

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES

Nebraska State Unit on Aging

Program Reference Guide

July 1, 2023 – June 30, 2027

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Introduction

Purpose

This manual serves as a guidance document and reference for individuals within the Aging Network for the SFY 2024-27 Area Plans and subawards through the State Unit on Aging. It outlines federal and state services, expected reporting requirements, and standard definitions. This document outlines requirements that subrecipients and contractors are expected to meet.

It was developed with the following in mind:

- Static information from previous Program Instructions (PI) is included, and PIs will be archived.
- Electronic resources are referenced and linked to the SUA website.
- The Aging and Disability Resource Center and other state programs have detailed descriptions.
- Each Nebraska service identifies the corresponding federal service, required policies, authorizing citations, and ongoing state and federal guidance.
- General calendar of events
- Transition from COVID19 Services
- Fiscal overview

The State Unit on Aging's software, PeerPlace, is referenced throughout this manual.

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

Nomenclature

Human service language evolves. This document tries to use consistent language; however, similar terms may apply. For example, the person receiving services may be referred to by different names: client, participant, eligible individual, consumer, etc.

Future Revisions

When Program Reference Guide changes are published, changes will be indicated:

- Removed information will have ~~strike-through~~ text.
- Added or edited text will be highlighted.

The date of the change will be put at the end of the paragraph (in parentheses).

Fiscal Overview

The State Unit on Aging oversees and distributes funding from the following sources:

- Administration for Community Living (ACL) provides funding under Title III, IV, and VII of the Federal Older Americans Act.
- State of Nebraska Aging and Disability Resource Center (ADRC) Act
- State of Nebraska Care Management Act
- State of Nebraska Community Aging Services (CASA) Act
- Medicaid Administrative Claiming (MAC)

Funding from the ACL, Care Management, and CASA is provided to Area Agencies on Aging according to the Intrastate Funding Formula, which is described in detail in Appendix H of the Nebraska State Plan. Funding provided by the ACL generally has a two-year project period, and funding provided under the State of Nebraska Rev. Statute has a one-year project period. The ACL has provided additional funding in response to COVID-19 (ARPA, CARES Act, FFCRA). The project periods for those funds vary. The ACL may also grant no-cost extensions to federal awards.

Title III, Title VII, ADRC, and CASA funding is provided on a cost-reimbursement basis via state grants and subawards. The State of Nebraska will only reimburse costs that are actual and allowable. A cost is “actual” if it is finalized and spent during the project period or within 90 days after its end. A cost is “allowable” if the cost is “reasonable” and “allocable” and adheres to 2 CFR § 200. Subrecipients must conform to all applicable sections of 2 CFR § 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

Funding for Title IV may also be available from competitive awards issued by ACL. Project periods will vary depending on the grant.

Funding for Care Management is provided to agencies on a per-unit basis, and agencies are paid according to the number of units provided. Clients may be responsible for a portion of the cost of the service based on a sliding scale and the Federal Poverty Limit (adjusted annually). This is outlined in statute and regulation. §81-2229 through 81-2235, [Title 15, Chapter 3](#).

Service Unit Descriptions

Service Unit	Description
Activity	<p>Way to track communications to multiple anonymous individuals. It has one focus.</p> <p>Example: An AAA hosts an interactive, live presentation at a senior center to provide information regarding their services.</p>
Contact	<p>Used to document one communication in a one-on-one setting.</p> <p>Example: An AAA receives a phone call requesting information on services provided in their community.</p>
Unit	<p>Used to track the quantity of an item.</p> <p>Example:</p> <ul style="list-style-type: none"> • 1 unit for 1x toilet riser • 1 unit for 1x 24-pack of briefs • 1 unit for 1x set of dentures • 3 units for 3x individual cans of Ensure • 1 unit for 1x month of ERS service
Hour	<p>Used to track time spent providing a service. Please round to the nearest quarter-hour increment. (.25 = 15 minutes; .50 = 30 minutes; .75 = 45 minutes)</p> <p>Example: A provider spent 40 minutes mowing a client's yard, round up to .75 hours of Chore.</p>
Meal	<p>Food served as breakfast, lunch, dinner, or supper. It must meet OAA, state, and local law requirements.</p> <p>Example:</p> <ul style="list-style-type: none"> • 3 ounces of protein • 2-3 servings of fruits and vegetables • 2 servings grains, 1 serving milk or milk alternative • no more than one serving of oils or fats

Service Unit	Description
One-Way Trip	<p>Used to mark going from one location to another. Each leg is considered one unit.</p> <p>Example: If someone utilizes transportation services from their home to the doctor’s office, that is 1 One-Way Trip.</p> <p>If the same person utilizes transportation services after their doctor’s appointment to return home, 2 One-Way trips would be entered.</p> <p>If a person utilizes transportation services from their home to the doctor’s office, then onto the pharmacy, and finally home, this counts as 3 units of service.</p>
Session	<p>Like Activity. Used to track a period devoted to a particular activity. Usually 15 minutes to 1 hour long. Length of time does not need to be tracked. Number of participants is generally tracked.</p> <p>Example: A professional within an AAA leads a support group for caregivers of individuals with Alzheimer’s and Dementia.</p>

Demographic Information by Program

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

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

Demographic Information	Data Type	What to Collect/Options	PeerPlace/SPR
Age	Number	Collect DOB	PeerPlace calculates Age at the close of the Federal Fiscal Year.
Gender	Single Choice	<ul style="list-style-type: none"> Female Male Other 	
Geographic Distribution	Single Choice	Collect Zip code	PeerPlace calculates: Rural, Non-Rural based on the USDA's RUCA codes.
Poverty Status	Single Choice	<ul style="list-style-type: none"> At or Below Poverty Above Poverty 	PeerPlace offers another option: Declined to Answer ¹ . It tracks the client's desire to answer this question.
Household Status	Single Choice	<ul style="list-style-type: none"> Lives Alone Lives with Others 	PeerPlace offers multiple "Lives with" options: <ul style="list-style-type: none"> Alone Child/Children LTC Facility² Others Spouse and Child Spouse/Partner Refused to Answer¹
Ethnicity ³	Single Choice	<ul style="list-style-type: none"> Hispanic/Latino Not Hispanic/Latino 	PeerPlace offers another option: Missing/Unknown ¹ . It tracks the client's desire to answer this question.
Race ³	Multiple Choice	<ul style="list-style-type: none"> American Indian or Alaska Native Asian Black or African American Native Hawaiian or Pacific Islander White 	PeerPlace offers another option: Not Available ¹ . It tracks the client's desire to answer this question.

