavkov, Jim	Waiver Services Coordinator	1.0
Queeney, Joann	Waiver Services Coordinator	1.0
Rooks, Jessica	Medicaid Waiver Supervisor	1.0
Ross, Stephanie	Waiver Services Coordinator	1.0
Schlautman, Stephanie	Care Manager	1.0
Schnitker, Scott	Waiver Services Coordinator	1.0
Scoles, Rachael	Waiver Program Coordinator	1.0
Sherrets, Michaela	LOC Specialist	1.0
Shillito, Laura	Care Manager	1.0
Sookram, Vicki	Waiver Services Coordinator	1.0
Stanton, Diane	CM Program Coordinator	1.0
Struck, Katherine	Waiver Services Coordinator	0.5
Taylor, Athena	Care Manager	1.0
Teahon, Paige	Waiver Services Coordinator	1.0
Torneten, Jessye	Waiver Services Coordinator	1.0
Vasquez, Maria	Waiver Services Coordinator	1.0
Walling, Montana	Care Manager	1.0





**Governing Board**

ENOA Governing Board members are appointed every January by each County Board Chairman for the counties of Douglas, Sarpy, Dodge, Washington and Cass Counties. Board and Alternate members are appointed for a two-year time period and may be re-appointed at the discretion of the newly elected County Board Chairmen. The Governing Board reviews bids, approves contracts and capital expenditures, reviews area plans and approves budgets, and sets policies for the agency.

*Members:*

<b>Name &amp; County</b>	<b>Position</b>	<b>Address</b>	<b>Phone</b>	<b>Email</b>
<b>Mary Ann Borgeson</b>  Douglas County	Chair	12503 Anne Omaha, NE 68137	(402) 444-7025	<a href="mailto:commissionerborgeson@cox.net">commissionerborgeson@cox.net</a>
<b>Lisa Kramer</b>  Washington County	Member	PO Box 466 Blair, NE 68008	(402) 426-6822	<a href="mailto:Lisa.kramer2@washingtoncountyne.org">Lisa.kramer2@washingtoncountyne.org</a>
<b>David Saalfeld</b>  Dodge County	Member	684 County Rd Q North Bend, NE 68649	(402) 317-1306	<a href="mailto:daveredfox@hotmail.com">daveredfox@hotmail.com</a>
<b>Janet McCartney</b>  Cass County	Vice-Chair	Cass Co Cthouse Rm 101 Plattsmouth, NE 68048	(402) 298-7168	<a href="mailto:jmmccart@jagwireless.net">jmmccart@jagwireless.net</a>
<b>Angi Burmeister</b>  Sarpy County	Member	1301 South 75 St. Suite 100 Omaha, NE 68124	(402) 827-7000 ext. 104	<a href="mailto:aburmeister@sarpy.com">aburmeister@sarpy.com</a>

**ENOA Advisory Council**

The ENOA Advisory Council works as an advocate for the older adults of the 5 county area and is charged with furthering the agency’s mission of developing and coordinating community-based systems of services for all older persons in the planning and service area.



*Members:*

<b>Name</b>	<b>Position</b>	<b>Address</b>	<b>Phone</b>	<b>Email</b>
<b>Julie Masters</b>	Chair	6001 Dodge St Omaha, NE 68182-0202	(402) 554-3953	<a href="mailto:jmasters@unomaha.edu">jmasters@unomaha.edu</a>
<b>Jane Prochaska</b>	Vice Chair	1302 S. 101 <sup>st</sup> St. Omaha, NE 68124	(402) 689-2800	<a href="mailto:jprochaska@cox.net">jprochaska@cox.net</a>
<b>Mel Luetchens</b>	Member	33919 Waverly Road Murdock, NE 68407-2141	(402) 450-3924	<a href="mailto:mluetchens@yahoo.com">mluetchens@yahoo.com</a>
<b>Jane Potter</b>	Member	986155 UNMC Omaha, NE 68198-6155	(402) 559-7517	<a href="mailto:jpotter@unmc.edu">jpotter@unmc.edu</a>
<b>Bridget Rolenc</b>	Member	8511 W. Dodge Omaha, NE 68114	(402) 680-4423	<a href="mailto:brolesc@gmail.com">brolesc@gmail.com</a>
<b>Margaret Schafer</b>	Member	209 South 19 <sup>th</sup> Omaha, NE 68102	(402) 348-1069 ext. 225	<a href="mailto:mschaefer@legalaidofnebraska.com">mschaefer@legalaidofnebraska.com</a>
<b>Marilyn Wegehaupt</b>	Member	12218 Crawford Circle Omaha, NE 68102	(402) 334-2896	<a href="mailto:mmwegehaupt@gmail.com">mmwegehaupt@gmail.com</a>
<b>Kelly Rupp</b>	Member	6901 N. 72 <sup>nd</sup> St. Omaha, NE 68122	(402) 281-5020	<a href="mailto:Kelly.Rupp@pandogeriatrics.com">Kelly.Rupp@pandogeriatrics.com</a>
<b>Sharon Stephens</b>	Member	11711 Arbor St. Suite 110 Omaha, NE 68114	(402) 639-1983	<a href="mailto:sstephens@alz.org">sstephens@alz.org</a>

**Services**

See updated Contractor/MOU Details in SFY21 Area Plan Budget Template.



## SECTION B – PROGRAM GOALS, OBJECTIVES AND STRATEGIES

### Goal 1: Advocacy

Advocate to ensure the interests of people with disabilities, older adults, and their family members are reflected in the design and implementation of public policies and programs.

#### Objective 1:

Increase public awareness and understanding of the interests of people with disabilities, older adults, and their family members.

##### *Strategy 1:*

Increase public awareness through public speaking, social media, paid and unpaid.

##### Performance Measure:

1. Agency will continue to accept public speaking engagements.
2. Agency will conduct at least one presentation at one of the monthly meetings of the Partnerships In Aging.
3. Agency will staff a display booth at two Health Fairs each year in the PSA.

##### *Strategy 2:*

Seek opportunities for ENOA to collaborate on messaging and awareness opportunities.

##### Performance Measures:

1. Participate in meetings with Director of Medicaid at least twice a year.
2. Document the number of meetings with collaborating partners in FY20 to establish a baseline and then increase the number of meetings with collaborating partners by 2% in each of the following years.
3. Continue to advocate through articles in six of the twelve issues annually of ENOA's "New Horizons" newspaper.

#### Objective 2:

Engage Federal, State, and Local policy makers and other partners to ensure existing policies and programs optimally reflect the interest of people with disabilities, older adults, and their family members.

##### *Strategy:*

Communicate and educate Federal, State, and Local policy members to influence public policy related to people with disabilities, older adults, and their family members.



Performance Measures:

1. Maintain annual contact with at least two (2) State Senators and their staff.
2. Review relevant policies annually with the ENOA Governing Board.
3. Review policies at ENOA quarterly Advisory Council meetings.

**Objective 3:**

Lead the development and implementation of new public policies and programs that advance the interest of people with disabilities, older adults, and their family members.

*Strategy:*

Work collaboratively with advocacy groups, AARP, caregivers, Disability Community, Colleges and Universities and others with similar interests.

Performance Measures:

1. In FY20 document the contacts with collaborative partners to establish a baseline and increase contact opportunities with collaborative partners by 2% in the following fiscal years.
2. Maintain quarterly ADRC Disability Partner Contacts.
3. Do two presentations on ENOA to students at UNO Gerontology classes.