¹ This selection is a "non-answer", and this response is considered missing information for reporting purposes.

² Long-Term Care (LTC) Facility setting is only used for Restricted Services (Legal Assistance). It should not be used on [Registered Services](#).

³ PeerPlace uses [Race](#) and [Ethnicity](#) responses to calculate a client's Minority Status. No calculation or data collection needs to be done at the service provider or [AAA](#) level.

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

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

Demographic Information	Data Type	What to Collect/Options	PeerPlace/SPR
ADL Score (Activities of Daily Living)	Each activity requires a single choice.	Does the client need assistance completing these Activities of Daily Living (ADLs)? <ol style="list-style-type: none"> 1. Bathing 2. Dressing 3. Eating 4. Mobility 5. Toileting 6. Transfer Collect Yes or No responses.	Responses: <ul style="list-style-type: none"> • Left blank = No Response (0 points) • No = Independent (0 points) • Yes = Supervision (1 point) Total ADL responses (0 or 1) to calculate the ADL score. PeerPlace calculates the score.
IADL Score (Instrumental Activities of Daily Living)	Each instrumental activity requires a single choice.	Does the client need assistance completing these Instrumental Activities of Daily Living (IADLs)? <ol style="list-style-type: none"> 1. Preparing meals 2. Managing money 3. Shopping 4. Light housework 5. Heavy housework 6. Telephoning 7. Medication management 8. Transportation ability 	Responses are Yes, No, or No Response: <ul style="list-style-type: none"> • No Response (0 points) • No (0 points) • Yes (1 point) Total IADL responses (0 or 1) to calculate the IADL score. PeerPlace calculates the score.

Demographic Information	Data Type	What to Collect/Options	PeerPlace/SPR
NSI Score (Nutrition Screening Initiative)	Each nutrition question requires a single choice.	Total each "Yes" response to calculate the NSI Score. "No" Answers are 0 points.	
		Question	Answered Yes
		1. I have an illness or condition that made me change the kind and/or amount of food I eat.	2
		2. I eat fewer than 2 meals per day.	3
		3. I eat few fruits or vegetables or milk products.	2
		4. I have 3 or more drinks of beer, liquor, or wine almost every day.	2
		5. I have tooth or mouth problems that make it hard for me to eat.	2
		6. I don't always have enough money to buy the food I need.	4
		7. I eat alone most of the time.	1
		8. I take 3 or more different prescribed or over-the-counter drugs a day	1
		9. Without wanting to, I have lost or gained 10 pounds in the last 6 months.	2
10. I am not always physically able to shop, cook and/or feed myself.	2		
PeerPlace calculates the score.			

Title III-B Restricted Service Clients (Legal Assistance)

Client Information is not entered into PeerPlace. It should be tracked in the attorney’s software system. Aggregated demographic information is reported in the Legal Services Workbooks.

Demographic Information	Data Type	What to Collect/Options	Legal Services Workbook/SPR
Age	Number	Collect DOB	The client’s age is on September 30 (the last day of the Federal Fiscal Year.)
Gender	Single Choice	<ul style="list-style-type: none"> Female Male Other 	
Geographic Distribution	Single Choice	Collect Zip code	Legal Services Workbook has a list of zip codes and their Rural designation. Providers should follow this table to designate rural/non-rural clients.
Poverty Status	Single Choice	<ul style="list-style-type: none"> At or Below Poverty Above Poverty 	
Household Status	Single Choice	<ul style="list-style-type: none"> Lives Alone Lives with Others LTC Facility 	
Ethnicity	Single Choice	<ul style="list-style-type: none"> Hispanic/Latino Not Hispanic/Latino 	
Race	Multiple Choice	<ul style="list-style-type: none"> American Indian or Alaska Native Asian Black or African American Native Hawaiian or Pacific Islander White 	

Health Program & Health Activity [Sign-In Service Clients](#)

This information is used to identify or create a PeerPlace Client Profile. (6/28/2023)

Demographic Information	Data Type	What to Collect/Options	PeerPlace/SPR
Name	Text	Individual's first and last name.	An estimated unduplicated client count is used in federal reporting. A client can submit an anonymous or fake name.
Birth Year	Number	Year the individual was born	
Zip Code	Number	Zip code for Individual's home address	

Title III-E Registered Service

Demographic Information	Data Type	What to Collect/Options	PeerPlace/SPR
Age	Number	Collect DOB	PeerPlace calculates Age at the close of the Federal Fiscal Year.
Gender	Single Choice	<ul style="list-style-type: none"> Female Male Other 	
Geographic Distribution	Single Choice	Collect Zip code	PeerPlace calculates Rural, Non-Rural based on the USDA's RUCA codes.
Poverty Status	Single Choice	<ul style="list-style-type: none"> At or Below Poverty Above Poverty 	PeerPlace offers another option: Declined to Answer ⁴⁷ . It tracks the client's desire to answer this question.
Household Status	Single Choice	<ul style="list-style-type: none"> Lives Alone Lives with Others 	PeerPlace offers multiple "Lives with" options: <ul style="list-style-type: none"> Alone Child/Children LTC Facility⁵ Others Spouse and Child Spouse/Partner Refused to Answer⁴
Ethnicity ⁶	Single Choice	<ul style="list-style-type: none"> Hispanic/Latino Not Hispanic/Latino 	PeerPlace offers another option: Missing/Unknown ⁴ . It tracks the client's desire to answer this question.
Race ⁶	Multiple Choice	<ul style="list-style-type: none"> American Indian or Alaska Native Asian Black or African American Native Hawaiian or Pacific Islander White 	PeerPlace offers another option: Not Available ⁴ . It tracks the client's desire to answer this question.
Relationship to Care Recipient	Single Choice	<ul style="list-style-type: none"> Brother Daughter/Daughter-in-Law Domestic Partner Grandparent Husband Non-Relative Other Relative Parent Sister Son/Son-in-Law Wife 	

Caregivers can be [Family Caregivers](#) or [Older Relative Caregivers](#).