**Goal 2: Protect Rights and Prevent Abuse**

Protect and enhance the rights; and prevent the abuse, neglect, and exploitation of older adults and people with disabilities.

**Objective 1:**

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

*Strategy 1:*

Develop strategic partnerships that encourage, educate, and empower stakeholders on the rights and prevention of abuse, neglect, and exploitation of older adults and people with disabilities.

Performance Measure:

1. Maintain units of legal assistance. 3,390 actual units for FY19. Projected units for FY20 is 3300.

*Strategy 2:*

Continue partnerships with disability partners, APS, and others to support elder rights and prevent abuse, neglect, and exploitation.



Performance Measures

1. Increase newsletter articles, financial publications, and social media awareness on Elder abuse and financial exploitation. The numbers will be tracked for FY20 to establish the baseline and then increased by 2% each of the next three years.
2. Have an annual training for ENOA staff on signs of abuse, neglect and/or financial exploitation.

**Objective 2:**

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

*Strategy:*

Implement tools for the education and empower stakeholders that include public speaking engagements, websites, outreach, and printed materials.

Performance Measure:

1. Request an annual presentation from the Office of Public Guardian for ENOA staff.

**Objective 3:**

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

*Strategy:*

Through legal service representation, elder access line, Ombudsman, and presentations to the staff and the public, promote awareness of rights and prevent abuse, neglect, and exploitation of older adults and people with disabilities.

Performance Measure:

1. Increase number of client contacts through the Ombudsman program each year by 3%. Projected baseline for FY19 was 480. Our projected number of contacts for FY20 is 1904 due to the increase in advocates.
2. Increase the number of Ombudsman Advocates by 5. Baseline for FY19 was 37. Projected amount for FY20 is 45.
3. Provide annual Ombudsman report to ENOA governing Board and Advisory Council.



### **Goal 3: Individual Self Determination & Control**

Work with older adults and people with disabilities as they fully engage and participate in their communities, make informed decisions, and exercise self-determination and control about their independence, well-being, and health.

#### **Objective 1:**

Promote programs and strategies that support community integration for older adults and people with disabilities.

##### *Strategy 1:*

Provide older adults and people with disabilities, information, education, and counseling on their options to live as independently as possible in the community.

##### *Performance Measures:*

1. Maintain number of persons served through Care Management. Baseline for FY19 was 1,470 persons served.
2. Increase the number of units of service for I&R and number of hours for Options Counseling through the ADRC by 2%. Baseline units for FY19; I&R 797 units; Options Counseling 35 hours.
3. Maintain the number of units of evidence-based programs and practices that empower individuals to improve the quality of their health, independence and well-being. Project units for FY19 are 17,577 sessions. The taxonomy for FY20 changes to clients served not sessions. Estimate 427 clients served for FY20, the actual number of clients served in FY20 will become the baseline.

### **Goal 4: Long-Term Services and Supports**

Enable people with disabilities and older adults to live in the community through the availability of and access to high-quality long-term services and supports, including supports for families and caregivers.

#### **Objective 1:**

Provide comprehensive information to empower eligible individuals to make informed choices regarding long-term care services and supports.

##### *Strategy:*

Increase public awareness through radio and TV ads, public speaking, social media, paid and unpaid media.



Performance Measure:

1. Maintain and update annually I&A resource lists.

**Objective 2:**

Ensure that the ADRC is an ongoing component of Nebraska's long-term care continuum, and that ADRC sites coordinate and establish partnerships with organizations specializing in serving aging persons and persons with congenital and acquired disabilities.

*Strategy:*

Communicate and educate Federal, State, and Local policy members to influence public policy related to older adults and people with disabilities.

Performance Measure:

1. Attend or participate through electronic meetings with Medicaid Administration leadership such as the Long-term Care Services and Supports Redesign Plan implementation meetings. In FY19 these were mostly monthly meetings but are at the discretion of the Medicaid agency.
2. Maintain existing I&R and Options Counseling ADRC services.
3. Provide annual report on ADRC to the ENOA Governing Board and Advisory Council.

**Objective 3:**

Promote a convenient point of entry to eligible individuals seeking information and access to long-term care services and supports.

*Strategy:*

Continue to explore and work with the State Medicaid Agency in the development and implementation of a No Wrong Door system.

Performance Measure:

1. Continue to have representation from the Association and participate in committees and subcommittees for a No Wrong Door system. These are meetings scheduled by the Medicaid agency, no set number a year have been established.

**Objective 4:**

Explore opportunities for sustainability of the Nebraska ADRC.



*Strategy 1:*

Advocate with the Nebraska Legislature to increase, and make permanent, funding for the ADRC.

*Performance Measure:*

1. Provide information on funding needs and benefits of the ADRC with individual Board Members, Nebraska Senators, and the Association Lobbyist.
2. Participate with the State Medicaid Division on application for Medicaid Administrative match to increase funding.

**Goal 5: Effective and Responsive Management**

Implement management and workforce practices that support the integrity and efficient operations of programs serving people with disabilities and older adults, and ensure stewardship of taxpayers' dollars.

**Objective 1:**

Implement management improvement activities, including program integrity and internal control initiatives, to strengthen business processes, improve efficiency, and promote accountability.

*Strategy:*

Research and share best practices among the Area Agencies on Aging.

*Performance Measure:*

1. Share program integrity and internal controls information about ENOA at one of the monthly Nebraska Association of Area Agencies on Aging meetings.
2. Share the similar information learned about other AAA's at one of the ENOA Management Team's monthly meetings.

**Objective 2:**

Utilize emerging technologies and leverage shared services to promote innovation, improve accessibility, and better support our mission.

*Strategy:*

Utilize new State software to record and report activities.





Performance Measure:

1. At least one Management staff will participate in training and implementation of the new software. Key staff will be required to attend the trainings that pertain to their programs.

## **Planning Process**

Over the past 45 years ENOA has developed various Multi-Year plans in numerous formats. No matter the planning cycle, we have developed annual plans that revolve around funding, or lack of funding, and changes from year to year in services authorized and participation in those services. The value of planning is obvious, you lay out where you want to go and then try to demonstrate a road map of how you are going to get there. A host of factors impact those decisions and to ENOA and the rest of the aging network, not only in Nebraska, but nationally we are challenged by the rising numbers of elderly that will be needing the various levels of services and supports that is not being matched by the resources to meet those needs. Expectations by federal and state officials to increase services to meet the growing needs without additional resources requires us to “pull the rabbit out of a hat.”

## **Program Goals, Objectives and Strategies**

ENOA’s Multi Year plan builds on a number of factors. This year the Federal Administration for Community Living’s (ACL) five goals, that were adopted in 2013, were the basis used by the State Unit on Aging in conjunction with the Area Agencies on Aging state-wide to provide consistency across the Planning and Service Areas. The AAA Directors spent time at the monthly NE4A meetings to determine the objectives and the strategies to meet the stated goals to achieve that consistency state-wide. The objectives and strategies to accomplish the stated goals reflect a realistic approach, which does not and cannot show a lot of growth, but an effort to maintain the various levels of services due to a lack of resources to accomplish much if any growth.