⁴ This selection is a "non-answer", and this response is considered missing information for reporting purposes.

⁵ Long-Term Care (LTC) Facility setting is only used for Restricted Services (Legal Assistance). It should not be used on [Registered Services](#).

⁶ PeerPlace uses [Race](#) and [Ethnicity](#) responses to calculate a client's Minority Status. No calculation or data collection needs to be done at the service provider or [AAA](#) level.

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

ADRC Registered Services

Demographic Information	Data Type	What to Collect/Options	PeerPlace/State Reporting
Age Range	Number	Collect DOB or estimated DOB	If DOB is unknown, estimate based on the year: 01/01/1960 or 01/01/1900 if age is unknown.
Gender	Single Choice	<ul style="list-style-type: none"> Female Male Other 	
Location	Single Choice	Collect City, County, or Zip Code	PeerPlace calculates Rural, Non-Rural based on the USDA's RUCAs codes.
Poverty Status	Single Choice	<ul style="list-style-type: none"> At or Below Poverty Above Poverty 	PeerPlace offers another option: Declined to Answer ⁷ . It tracks the client's desire to answer this question.
Living Arrangement	Single Choice	<ul style="list-style-type: none"> At Home w/ NO Formal/Informal Supports At Home with ONLY Information Supports At Home with Formal Supports At Home with Formal and Informal Support Community Supervised Living 	<ul style="list-style-type: none"> Hospital Nursing Facility Rehab Facility Other Institutional Setting Homeless
Ethnicity	Single Choice	<ul style="list-style-type: none"> Hispanic/Latino Not Hispanic/Latino 	PeerPlace offers another option: Missing/Unknown ⁴ . It tracks the client's desire to answer this question.
Race	Multiple Choice	<ul style="list-style-type: none"> American Indian or Alaska Native Asian Black or African American Native Hawaiian or Pacific Islander White 	PeerPlace offers another option: Not Available ⁷ . It tracks the client's desire to answer this question.

⁷ This selection is a "non-answer", and this response is considered missing information for reporting purposes.

Demographic Information	Data Type	What to Collect/Options	PeerPlace/State Reporting
ADL Limitations	Multiple Choice	<p>Does the client need assistance completing these Activities of Daily Living (ADLs)? (Check All that apply)</p> <ol style="list-style-type: none"> 1. Bathing 2. Dressing 3. Eating 4. Mobility 5. Toileting 6. Transfer 7. No Response 	<p>If the Response is checked:</p> <ul style="list-style-type: none"> • Checked = 1 point • Not Checked = 0 points • No Response = Declined to answer <p>Total ADL responses (0 or 1) to calculate the ADL score.</p>
Chronic Health Conditions	Multiple Choice	<ul style="list-style-type: none"> • ADHD • Alzheimer's/Dementia • Arthritis • Asthma • Autism • Blind/Visually Impaired • Cancer • Cerebral Palsy • Chronic Kidney Disease • COPD • Deaf/Hard of Hearing • Diabetes • Epilepsy 	<ul style="list-style-type: none"> • Heart Disease/Failure • HIV/AIDS • I/DD • Multiple Sclerosis • Muscular Dystrophy • Obesity • Physical Disability • Spina Bifida • Substance Use Disorder • Traumatic Brain Injury • Other • None • No Response

Care Management Services

Demographic Information	Data Type	What to Collect/Options	PeerPlace/Care Management Reporting
Age	Number	Collect DOB	PeerPlace calculates Age at the close of the Federal Fiscal Year.
Gender	Single Choice	<ul style="list-style-type: none"> Female Male Other 	
Geographic Distribution	Single Choice	Collect Zip code	PeerPlace calculates Rural, Non-Rural based on the USDA's RUCA codes.
Poverty Status	Single Choice	<ul style="list-style-type: none"> At or Below Poverty Above Poverty 	PeerPlace offers another option: Declined to Answer ⁸ . It tracks the client's desire to answer this question.
Household Status	Single Choice	<ul style="list-style-type: none"> Lives Alone Lives with Others 	PeerPlace offers multiple "Lives with" options: <ul style="list-style-type: none"> Alone Child/Children LTC Facility⁹ Others Spouse and Child Spouse/Partner Refused to Answer⁸
Ethnicity ¹⁰	Single Choice	<ul style="list-style-type: none"> Hispanic/Latino Not Hispanic/Latino 	PeerPlace offers another option: Missing/Unknown ⁸ . It tracks the client's desire to answer this question.
Race ¹⁰	Multiple Choice	<ul style="list-style-type: none"> American Indian or Alaska Native Asian Black or African American Native Hawaiian or Pacific Islander White 	PeerPlace offers another option: Not Available ⁸ . It tracks the client's desire to answer this question.

⁸ This selection is a "non-answer", and this response is considered missing information for reporting purposes.

⁹ Long-Term Care (LTC) Facility setting is only used for Restricted Services (Legal Assistance). It should not be used on [Registered Services](#).