## **Priorities**

Not only are Federal, State and Local resources not matching the increasing need, in many instances they have been flat or reduced over the years. This forces the agency to constantly evaluate priorities in both programs and the numbers who can be served. Difficult decisions and choices seem to be required almost daily on service levels and who can or can’t be served. Prior Multi-Year plans allowed the opportunity to dream a little and put in things we would like to achieve if resources would come available, that is no longer the case. Now we can only put in those plans what we realistically can achieve since we are evaluated on whether or not we are accomplishing the Goals, Objectives and the Strategies to meet them. Over projecting persons served or service



levels is inviting criticism for noncompliance with those projected numbers when those responsible for monitoring the plans conduct their evaluations.

### **Nutrition Services**

It is no secret that senior center participation in many instances is on the decline due to changing attitudes of seniors entering the age groups that have historically attended the centers. To be successful now, centers have to implement innovation in programming and do fund raising to keep relevant. ENOA spends considerable time working with center managers and staff to provide innovation and training to adjust programming to attract new participants. ENOA also funds health and wellness programs that focus on fall prevention through proven evidence based programs. Our nutrition services include one on one nutritional risk assessment and counseling along with supplements for those individuals at risk.

### **Meals on Wheels (MOW)**

ENOA continues to promote the importance of our Meals on Wheels service. One would assume that since the number of frail older persons is increasing, so would the demand for MOW, we are finding that is not the case. The numbers are actually declining even though we have added communities where the MOW are provided. The catered meals are of high quality and flavor is very good. In determining the reasons for the declining use, we assume the rapid expansion of options must be a contributing factor. In the super markets there are now rows of frozen or ready to serve meals that are low cost as well as desirable and can be prepared by homebound seniors on their schedule and not have to wait for the daily delivery. In addition, numerous home delivery options continue to increase.

### **In-Home Supportive Services**

Other services are increasing in demand and ENOA continues to be as innovative as we can to meet those needs. In-home supportive services such as Personal Care, Housekeeping, Chore service, Respite, Personal Emergency Response Systems, Durable Medical Equipment and Care Giver Support have grown steadily, as has the need to for effective case management for those families and individuals needing those services.

### **Transportation**

Transportation has always been a high need for all communities and ENOA's Rural Transportation Program has increased steadily over the years and demand is extremely high to continue to increase the availability. We are currently working with ENOA's Governing Board on potential options in hopes to increase the transportation program.

### **I&A/ADRC**

Information and Assistance requests continue to increase requiring the I&A staff to continually educate themselves on all resources in order to provide the appropriate and current information callers are needing. The implementation of the Aging and Disability



Resource Center (ADRC) has allowed these same staff to get in-depth training on resources and develop contacts at the various agencies and providers to allow for an effective evaluation of what the needs are and making the right referral the first time. Currently we are only able to plan and commit to provide two of the ADRC services. We are working with the State Medicaid Division on Medicaid Administrative Match in hopes that will increase the funds available to move towards a full functioning ADRC and the No Wrong Door concept.

### **Legal Assistance**

Requests for Legal Assistance is steadily increasing and we highly value our relationship with Legal Aid of Nebraska and their Elder Access Line that provides legal advice to many of our elderly.

### **Volunteer Programs**

ENOA has always taken pride in our Volunteer Programs and their high quality. The Foster Grandparent Program, the Senior Companion Program, the Retired Senior Volunteer Program, ENOA's Senior Help Program and the Long Term Care Ombudsman all continue to function at a high level of excellence. The Long Term Care Ombudsman Program has recruited and trained more Volunteer Advocates than anyone had thought possible this year and they show no signs of slowing down on recruitment efforts agency wide. That program and throughout the agency we are constantly stressing the rights of the vulnerable elderly, whether in a facility or in their homes, and provide training to ENOA staff and others on elder abuse and neglect.

### **CHOICES**

ENOA's Care Management program continues to offer the needed services for many at risk seniors to stay in their own homes as long as possible.

The Medicaid Waiver Case Management case load continues to increase and provides significant savings to the State of Nebraska's Medicaid program. This year we implemented a Level of Care unit to do the determination of level of care needs for Medicaid applicants in long term care facilities. This now allows for Conflict Free Case Management which is a requirement of the Medicaid program. The need for Care Giver Support continues to get more attention and ENOA's Care Giver support Program is another high demand service whose growth is hindered by lack of adequate funding.

### **Public Information**

We are in a time where information needs to be accessed fast and requires our Public Information staff to keep up with the rapidly changing technology, utilize social media and to constantly look for ways to enhance our message.

### **Partnerships**

ENOA firmly believes that partnering with the medical community is vitally important in improving the health and positive outcomes of individuals that are and have been



experiencing medical setbacks to improve their health by addressing the social determinants. We have been involved in the Care Transition program and have worked with other medical providers trying to establish that partnership. More and more those in the medical community are recognizing the value of partnering with home and community based service agencies to address those social determinants to achieve positive healthy outcomes for their patients and cost savings. We are exploring successful programs implemented in other AAA's and we will continue to pursue partnerships in our Planning and Service Area.

### **Fair Labor Standards Act**

ENOA works closely with the Eastern Nebraska Human Services Agency Human Resources staff as well as our legal partners to ensure we meet all requirements of the Act and to react to any proposed changes.

### **Future Success**

To stay on top of all this requires the constant evaluating of priorities and adjustments to meet those priorities. Planning is no longer reserved for a set period of time during the year, it is ongoing and constantly adjusted, sometimes subtle and sometimes not so subtle. While our Multi-Year Plan may not show much in the way of growth, this plan will clearly reflect that we are not standing still, but moving forward to meet the challenges and opportunities in the short and long term to meet our mission. ENOA has a very supportive and engaged Governing Board and we are very fortunate to have an exceptional Advisory Council whose members are informed and advocate for the needs of those we are charged with serving. It is the staff of ENOA that makes the engine run, and ENOA is staffed with dedicated professionals that excel at what they do. It is an honor and privilege to be involved with such a dynamic agency and the opportunities presented for future success in meeting our mission.



## SECTION C – SERVICES

### 1. Personal Care

ENOA

Service Narrative:  
**1. Personal Care**

FY 2020-23

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

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

This service provides personal care in the home for frail older adults who are not eligible for personal care services under Medicare or Medicaid and meet ENOA Care Management criteria. Personal Care Services Program contracts with local home care agencies to provide personal care aides for ENOA Care Management clients, 60 years of age and older. The aides visit the home at a scheduled time and can perform a variety of personal care services such as assistance with bathing, washing hair and personal grooming. The service is provided by contracted home health care agencies in Douglas, Sarpy, Cass, Dodge and Washington counties. There are no changes in this service for the coming fiscal year.