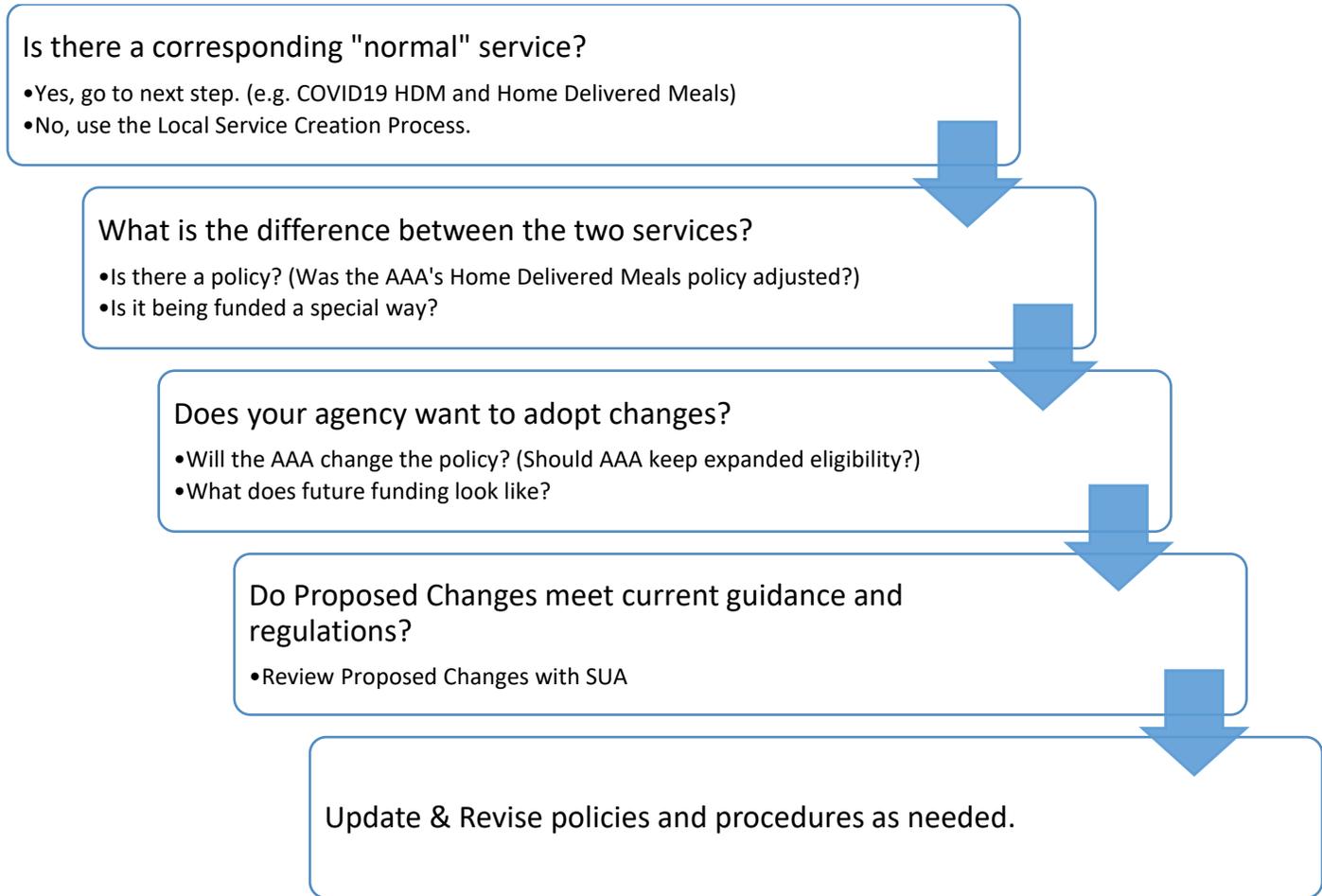
¹⁰ PeerPlace uses [Race](#) and [Ethnicity](#) responses to calculate a client's Minority Status. No calculation or data collection needs to be done at the service provider or [AAA](#) level.

Demographic Information	Data Type	What to Collect/Options	PeerPlace/Care Management Reporting
ADL Score (Activities of Daily Living)	Each activity requires a single choice.	Does the client need assistance completing these Activities of Daily Living (ADLs)? <ol style="list-style-type: none"> 1. Bathing 2. Dressing 3. Eating 4. Mobility 5. Toileting 6. Transfer Care/Case Managers collect a more detailed response.	If detailed answers are collected for each ADL: <ul style="list-style-type: none"> • Independent (0 points) Help or oversight required fewer than 1-2 times in a week • Supervision (1 point) Oversight, encouragement, cueing 3+ times, or physical assistance 1-2 times a week • Limited Assistance (1 point) Help in maneuvering limbs 3+ times in a week or more help 1-2 times in a week • Extensive Assistance (1 point) Weight-bearing assistance 3+ times a week, but not always • Total Dependence (1 point) Complete assistance at all times Total ADL responses (0 or 1) to calculate the ADL score. PeerPlace calculates the score.
IADL Score (Instrumental Activities of Daily Living)	Each instrumental activity requires a single choice.	Does the client need assistance completing these Instrumental Activities of Daily Living (IADLs)? <ol style="list-style-type: none"> 1. Preparing meals 2. Managing money 3. Shopping 4. Light housework 5. Heavy housework 6. Telephoning 7. Medication management 8. Transportation ability 	Responses are Yes, No, or No Response: <ul style="list-style-type: none"> • No Response (0 points) • No (0 points) • Yes (1 point) Total IADL responses (0 or 1) to calculate the IADL score. PeerPlace calculates the score.