## 2. Homemaker

ENOA

Service Narrative:

FY 2020-23

### 2. Homemaker

<b>Definition:</b> Performance of light housekeeping tasks provided in a person's home and possibly other community settings. Task may include preparing meals, shopping for personal items, managing money, or using the telephone, in addition to light housework.			
<b>Service Unit:</b> Hour		<b>Setting:</b> One-on-One	
		Registered Service	
<b>Eligibility:</b> Individual must be 60 years old or older			
<b>Client Details:</b>			
<input checked="" type="checkbox"/>	<b>Collect ADLs</b>	<input type="checkbox"/>	Client may be Anonymous
<input checked="" type="checkbox"/>	<b>Collect IADLs</b>	<input checked="" type="checkbox"/>	<b>Client may Self-Direct this Service</b>
<input type="checkbox"/>	Collect NRA Score	<input type="checkbox"/>	Client may use Voucher
<b>Other Reporting Requirements:</b> N/A			
<b>Possible Funding Sources:</b>			
<input type="checkbox"/>	III-A (NSIP Raw Food)	<input type="checkbox"/>	III-D (Health Pro)
<input checked="" type="checkbox"/>	<b>III-B (Supportive Service)</b>	<input type="checkbox"/>	III-E (Caregiver)
<input type="checkbox"/>	III-C1 (Congregate Meal)	<input checked="" type="checkbox"/>	<b>CASA (State Aging)</b>
<input type="checkbox"/>	III-C2 (Home Delivered Meal)	<input type="checkbox"/>	Care Management (State)
		<input type="checkbox"/>	ADRC (State)
		<input checked="" type="checkbox"/>	<b>Local</b>
		<input checked="" type="checkbox"/>	<b>Other</b>
		<input type="checkbox"/>	May be MAC Eligible
<b>Provider Requirements:</b>		A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

The Homemaker program provides light housekeeping and shopping services for older individuals who are physically unable to perform these tasks to assist them to maintain their own home and remain independent for as long as possible. Recipients must be age 60 or older and must have an ENOA Care Manager to qualify for this services. The Homemaker Service is contracted with agencies in Douglas, Sarpy, Cass, Dodge and Washington Counties. **FY21 - The only change was the addition of shopping services during the COVID19 disaster declaration.**



### 3. Chore

ENOA

Service Narrative:

FY 2020-23

#### 3. Chore

<b>Definition:</b> Performance of heavy household tasks provided in a person's home and possibly other community settings. Tasks may include yard work or snow removal, in addition to heavy housework.			
<b>Service Unit:</b> Hour		<b>Setting:</b> One-on-One	
Registered Service			
<b>Eligibility:</b> Individual must be 60 years old or older			
<b>Client Details:</b>			
<input checked="" type="checkbox"/>	<b>Collect ADLs</b>	<input type="checkbox"/>	Client may be Anonymous
<input checked="" type="checkbox"/>	<b>Collect IADLs</b>	<input checked="" type="checkbox"/>	<b>Client may Self-Direct this Service</b>
<input type="checkbox"/>	Collect NRA Score	<input type="checkbox"/>	Client may use Voucher
<b>Other Reporting Requirements:</b> N/A			
<b>Possible Funding Sources:</b>			
<input type="checkbox"/>	III-A (NSIP Raw Food)	<input type="checkbox"/>	III-D (Health Pro)
<input checked="" type="checkbox"/>	<b>III-B (Supportive Service)</b>	<input type="checkbox"/>	III-E (Caregiver)
<input type="checkbox"/>	III-C1 (Congregate Meal)	<input checked="" type="checkbox"/>	<b>CASA (State Aging)</b>
<input type="checkbox"/>	III-C2 (Home Delivered Meal)	<input type="checkbox"/>	Care Management (State)
		<input type="checkbox"/>	ADRC (State)
		<input checked="" type="checkbox"/>	<b>Local</b>
		<input checked="" type="checkbox"/>	<b>Other</b>
		<input type="checkbox"/>	May be MAC Eligible
<b>Provider Requirements:</b>		A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

**Detailed description of how service is provided.**

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - The Chore service includes lawn mowing from May-October and snow removal from November – March, as well as extermination services for clients that have an ENOA Care Manager. **FY21 - ENOA will no longer be offering the snow removal or lawn mowing services. The only Chore service that will be provided will be extermination services for clients that have an ENOA Care Manager. ENOA works with providers in Douglas, Sarpy, Cass, Dodge and Washington counties through letters of agreement.**



## 4. Home Delivered Meals

ENOA

Service Narrative:

FY 2020-23

### 4. Home Delivered Meals

<b>Definition:</b> A meal provided to an OAA qualified individual in his/her place of residence. The meal is served in a program administered by SUAs and/or AAAs and meets all the requirements of the Older Americans Act and all applicable laws. Meals provided to an individual through means-tested programs may be included.																	
Caregivers (Older Relative or Family) can receive III-E funded Home Delivered Meals. If III-E is used to fund the meal, the meal should be counted under Caregiver Supplemental Services.																	
<b>Service Unit:</b> Meal	<b>Setting:</b> One-on-One	Registered Service															
<b>Eligibility:</b> <ul style="list-style-type: none"> <li>• Individual must be 60 years old or older &amp; unable to attend a Congregate Meal, OR</li> <li>• Spouse of an Eligible Individual (60 years or older that is unable to attend a Congregate Meal), OR</li> <li>• Dependent Individual with Disability that lives with an Individual an Eligible Individual (60 years or older that is unable to attend a Congregate Meal)</li> </ul> Note: Each AAA determines how “unable to attend a Congregate Meal” is defined. This can include, but is not limited to: being homebound or having 2+ ADLs. Each AAA should have a policy to determine eligibility.																	
<b>Client Details:</b> <table border="0"> <tr> <td><input checked="" type="checkbox"/> <b>Collect ADLs</b></td> <td><input type="checkbox"/> Client may be Anonymous</td> </tr> <tr> <td><input checked="" type="checkbox"/> <b>Collect IADLs</b></td> <td><input type="checkbox"/> Client may Self-Direct this Service</td> </tr> <tr> <td><input checked="" type="checkbox"/> <b>Collect NRA Score</b></td> <td><input checked="" type="checkbox"/> <b>Client may use Voucher</b></td> </tr> </table>			<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service	<input checked="" type="checkbox"/> <b>Collect NRA Score</b>	<input checked="" type="checkbox"/> <b>Client may use Voucher</b>									
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous																
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service																
<input checked="" type="checkbox"/> <b>Collect NRA Score</b>	<input checked="" type="checkbox"/> <b>Client may use Voucher</b>																
<b>Other Reporting Requirements:</b> Meals that are funded with other funding sources (Med-waiver or Title XX) must be marked.																	
<b>Possible Funding Sources:</b> <table border="0"> <tr> <td><input checked="" type="checkbox"/> <b>III-A (NSIP Raw Food)</b></td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input type="checkbox"/> III-B (Supportive Service)</td> <td><input type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> <b>Local</b></td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> <b>CASA (State Aging)</b></td> <td><input checked="" type="checkbox"/> <b>Other</b></td> </tr> <tr> <td><input checked="" type="checkbox"/> <b>III-C2 (Home Delivered Meal)</b></td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> <tr> <td></td> <td colspan="2"><input type="checkbox"/> May be MAC Eligible</td> </tr> </table>			<input checked="" type="checkbox"/> <b>III-A (NSIP Raw Food)</b>	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)	<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>	<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>	<input checked="" type="checkbox"/> <b>III-C2 (Home Delivered Meal)</b>	<input type="checkbox"/> Care Management (State)			<input type="checkbox"/> May be MAC Eligible	
<input checked="" type="checkbox"/> <b>III-A (NSIP Raw Food)</b>	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)															
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>															
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>															
<input checked="" type="checkbox"/> <b>III-C2 (Home Delivered Meal)</b>	<input type="checkbox"/> Care Management (State)																
	<input type="checkbox"/> May be MAC Eligible																
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.																

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What’s different about the service?

The Home Delivered Meals program provides a hot, noon meal, personally delivered by a team of volunteers and paid drivers. Meals are delivered Monday through Friday. Clients must meet the following criteria; age 60 or older, have difficulties with meal preparation, be unable to attend a senior center, lack proper nutritional support or lack cooking facilities. This service is provide by direct service, by contract or by subaward in all five counties of ENOA’s service area. There are no changes in this service for the coming fiscal year.