Demographic Information	Data Type	What to Collect/Options	PeerPlace/Care Management Reporting
NSI Score (Nutrition Screening Initiative)	Each nutrition question requires a single choice.	Total each "Yes" response to calculate the NSI Score. "No" Answers are 0 points.	
		Question	Answered Yes
		11. I have an illness or condition that made me change the kind and/or amount of food I eat.	2
		12. I eat fewer than 2 meals per day.	3
		13. I eat few fruits or vegetables or milk products.	2
		14. I have 3 or more drinks of beer, liquor, or wine almost every day.	2
		15. I have tooth or mouth problems that make it hard for me to eat.	2
		16. I don't always have enough money to buy the food I need.	4
		17. I eat alone most of the time.	1
		18. I take 3 or more different prescribed or over-the-counter drugs a day	1
		19. Without wanting to, I have lost or gained 10 pounds in the last 6 months.	2
20. I am not always physically able to shop, cook and/or feed myself.	2		
		PeerPlace calculates the score.	
Client Income	Number		Monthly income. Used to determine sliding fee scale.
Education Level	Number	Years	Used in SLUMS (Cognitive Assessment) section.
Veteran Status	Yes/No		

Coronavirus-19 Transition

This section provides general guidance and requirements on shifting from “COVID19” services to regular business operations. Guidance is at the Area Agency on Aging’s discretion. It is essential to start planning the transitions for clients receiving COVID-services to long-term services & support. Adopt services as appropriate.



Data

All COVID19 PeerPlace Service Types will be inactivated on August 15, 2022. Event Profiles will need to be closed (service is discontinued) or recreated (if continued under a non-COVID Service Type).

Fiscal

American Rescue Plan Act funds are not tied to COVID19-specific services. Rule of thumb: if the grant has more than one part (Part B, C1, C2, etc.), it is not tied to a COVID19-specific service. American Rescue Plan Act funds can fund “regular” services.

As of this writing, Major Disaster Declaration flexibility is in effect until September 30, 2024. (As long as the Major Disaster Declaration is in effect while the subawards are being created, subawards will continue to be flexible). The ACL provides more details [here](#).

Service Policy Guidance

Policy Name	Policy Description
Service Prioritization	Document client prioritization for OAA and all other applicable services.
Self-Directed Care Eligibility	The process is utilized to ensure clients can self-direct services.
Follow-up Procedures	Establish how and when service providers will contact individuals.
Similar Service Distinction	Differentiate between similar services.
Participant and Assessment Policy	What tools do service providers use for participant assessments? The policy reflects when an intake should be completed and how often the client is re-assessed.
Weekly Deposit and Dual Control	How all money transactions are handled. It must address suggested contributions at senior centers, ensure there are two signatures on contribution logs, and how weekly deposits are handled.
Food Safety Training	How service providers will meet Nebraska Food Code and all other applicable laws regarding safe food handling for all nutrition programs.
“Unable to Attend a Congregate Meal” Definition	AAA -identified participant barriers that prevent the participant from attending a meal site.
Food Transit Time	How the Nutrition Program balances food safety and quality with time in transit.
How Undelivered or Leftover Meals are Handled	How service providers handle leftover or undelivered meals. The policy should cover how the meals are disposed of and recorded.
Client Estimation	Acceptable ways a provider estimates the number of clients.

Services
Older Adult Services

1. Personal Care

Definition: 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).		
Service Unit: Hour	Setting: One-on-One Setting	Registered Service
Origin: Federal Service	Federal Service: Personal Care	In-Home Service
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 		
Client Details: <input checked="" type="checkbox"/> Collect ADLs <input type="checkbox"/> Client may be Anonymous <input checked="" type="checkbox"/> Collect IADLs <input checked="" type="checkbox"/> Client may Self-Direct this Service <input type="checkbox"/> Collect NSI Score <input type="checkbox"/> Client may use Voucher		
Other Reporting Requirements: AAA must distinguish between SDC and Traditional Delivery on the Service Narrative, Budget, Reimbursement Requests, and PeerPlace.		
Possible Funding Sources: <input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-D (Health Pro) <input type="checkbox"/> ADRC (State) <input checked="" 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 type="checkbox"/> Care Management (State) <div style="text-align: right;"><input type="checkbox"/> May be MAC Eligible</div>		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA SEC 321(a)(5)(C) OAA – SEC 102(47) Self-Directed Care definition	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B	

2. Homemaker

Definition: Performance of light housekeeping tasks provided in a person’s home and possibly other community settings. Tasks may include preparing meals, shopping for personal items or goods , managing money, using the telephone, and doing light housework. (6/28/2023)		
Service Unit: Hour	Setting: One-on-One Setting	Registered Service
Origin: Federal Service	Federal Service: Homemaker	In-Home Service
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 		
Client Details: <input checked="" type="checkbox"/> Collect ADLs <input type="checkbox"/> Client may be Anonymous <input checked="" type="checkbox"/> Collect IADLs <input checked="" type="checkbox"/> Client may Self-Direct this Service <input type="checkbox"/> Collect NSI Score <input type="checkbox"/> Client may use Voucher		
Other Reporting Requirements: AAA must distinguish between SDC and Traditional Delivery on the Service Narrative, Budget, Reimbursement Requests, and PeerPlace.		
Possible Funding Sources: <input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-D (Health Pro) <input type="checkbox"/> ADRC (State) <input checked="" 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 type="checkbox"/> Care Management (State) <input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA SEC 321(a)(5)(C) OAA – SEC 102(47) Self-Directed Care definition	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B	

State Unit on Aging Program Reference Guide

3. Chore

Definition: Performance of heavy household tasks provided in a person’s home and possibly other community settings. Tasks may include yard work, snow removal, and heavy housework.		
Service Unit: Hour	Setting: One-on-One Setting	Registered Service
Origin: Federal Service	Federal Service: Chore	In-Home Service
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 		
Client Details: <input checked="" type="checkbox"/> Collect ADLs <input type="checkbox"/> Client may be Anonymous <input checked="" type="checkbox"/> Collect IADLs <input checked="" type="checkbox"/> Client may Self-Direct this Service <input type="checkbox"/> Collect NSI Score <input type="checkbox"/> Client may use Voucher		
Other Reporting Requirements: AAA must distinguish between SDC and Traditional Delivery on the Service Narrative, Budget, Reimbursement Requests, and PeerPlace.		
Possible Funding Sources: <input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-D (Health Pro) <input type="checkbox"/> ADRC (State) <input checked="" 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 type="checkbox"/> Care Management (State) <input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA SEC 321(a)(5)(C) OAA – SEC 102(47) Self-Directed Care definition	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B	

4. Home Delivered Meals

Definition: A meal is provided to a qualified individual in their 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 Home Delivered Meals with III-E funds. Caregiver meals should be counted under 55. Caregiver Nutrition.																	
Service Unit: Meal	Setting: One-on-One Setting	Registered Service															
Origin: Federal Service	Federal Service: Home Delivered Meals																
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older & unable to attend a Congregate Meal, OR Spouse of an Eligible Individual (60 years or older that is unable to attend a Congregate Meal), OR Dependent Individual with a Disability that lives with an Eligible Individual (60 years or older that is unable to attend a Congregate Meal) 																	
Client Details: <table border="0" style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> Collect ADLs</td> <td><input type="checkbox"/> Client may be Anonymous</td> </tr> <tr> <td><input checked="" type="checkbox"/> Collect IADLs</td> <td><input type="checkbox"/> Client may Self-Direct this Service</td> </tr> <tr> <td><input checked="" type="checkbox"/> Collect NSI Score</td> <td><input checked="" type="checkbox"/> Client may use Voucher</td> </tr> </table>			<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	<input checked="" type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	<input checked="" type="checkbox"/> Collect NSI Score	<input checked="" type="checkbox"/> Client may use Voucher									
<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 NSI Score	<input checked="" type="checkbox"/> Client may use Voucher																
Other Reporting Requirements: Meals funded with other funding sources (Med-waiver or Title XX) must be marked.																	
Possible Funding Sources: <table border="0" style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> III-A (NSIP Raw Food)</td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input type="checkbox"/> III-B (Supportive Service)</td> <td><input type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> Local</td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> CASA (State Aging)</td> <td><input checked="" type="checkbox"/> Other</td> </tr> <tr> <td><input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)</td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> <tr> <td></td> <td colspan="2" style="text-align: center;"><input type="checkbox"/> May be MAC Eligible</td> </tr> </table>			<input checked="" type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)	<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local	<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other	<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)			<input type="checkbox"/> May be MAC Eligible	
<input checked="" type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)															
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local															
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other															
<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)																
	<input type="checkbox"/> May be MAC Eligible																
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.																
Policies Needed:	1. "Unable to Attend a Congregate Meal" Definition 2. Food Transit Time 3. Participant and Assessment Policy 4. Service Prioritization 5. How Undelivered or Leftover Meals are Handled 6. Weekly Deposit and Dual Control 7. Food Safety Training																
Authorizing Citations:	OAA Subpart2—Home Delivered Nutrition Services SEC. 336, SEC. 337 TITLE 15 AGING SERVICES CHAPTER 4 (014. Home Delivered Meal Program) TITLE 15 AGING SERVICES CHAPTER 1																
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): Nutrition																

5. To Go Meals

Definition: Also known as Curbside, Pickup, Grab & Go, Drive Thru, or To Meals. A meal is provided to a qualified individual at a senior center or meal site that is not consumed onsite. 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. If III-A (NSIP) Funds are used, NSIP guidelines must be followed. Clients are not required to pay retail prices and must be offered the opportunity to contribute to the cost of services.																	
Service Unit: Meal	Setting: One-on-One Setting	Registered Service															
Origin: State Service	Federal Service: Home Delivered Meals																
Eligibility: <ul style="list-style-type: none"> • Individual must be 60 years old or older, OR • Spouse accompanying Individual 60 years or older, OR • Dependent with a disability lives with eligible individual, OR • Individual has a disability and living in senior housing 																	
Client Details: <table border="0"> <tr> <td><input checked="" type="checkbox"/> Collect ADLs</td> <td><input type="checkbox"/> Client may be Anonymous</td> </tr> <tr> <td><input checked="" type="checkbox"/> Collect IADLs</td> <td><input type="checkbox"/> Client may Self-Direct this Service</td> </tr> <tr> <td><input checked="" type="checkbox"/> Collect NSI Score</td> <td><input checked="" type="checkbox"/> Client may use Voucher</td> </tr> </table>			<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	<input checked="" type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	<input checked="" type="checkbox"/> Collect NSI Score	<input checked="" type="checkbox"/> Client may use Voucher									
<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 NSI Score	<input checked="" type="checkbox"/> Client may use Voucher																
Other Reporting Requirements: Meals funded with other funding sources (Med-waiver or Title XX) must be marked.																	
Possible Funding Sources: <table border="0"> <tr> <td><input checked="" type="checkbox"/> III-A (NSIP Raw Food)</td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input checked="" type="checkbox"/> III-B (Supportive Service)</td> <td><input type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> Local</td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> CASA (State Aging)</td> <td><input checked="" type="checkbox"/> Other</td> </tr> <tr> <td><input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)</td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> <tr> <td></td> <td colspan="2"><input type="checkbox"/> May be MAC Eligible</td> </tr> </table>			<input checked="" type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)	<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local	<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other	<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)			<input type="checkbox"/> May be MAC Eligible	
<input checked="" type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)															
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local															
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other															
<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)																
	<input type="checkbox"/> May be MAC Eligible																
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.																
Policies Needed:	1. Participant and Assessment Policy 2. Weekly Deposit and Dual Control 3. Food Safety Training 4. Similar Service Distinction																
Authorizing Citations:	OAA Subpart2—Home Delivered Nutrition Services SEC. 336, SEC. 337 TITLE 15 AGING SERVICES CHAPTER 1 (Definitions)																
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): Nutrition																