## 8. Congregate Meals

ENOA

Service Narrative:  
**8. Congregate Meals**

FY 2020-23

<b>Definition:</b> A meal provided by a qualified nutrition project provider to a qualified individual in a congregate or group setting. The meal is served in a program that is administered by SUAs and/or AAAs and meets all the requirements of the Older Americans Act and State/Local laws. Meals provided to individual through means-tested programs may be included.		
<b>Service Unit:</b> Meal	<b>Setting:</b> Group Setting	Registered Service
<b>Eligibility:</b>		
<ul style="list-style-type: none"> <li>• Individual must be 60 years old or older, OR</li> <li>• Spouse accompanying Individual 60 years or older, OR</li> <li>• Volunteer serving the meal, OR</li> <li>• Individual with a Disability, living with a parent 60 years or older &amp; accompanying the parent, OR</li> <li>• If the meal is served at senior housing, Individual with a Disability, living in senior housing</li> </ul>		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> <b>Collect NRA Score</b>	<input checked="" type="checkbox"/> <b>Client may use Voucher</b>	
<b>Other Reporting Requirements:</b> Meals that are funded with other funding sources (Med-waiver or Title XX) must be marked.		
<b>Possible Funding Sources:</b>		
<input checked="" type="checkbox"/> <b>III-A (NSIP Raw Food)</b>	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input checked="" type="checkbox"/> <b>III-C1 (Congregate Meal)</b>	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - Congregate Meals are provided in all 5 ENOA counties. There are 11 Subaward Multipurpose Senior Centers, 3 Contracted Multipurpose Senior Centers, 8 Direct Service Multipurpose Senior Centers and 2 Meal Sites. There is one Meal Voucher Program offered in Douglas County and meals are provided by a local supermarket. The congregate meals are catered to 18 Multipurpose Senior Center locations and 4 locations prepare the congregate meals on site. All congregate menus meet the NSIP nutritional requirements and approved by ENOA's dietitian. **FY21 changes - There are now 14 contracted Multipurpose Senior Centers and 8 Direct Service Multipurpose Senior Centers and congregate meals are catered to 20 Multipurpose Senior Center locations. The remaining above info is still correct.**



## 9. Nutrition Counseling

ENOA

Service Narrative:

FY 2020-23

### 9. Nutrition Counseling

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

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - Nutrition counseling is direct service and ENOA's Licensed Medical Nutrition Therapist provides individualized teaching and diet counseling to clients in ENOA 5 counties. Any participants from the Multipurpose Senior Centers or Meals on Wheels program who are identified at high nutritional risk from the annual Nutrition Risk Assessment will be contacted by the dietitian for follow-up if needed. An emergency food pantry is available for our "at risk" and low income clients when other sources of food are not available. There are no changes in this service for the coming fiscal year. **FY21 – ENOA will no longer be offering the Nutrition Counseling Service.**



## 11. Nutrition Education

ENOA

Service Narrative:

FY 2020-23

### 11. Nutrition Education

<b>Definition:</b> A targeted program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information that is consistent with the current Dietary Guidelines for Americans and instruction to participants, caregivers, or participants and caregivers, overseen by a dietitian or individual of comparable expertise.		
<b>Service Unit:</b> Session	<b>Setting:</b> One-on-One or Group Setting	Non-Registered Service
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>• Program Topic (i.e. Heart Healthy or Drink Enough Water)</li> <li>• Estimated Audience Size</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input checked="" type="checkbox"/> <b>III-C1 (Congregate Meal)</b>	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input checked="" type="checkbox"/> <b>III-C2 (Home Delivered Meal)</b>	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
<b>Provider Requirements:</b>	A background check is suggested. The provider must be a Registered Dietitian or have comparable experience. "Comparable experience" is a private business matter and outside the scope of SUA/DHHS.	

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - Nutrition Education is provided in all 5 ENOA counties. Nutrition Education is a direct service when ENOA's LMNT provides programs to the Multipurpose Senior Centers. Other programs are provided at no cost by local appropriate health care professionals. **FY21 – No Nutrition Education will be provided by ENOA's LMNT, other programs provided by appropriate health care professionals will continue.**



## 12. Information and Assistance

ENOA

Service Narrative:

FY 2020-23

### 12. Information and Assistance

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

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

I&A serves as a gateway for those who are looking for information about programs and services for older adults in Eastern Nebraska. Staff will answer questions or will refer to an appropriate source. I&A is a direct service provided by I&A staff in all five counties in ENOA's service area (Douglas, Dodge, Cass, Sarpy & Washington). There are no changes in this service for the coming fiscal year.



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

ENOA

Service Narrative:

FY 2020-23

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

<b>Definition:</b> Activities related to the prevention and mitigation of the effects of chronic disease (including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease), alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, falls prevention, physical activity, and improved nutrition). <b>Activities must meet ACL/AoA definition for an evidence-based program, as presented on ACL's website.</b>		
<b>Service Unit:</b> N/A	<b>Setting:</b> One-on-One or Group Setting	Sign-In Service
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>• Name</li> <li>• Birth Year</li> <li>• ZIP Code</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input checked="" type="checkbox"/> <b>III-D (Health Pro)</b>	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
<b>Provider Requirements:</b>	Trained and/or certified to meet program requirements.	

**Detailed description of how service is provided.**

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Health Promotion/Disease Prevention-Evidence Based is provided in all 5 ENOA counties. FY20 - A contract with Friendship Program Inc. provides Tai Chi for Balance at 11 Multipurpose Senior Centers. **FY21 change - A new provider, Society of St. Vincent de Paul, will provide Tai Chi for Balance at 11 Multipurpose Senior Centers.**



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

ENOA

Service Narrative:

FY 2020-23

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

<b>Definition:</b> Health promotion and disease prevention activities that <b>do not meet</b> ACL/AoA definition for an evidence-based program as defined at ACL's website. Activities may include those defined in the OAA (Section 102(14)). For example:		
- health risk assessments	- routine health screening	- home injury control services
- health education	- medication management	- gerontological counseling
- age-related diseases and chronic disabling conditions information		
- counseling regarding social services and follow-up health services		
- educational services for individuals and their primary caregivers		
- physical fitness, group exercise, and music therapy, art therapy, and dance-movement therapy		
<b>Service Unit:</b> N/A	<b>Setting:</b> One-on-One or Group Setting	Sign-In Service
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>• Name</li> <li>• Birth Year</li> <li>• ZIP Code</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
<b>Provider Requirements:</b>	Providers must administer services within the scope of their own professional practice that they are deemed competent to perform. These practices must be permitted in terms of what their own professional licensure approves and allows.	

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Health Promotion/Disease Prevention Non-Evidence Based programs are provided in all 5 ENOA counties. It is a direct service and provided at no cost by local professionals in a variety of areas such as dental, ophthalmology, audiology, nursing, pharmacy, etc.



## 16. Legal Assistance

ENOA

Service Narrative:  
**16. Legal Assistance**

FY 2020-23

<b>Definition:</b> Legal advice and representation provided by an attorney to older individuals with economic or social need, and in the implementing regulation at 45 CFR Section 1321.71, and includes to the extent feasible, counseling or other appropriate assistance by a paralegal or law student under the direct supervision of an attorney.		
<b>Service Unit:</b> Hour	<b>Setting:</b> One-on-One	Restricted Service
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> Legal Assistance Providers will also need to record:		
<ul style="list-style-type: none"> <li>• <b>III- B Restricted Demographics (new)</b></li> <li>• Number of Open Cases</li> <li>• Number of Closed Cases by:               <ul style="list-style-type: none"> <li>○ Advice</li> <li>○ Limited Representation</li> <li>○ Representation</li> </ul> </li> </ul>	<b>Number of Cases about:</b> <ul style="list-style-type: none"> <li>• Abuse/Neglect</li> <li>• Age Discrimination</li> <li>• Health Care</li> <li>• Housing</li> <li>• Income</li> <li>• Defense of Guardianship/ Protective Services</li> </ul>	<ul style="list-style-type: none"> <li>• Long-Term Care</li> <li>• Nutrition</li> <li>• Utilities</li> <li>• Other</li> </ul>
<b>This grey section will be implemented 10/1/2020</b>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> <b>Local</b>
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Title IV</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> ADRC (State)	<input checked="" type="checkbox"/> <b>Title VII</b>
<input type="checkbox"/> May be MAC Eligible		
<b>Provider Requirements:</b>	<ul style="list-style-type: none"> <li>• Attorney, OR</li> <li>• Law student under direct supervision of an attorney, OR</li> <li>• Paralegal under direct supervision of an attorney</li> </ul>	

### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - ENOA's legal services (under NE 4A contract) are provided by a contracted provider (Legal Aid of Nebraska). ENOA also has a separate contract with the same provider for Extended Representation services. **FY21 change – ENOA will directly contract with Legal Aid of Nebraska throughout all of ENOA's service area (Douglas, Dodge, Cass, Sarpy & Washington). ENOA no longer has a separate contract for Extended Representation services.**



## 20. Care Management

ENOA

Service Narrative:  
**20. Care Management**

FY 2020-23

<b>Definition:</b> Assisting a client to identify and utilize services needed to assure that the client is receiving, when reasonably possible, the level of care that best matches his or her level of need. The Care Management Unit, through its Care Management Unit Supervisor and staff of care managers, assists clients with services as specified in the [Care Management] Act, including ongoing consultation, assessment, Long-Term Care Plan development, and referral for clients in need of long-term care; coordination of the Long-Term Care Plan; monitoring of the delivery of services for clients, and review of the client's Long-Term Care Plan.		
<b>Service Unit:</b> Hour	<b>Setting:</b> One-on-One	Registered Service
<b>Eligibility:</b> Individuals 60 years or older are eligible. Those under 60 may also be served, subject to service prioritization.		
<b>Client Details:</b>		
<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> See Care Management reporting requirements.		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input checked="" type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
<b>Provider Requirements:</b>	<p>The Care Management Unit Supervisor and care managers shall have the following minimum qualifications:</p> <ul style="list-style-type: none"> <li>• A current Nebraska license as a registered nurse, or baccalaureate or graduate degree in the human services field, or certification under the Nebraska Social Work Law; and</li> <li>• At least two years of experience in long-term care, gerontology or community health.</li> <li>• In addition, a Care Management Unit Supervisor shall have at least two years of supervisory or management experience.</li> </ul>	

### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

ENOA's Care Managers work individually with older frail adults and their family members to help them remain independent for as long as possible. Care Managers evaluate the living situation of the individuals to find the community resources to meet their specific needs. They design personalized care plans, provide information on resources, help set up services and provide ongoing monitoring. ENOA's Care Management is a subaward serving in Cass, Dodge, Douglas, Sarpy and Washington counties. The only difference in Care Management services was the transition from a sliding scale requested contribution to sliding scale fee beginning with applicable services in December 2018.





## 22. Senior Center Hours

ENOA

Service Narrative:

FY 2020-23

### 22. Senior Center Hours

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

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - Multipurpose Senior Centers are located in all 5 ENOA counties and provide a wide range of activities, congregate meals, health, social and recreational activities. It is provided at 11 Subaward Multipurpose Senior Centers, 3 Contracted Multipurpose Senior Center and 8 Direct Service Multipurpose Senior Centers. **FY21 changes – This service is now provided at 14 contracted Multipurpose Senior Centers and 8 Direct Service Multipurpose Senior Centers.**



### 23. Material Distribution

ENOA

Service Narrative:

FY 2020-23

#### 23. Material Distribution

<b>Definition:</b>		
The provision of goods to an older individual at no cost or at a reduced cost which will directly support the health and independence of the individual with an assessed need. This can include: commodities, pantry items, clothing distribution, smoke detectors, eyeglasses, hearing aids, oral health, etc. This also includes Emergency Response Systems (ERS, Personal Emergency Response System, PERS). An Emergency Response System is an electronic device and has portable buttons (including pendants and bracelets) worn by the customer. These units provide 24-hour on call support to the customer having a medical or emergency need that could become critical at any time. ERS can be landline or cell phone based services. Previously counted in Durable Medical Equipment and Emergency Response System. This is no longer limited to medical equipment, adaptive devices, or assistive technology.		
<b>Service Unit:</b> Unit	<b>Setting:</b> One-on-One	Registered Service
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input checked="" type="checkbox"/> <b>Client may Self-Direct this Service</b>	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	This is a private business matter and outside the scope of SUA/DHHS.	

**Detailed description of how service is provided.**

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - ENOA contracts with two providers to supply personal emergency response equipment in Douglas, Sarpy, Cass, Dodge and Washington Counties. Clients receiving this service must have an ENOA Care Manager. Durable Medical Equipment is provided to clients in all five counties through letters of agreement with local providers. Clients requesting durable medical equipment must have an ENOA Care Manager. ENOA contracts with two providers to supply personal emergency response equipment in Douglas, Sarpy, Cass, Dodge and Washington Counties. Clients receiving this service must have an ENOA Care Manager. **FY21 changes – Effective July 1, 2020, ENOA will no longer be providing the Durable Medical Equipment service.**



## 24. Social Activities

ENOA

Service Narrative:  
**24. Social Activities**

FY 2020-23

<b>Definition:</b> Provision of activities which foster the social well-being of individuals through social interaction and the satisfying use of leisure time. Activities, such as performing arts, games, and crafts, either as an observer or as a participant, facilitated by a provider.  This service covers activities at the provider's location (i.e. senior center) or should be organized/planned by the provider (senior center).		
<b>Service Unit:</b> Person Hour	<b>Setting:</b> Group Setting	Non-Registered Service
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b> N/A		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
		<input type="checkbox"/> May be MAC Eligible
<b>Provider Requirements:</b>	This is a private business matter and outside the scope of SUA/DHHS.	

### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - Social Activities are provided at all Multipurpose Senior Centers in all 5 ENOA's counties. There are 11 Subaward Multipurpose Senior Centers, 3 Contracted Multipurpose Senior Center and 8 Direct Service Multipurpose Senior Centers. Social Activities include but not limited to: games, cards, bingo, entertainment, crafts, cultural events, community service projects, general education, assistance programs and fundraising. **FY21 changes - There are now 14 contracted Multipurpose Senior Centers and 8 Direct Service Multipurpose Senior Centers.**



## 27. Outreach

ENOA

Service Narrative:

FY 2020-23

### 27. Outreach

<b>Definition:</b> An interactive activity that conveys information about available services, aging, or the aging network. It includes in-person interactive presentations, booth/exhibit at a fair, conference, or other public event. This service includes Public Education and Presentations.  When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section.  Previously the ACL defined this as a one-on-one intervention by the service provider. The ACL has removed Outreach as a federal service. The state has created a new service called Outreach.		
<b>Service Unit:</b> Activity	<b>Setting:</b> Group Setting	Non-Registered Service
<b>Eligibility:</b> Information about available services, aging, or the aging network.		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>Estimated Audience Size</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> <b>May be MAC Eligible</b>		
<b>Provider Requirements:</b>	This is a private business matter and outside the scope of SUA/DHHS.	