6. Case Management

<p>Definition: Provided to an older individual, at the direction of the older individual or a family member of the individual:</p> <ul style="list-style-type: none"> • 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 • to assess the needs and to arrange, coordinate, and monitor an optimum package of services to meet the needs of the older individual; and <p>Includes services and coordination such as—</p> <ul style="list-style-type: none"> • comprehensive assessment of the older individual (including the individual's physical, psychological, and social needs). • development and implementation of a service plan with the older individual to mobilize the formal and informal resources and services identified in the assessment to meet the needs of the older individual, including coordination of the resources and services— <ul style="list-style-type: none"> ○ with any other plans that exist for various formal services, such as hospital discharge plans; and ○ 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. <ul style="list-style-type: none"> ○ periodic reassessment and revision of the status of the older individual with— ○ the older individual; or if necessary, a primary caregiver or family member of the older individual; and in accordance with the wishes of the older individual, advocacy on behalf of the older individual for needed services or resources. 														
<p>Service Unit: Hour</p>	<p>Setting: One-on-One Setting</p>	<p>Registered Service</p>												
<p>Origin: Federal Service</p>	<p>Federal Service: Case Management</p>	<p>Access Service</p>												
<p>Eligibility:</p> <ul style="list-style-type: none"> • Individual must be 60 years old or older 														
<p>Client Details:</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Collect ADLs</td> <td><input type="checkbox"/> Client may be Anonymous</td> </tr> <tr> <td><input checked="" type="checkbox"/> Collect IADLs</td> <td><input type="checkbox"/> Client may Self-Direct this Service</td> </tr> <tr> <td><input type="checkbox"/> Collect NSI Score</td> <td><input type="checkbox"/> Client may use Voucher</td> </tr> </table>			<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	<input checked="" type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	<input type="checkbox"/> Collect NSI Score	<input type="checkbox"/> Client may use Voucher						
<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 type="checkbox"/> Collect NSI Score	<input type="checkbox"/> Client may use Voucher													
<p>Other Reporting Requirements: None.</p>														
<p>Possible Funding Sources:</p> <table border="0"> <tr> <td><input type="checkbox"/> III-A (NSIP Raw Food)</td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input checked="" type="checkbox"/> III-B (Supportive Service)</td> <td><input type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> Local</td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> CASA (State Aging)</td> <td><input checked="" type="checkbox"/> Other</td> </tr> <tr> <td><input type="checkbox"/> III-C2 (Home Delivered Meal)</td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> </table> <p style="text-align: right;"><input checked="" type="checkbox"/> May be MAC Eligible</p>			<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)	<input checked="" 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 type="checkbox"/> Care Management (State)	
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)												
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local												
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<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)													
<p>Provider Requirements:</p>	<p>A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.</p>													
<p>Policies Needed:</p>	<p>1. Service Prioritization 2. Similar Service Distinction 3. Participant and Assessment Policy</p>													
<p>Authorizing Citations:</p>	<p>OAA Sec. 321(a)(5)(A)</p>													
<p>Related PIs/IMs:</p>	<p>https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B</p>													

7. Assisted Transportation

Definition: Services or activities that provide or arrange for individuals' travel, including travel costs, from one location to another. This service includes escort or other appropriate assistance for a person who has difficulties (physical or cognitive) using regular vehicular transportation. Does not include any other activity.		
Service Unit: One-Way Trip	Setting: One-on-One Setting Group Setting	Registered Service
Origin: Federal Service	Federal Service: Assisted Transportation	Access Service
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 		
Client Details: <input checked="" type="checkbox"/> Collect ADLs <input type="checkbox"/> Client may be Anonymous <input checked="" type="checkbox"/> Collect IADLs <input checked="" type="checkbox"/> Client may Self-Direct this Service <input type="checkbox"/> Collect NSI Score <input checked="" type="checkbox"/> Client may use Voucher		
Other Reporting Requirements: AAA must distinguish between SDC and Traditional Delivery on the Service Narrative, Reimbursement Requests, and PeerPlace.		
Possible Funding Sources: <input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-D (Health Pro) <input type="checkbox"/> ADRC (State) <input checked="" 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 type="checkbox"/> Care Management (State) <div style="margin-left: 350px;"><input type="checkbox"/> May be MAC Eligible</div>		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility 3. Participant and Assessment Policy	
Authorizing Citations:	OAA Sec. 321(a)(2) OAA – SEC 102(47) Self-Directed Care definition	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B	

8. Congregate Meals

Definition: A meal is provided to a qualified individual in a congregate or group setting. The meal is served in a program administered by SUAs and/or AAAs and meets all the requirements of the Older Americans Act and State/Local laws. Meals provided to an individual through means-tested programs may be included.		
Service Unit: Meal	Setting: Group Setting	Registered Service
Origin: Federal Service	Federal Service: Congregate Meals	
Eligibility:		
<ul style="list-style-type: none"> • Individual must be 60 years old or older, OR • Spouse accompanying Individual 60 years or older, OR • Volunteer serving the meal, OR • Individual with a Disability, living with a parent 60 years or older & accompanying the parent, OR • If the meal is served at senior housing, Individual with a Disability living in senior housing 		
Client Details:		
<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"/> Collect NSI Score	<input checked="" type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: Meals funded with other funding sources (Med-waiver or Title XX) must be marked.		
Possible Funding Sources:		
<input checked="" type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input checked="" 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 type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Weekly deposits and dual control 2. Food safety training 3. Participant and Assessment Policy 4. Similar Service Distinction	
Authorizing Citations:	OAA Subpart 1—Congregate Nutrition Services SEC 331 TITLE 15 AGING SERVICES CHAPTER 4 (10. Congregate Meal Eligible Individuals and Operations) TITLE 15 AGING SERVICES CHAPTER 1 Definitions	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): Nutrition	