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

ENOA staff represent the agency at Community Health Fairs, Senior Fairs, and various resource fairs throughout the year. We present to church groups, civic organizations, college classes (nursing, gerontology, and community service classes), senior centers, and senior housing complexes whenever we are invited. ENOA staff are members of various community networking and information sharing meetings/committees such as Energy Assistance, D.O.T.S (Disability Organizations Together Serve), Better Business Bureau Consumer Programming Committee, Lifespan Respite Advisory Committee, & Vision Resource Coalition. I&A Division coordinates the Partnerships in Aging Network monthly meetings.

We also use ENOA/ADRC's website, Face Book page, New Horizons newspaper to promote the agency, and get information out to our service area. Outreach is a direct service provided by staff in all five counties in ENOA's service area (Douglas, Dodge, Cass, Sarpy & Washington).



## 28. Information Services

ENOA

Service Narrative:

FY 2020-23

### 28. Information Services

<b>Definition:</b> A media activity that conveys information about available services, aging, or the aging network. It is a one way mode of communication. Examples include: Facebook posts, TV Ads/PSAs, radio ads/PSAs, website hits, brochures, newspaper ads, press releases. When counting brochures and other print media as Information Services, it should be counted when the cost is incurred (when the brochures are printed, when the newspaper ad is billed). When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section. Previously Information Services IIIB and/or Public Information.		
<b>Service Unit:</b> <u>Activity</u>	<b>Setting:</b> <u>Indirect Setting</u>	<u>Non-Registered Service</u>
<b>Eligibility:</b> N/A		
<b>Client Details:</b> N/A		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> <ul style="list-style-type: none"> <li>• Topic (if the system allows)</li> <li>• Estimated Audience Size</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> <b>May be MAC Eligible</b>		
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - Information Services is a direct service provided by ENOA staff and available in all five counties in ENOA's service area (Douglas, Dodge, Cass, Sarpy & Washington). ENOA's Public Affairs office plays a key role in getting ENOA information and news out to our service area. The New Horizons newspaper, 20,000 printed monthly(direct mailed to subscribers, and distributed for pick up throughout our service area) portrays a positive image of older adults and contains information about ENOA's wide array of programs & services, in addition to community news and events. In addition to the newspaper, they design and print in house all of the ENOA program brochures, fliers, and newsletters. ENOA's website: [www.enoa.org](http://www.enoa.org) is another valuable tool for informing the public about our programs & services, in addition to offering up additional community resources and events. The ADRC website <http://nebraska.networkofcare.org/aging/> is also a key instrument for connecting the community to available resources. ENOA has a presence on social media with an ENOA face book page. **FY21 Changes – ADRC website is now: <http://nebraska.aroundja.org> and we have reduced the monthly number of New Horizon newspapers printed to 9,000.**



## 29. Legal Outreach

ENOA

Service Narrative:  
**29. Legal Outreach**

FY 2020-23

An interactive activity that conveys information about legal issues, including but not limited to:		
<ul style="list-style-type: none"> <li>• Powers of Attorney</li> <li>• Wills</li> <li>• Health Care Directives</li> <li>• Reverse Mortgage</li> <li>• Social Security Benefits</li> <li>• Medicaid/Medicare</li> </ul>		
Legal Outreach includes in-person interactive community education presentations by an attorney or a staff supervised by an attorney at senior centers, conferences, or other public event.		
Legal Outreach <u>does not</u> include information provided by staff or an attorney at a booth/exhibit at a fair, or a conference or other public event.		
When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section.		
<b>Service Unit:</b> Activity	<b>Setting:</b> Group Setting	Non-Registered Service
<b>Eligibility:</b> Information about available services, aging, or the aging network.		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>• Estimated Audience Size</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> <b>May be MAC Eligible</b>		
<b>Provider Requirements:</b>	<ul style="list-style-type: none"> <li>• Attorney, OR</li> <li>• Law student under direct supervision of an attorney, OR</li> <li>• Paralegal under direct supervision of an attorney</li> </ul>	

### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

This service is provided through a contracted provider and is available throughout all of ENOA's service area (Douglas, Dodge, Cass, Sarpy & Washington counties).



## 32. Caregiver Respite

ENOA

Service Narrative:  
**32. Caregiver Respite**

FY 2020-23

<b>Definition:</b> Service which offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers.		
<b>Service Unit:</b> Hour	<b>Setting:</b> One-on-One or Group Setting	Registered Service
<b>Eligibility:</b> • Family Caregiver <b>OR</b> • Older Relative Caregiver		
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>	
<input checked="" type="checkbox"/> <b>Must have 2 ADLs or a cognitive deficit</b>	<input checked="" type="checkbox"/> <b>Collect Demographics</b>	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> <b>Collect Eligibility</b>	<input checked="" type="checkbox"/> <b>May Self-Direct this Service</b>
	<input checked="" type="checkbox"/> <b>May do Caregiver Assessment</b>	<input checked="" type="checkbox"/> <b>May use Voucher</b>
<b>Other Reporting Requirements: Where Respite was Provided:</b>		
<ul style="list-style-type: none"> <li>• In-Home</li> <li>• Out-of-Home (day)</li> <li>• Out-of-Home (overnight)</li> <li>• Other Respite</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> <b>III-E (Caregiver)</b>	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

The Caregiver Respite service provides respite to caregivers and may include in-home assistance or having the care receiver attend a qualified adult day program. ENOA's Caregiver Support respite services are provided by contracted providers and grants. Respite services are available in all five counties that ENOA serves. The only difference beginning July 1, 2019 self – directed respite services will be recorded in increments of hour vs. placement.



### 33. Caregiver Supplemental Services

ENOA

Service Narrative:

FY 2020-23

#### 33. Caregiver Supplemental Services

<b>Definition:</b> Goods and services provided to complement the care provided by caregivers.  If a Family Caregiver and Older Individual receive a Home Delivered Meal, the Family Caregiver Home Delivered Meal should be counted under Caregiver Supplemental Services.  ERS services for the Care Recipient should be recorded under this service. The Client is the Caregiver.		
<b>Service Unit:</b> Unit	<b>Setting:</b> One-on-One	Registered Service
<b>Eligibility:</b> • Family Caregiver OR • Older Relative Caregiver		
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>	
<input checked="" type="checkbox"/> <b>Must have 2 ADLs or a cognitive deficit</b>	<input checked="" type="checkbox"/> <b>Collect Demographics</b>	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> <b>Collect Eligibility</b>	<input type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> <b>May do Caregiver Assessment</b>	<input type="checkbox"/> May use Voucher
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> <b>III-E (Caregiver)</b>	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	N/A	

**Detailed description of how service is provided.**

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - ENOA provides the following Caregiver Supplemental Services; Durable Medical Equipment (DME), Personal Emergency Response Systems (PERS), nutrition consultation and Home Delivered Meals (HDM). DME and PERS are provided through contracted providers and HDM and nutrition consultation are direct service. The service is available in our five county service area. **FY21 changes - ENOA will only be providing the following Caregiver Supplemental Services; Personal Emergency Response Systems (PERS), and Home Delivered Meals (HDM). PERS continues to be provided through contracted providers and HDM for those caregivers under age 60 are direct service.**





### 34. Caregiver Assistance – Case Management

ENOA

Service Narrative:

FY 2020-23

#### 34. Caregiver Assistance: Case Management

<b>Definition:</b> Provided to a caregiver, at the direction of the caregiver:		
<ul style="list-style-type: none"> <li>by an individual who is trained or experienced in the case management skills that are required to deliver the services and coordination described in subparagraph; and</li> <li>to assess the needs, and to arrange, coordinate, and monitor an optimum package of services to meet the needs, of the caregiver; and</li> </ul>		
Includes services and coordination such as—		
<ul style="list-style-type: none"> <li>comprehensive assessment of the caregiver (including the physical, psychological, and social needs of the individual);</li> <li>development and implementation of a service plan with the caregiver to mobilize the formal and informal resources and services identified in the assessment to meet the needs of the caregiver, including coordination of the resources and services—               <ul style="list-style-type: none"> <li>with any other plans that exist for various formal services; and</li> <li>with the information and assistance services provided under the Older Americans Act; coordination and monitoring of formal and informal service delivery, including coordination and monitoring to ensure that services specified in the plan are being provided;</li> <li>periodic reassessment and revision of the status of the caregiver; and</li> <li>in accordance with the wishes of the caregiver, advocacy on behalf of the caregiver for needed services or resources.</li> </ul> </li> </ul>		
<b>Service Unit:</b>	Hour	<b>Setting:</b> One-on-One Registered Service
<b>Eligibility:</b>	<ul style="list-style-type: none"> <li>Family Caregiver</li> <li>Older Relative Caregiver</li> </ul>	
<b>Possible Funding Sources:</b>		
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>	
<input checked="" type="checkbox"/> <b>Must have 2 ADLs or a cognitive deficit</b>	<input checked="" type="checkbox"/> <b>Collect Demographics</b>	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> <b>Collect Eligibility</b>	<input type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> <b>May do Caregiver Assessment</b>	<input type="checkbox"/> May use Voucher
<b>Other Reporting Requirements:</b> N/A		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> <b>III-E (Caregiver)</b>	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> <b>May be MAC Eligible</b>	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

**Detailed description of how service is provided.**

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

ENOA's CSP Managers are professionals trained to complete comprehensive caregiver support assessments on primary informal caregivers who are providing direct care for an older frail adult or adults with a diagnosis of dementia or similar cognitive issues. A person centered approach is used to develop care plans based on the needs and/or stressors identified in the assessment. Overall goal is to enhance the caregiver's ability to continue the role of caregiving without jeopardizing his/her own health and ensures the care receivers needs continue to be safely met. This service is provided through the Title III-E subaward and is available to eligible clients throughout ENOA's five county service area. This service was previously recorded by contact under Access Assistance and will change beginning July 1, 2019 to hourly service units under this taxonomy.



### 37. Caregiver Outreach

ENOA

Service Narrative:  
**37. Caregiver Outreach**

FY 2020-23

<b>Definition:</b> An interactive activity that conveys information to caregivers about available services, aging, or the aging network. It includes in-person interactive presentations, booth/exhibit at a fair, conference, or other public events. This service includes Public Education and Presentations.  When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section.		
<b>Service Unit:</b> Activity	<b>Setting:</b> Group Setting	Non-Registered Service
<b>Eligibility:</b> N/A		
Care Recipient	Caregiver (Client) Details:	
<input type="checkbox"/> May collect demographics if OAA eligible.	<input type="checkbox"/> Collect Demographics	<input type="checkbox"/> May be Anonymous
	<input type="checkbox"/> Collect Eligibility	<input type="checkbox"/> May Self-Direct this Service
	<input type="checkbox"/> May do Caregiver Assessment	<input type="checkbox"/> May use Voucher
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>• Topic (if system allows)</li> <li>• Estimated Audience Size</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> <b>III-E (Caregiver)</b>	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> <b>May be MAC Eligible</b>		
<b>Provider Requirements:</b>	This is a private business matter and outside the scope of SUA/DHHS.	

**Detailed description of how service is provided.**

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

FY20 - ENOA will provide Caregiver Support Program public education and presentations. This service is provided through ENOA's subaward and is available throughout the ENOA service area. The only change is this service will be recorded under this taxonomy beginning July 1, 2019 and will be specific to caregiver events. **FY21 change – ENOA will no longer be fiscally supporting this service in a separate budget but Caregiver Support public education will continue to be provided through our Outreach services.**



## 40. Information & Referral

ENOA

Service Narrative:

FY 2020-23

### 40. Information & Referral

<b>Definition:</b> A state ADRC Program whose primary purpose is to maintain information about human service resources in the community and to link people who need assistance with appropriate service providers and/or to supply descriptive information about the agencies or organizations which offer services. The information and referral process involves establishing contact with the individual, assessing the individual's long and short-term needs, identifying resources to meet those needs, providing a referral to identified resources, and, where appropriate, following up to ensure that the individual's needs have been met.		
<b>Service Unit:</b> Contact	<b>Setting:</b> One-on-One	Non-Registered Service
<b>Eligibility: (Must be at least one of the below)</b> <ul style="list-style-type: none"> <li>• 60 years or older</li> <li>• Individual with a Disability</li> <li>• Caregiver</li> <li>• Representative</li> </ul>		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> May Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> <b>ADRC (State)</b>
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> <b>May be MAC Eligible</b>		
<b>Provider Requirements:</b>	This is a private business matter and outside the scope of SUA/DHHS.	

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

ADRC I&R is a direct service provided by ADRC Options Counselors in all five counties in ENOA's service area (Douglas, Dodge, Cass, Sarpy & Washington).

ADRC Options Counselors triage and track in Network of Care referral dashboard, all contacts (phone, email and face-to-face), gather individual data to assess the needs, identify resources to meet those needs, and link consumers to those resources. If appropriate, may also provide a written action plan, and make follow-up calls to ensure the needs have been met.

ADRC Options Counselors network and meet with human service providers in the community to learn about new and existing resources. ADRC OC's take every opportunity to present to community groups and attend fairs to educate about the ADRC.



## 41. Options Counseling

ENOA

Service Narrative:

FY 2020-23

### 41. Options Counseling

<b>Definition:</b> A state ADRC Program service that assists an eligible individual in need of long-term care and his or her representatives to make informed choices about the services and settings which best meet his or her long-term care needs and that uses uniform data and information collection and encourages the widest possible use of community-based options to allow an eligible individual to live as independently as possible in the setting of his or her choice.		
<b>Service Unit:</b> Hour	<b>Setting:</b> One-on-One	Registered Service
<b>Eligibility: Need Long Term Care AND (Must be at least one of the below)</b>		
• 60 years or older	• Individual with a Disability	• Representative
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> <b>May Collect NRA Score</b>	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> See ADRC services demographic information.		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> <b>ADRC (State)</b>
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> <b>May be MAC Eligible</b>		
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

#### Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

ENOA' Options Counselors provide unbiased information that is relevant to an individual's needs, preferences and goals. This person-centered service provides supports in making informed choices about long-term care service options. ADRC Options Counseling is a direct service provided by ADRC Options Counselors in all five counties in ENOA's service area (Douglas, Dodge, Cass, Sarpy & Washington).