10. Transportation

Definition: Services or activities that provide or arrange for individuals' travel, including travel costs, from one location to another. Does not include any other activity.			
Service Unit: One-Way Trip	Setting: One-on-One Setting Group Setting		Non-Registered Service
Origin: Federal Service	Federal Service:	Transportation	Access Service
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 			
Client Details: <input type="checkbox"/> Collect ADLs <input checked="" type="checkbox"/> Client may be Anonymous <input type="checkbox"/> Collect IADLs <input checked="" type="checkbox"/> Client may Self-Direct this Service <input type="checkbox"/> Collect NSI Score <input checked="" type="checkbox"/> Client may use Voucher			
Other Reporting Requirements: AAA must distinguish between SDC and Traditional Delivery on the Service Narrative, Reimbursement Requests, and PeerPlace.			
Possible Funding Sources: <input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-D (Health Pro) <input type="checkbox"/> ADRC (State) <input checked="" 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 type="checkbox"/> Care Management (State) <div style="text-align: right;"><input type="checkbox"/> May be MAC Eligible</div>			
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.		
Policies Needed:	1. Similar Service Distinction		
Authorizing Citations:	OAA Sec. 321(a)(2) OAA – SEC 102(47) Self-Directed Care definition		
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B		

11. Nutrition Education

Definition: 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 Registered Dietitian or individual of comparable expertise.		
Service Unit: Session	Setting: One-on-One Setting or Group Setting (1/9/2023)	Non-Registered Service
Origin: Federal Service	Federal Service: Nutrition Education	
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NSI Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: <ul style="list-style-type: none"> Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	None	
Authorizing Citations:	OAA Nutrition Education (SEC. 214) TITLE 15 AGING SERVICES CHAPTER 4 (003. Nutrition Services)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): Nutrition	

12. Information & Assistance

Definition: A service that:		
<ul style="list-style-type: none"> • provides the individuals with current information on opportunities and services available to the individuals within their communities, including information relating to assistive technology. • assesses the problems and capacities of the individuals. • links the individuals to the opportunities and services that are available; and • to the maximum extent practicable, ensure 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. 		
Service Unit: Contact	Setting: One-on-One Setting	Non-Registered Service
Origin: Federal	Federal Service: Information & Assistance	Access Service
Eligibility: N/A		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NSI Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: n/a		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" 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 type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements: This is a private business matter and outside the scope of SUA/DHHS.		
Policies Needed: 1. Follow-up Procedures		
Authorizing Citations: OAA Sec. 321(a)(3)		
Related PIs/IMs: https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B		

13. Health Programs

Definition: 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, fall prevention, physical activity, and improved nutrition). Activities must meet the ACL/AoA definition for an evidence-based program, as presented on ACL's website.			
Service Unit: Session	Setting: One-on-One Setting or Group Setting		Sign-In Service
Origin: Federal Service	Federal Service: Health Promotion/Disease Prevention (Evidence-Based)		Access Service
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 			
Client Details: <input type="checkbox"/> Collect ADLs <input type="checkbox"/> Collect IADLs <input type="checkbox"/> Collect NSI Score <input checked="" type="checkbox"/> Client may be Anonymous <input type="checkbox"/> Client may Self-Direct this Service <input type="checkbox"/> Client may use Voucher			
Other Reporting Requirements: <ul style="list-style-type: none"> Name Birth Year Zip Code 			
Possible Funding Sources: <input type="checkbox"/> III-A (NSIP Raw Food) <input checked="" type="checkbox"/> III-D (Health Pro) <input type="checkbox"/> ADRC (State) <input checked="" 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 type="checkbox"/> Care Management (State) <input type="checkbox"/> May be MAC Eligible			
Provider Requirements: Trained and/or certified to meet program requirements.			
Policies Needed: 1. Participant and Assessment Policy			
Authorizing Citations: OAA SEC 361			
Related PIs/IMs: https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-D			

14. Health Activities

Definition: Health promotion and disease prevention activities that do not meet the ACL/AoA definition for an evidence-based program as defined on ACL's website. Activities may include those specified in the OAA (Section 102(14)).			
Service Unit: Session	Setting: One-on-One Setting or Group Setting		Sign-In Service
Origin: Federal Service	Federal Service: Health Promotion/Disease Prevention (Non Evidence-Based)		Access Service
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 			
Client Details:			
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous		<input type="checkbox"/> Client may Self-Direct this Service
<input type="checkbox"/> Collect IADLs			<input type="checkbox"/> Client may use Voucher
<input type="checkbox"/> Collect NSI Score			
Other Reporting Requirements:			
<ul style="list-style-type: none"> Name Birth Year Zip Code 			
Possible Funding Sources:			
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)	
<input checked="" 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 type="checkbox"/> Care Management (State)		
<input type="checkbox"/> May be MAC Eligible			
Provider Requirements: Trained and/or certified to meet program requirements.			
Policies Needed: 1. Participant and Assessment Policy			
Authorizing Citations: OAA Sec. 102(14) OAA Sec. 321(a)(7)			
Related PIs/IMs: https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B, III-D			

16. Legal Assistance

Definition: 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.		
Service Unit: Hour	Setting: One-on-One Setting	Restricted Service
Origin: Federal Service	Federal Service: Legal Assistance	Legal Service
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 		
Client Details: <input type="checkbox"/> Collect ADLs <input type="checkbox"/> Collect IADLs <input type="checkbox"/> Collect NSI Score <input type="checkbox"/> Client may be Anonymous <input type="checkbox"/> Client may Self-Direct this Service <input type="checkbox"/> Client may use Voucher		
Other Reporting Requirements: Regularly complete the Legal Assistance Reporting workbook.		
<ul style="list-style-type: none"> III- B Restricted Demographics Number of Open Cases Number of Closed Cases by: <ul style="list-style-type: none"> o Advice o Limited Representation o Representation 	Number of Cases about: <ul style="list-style-type: none"> Abuse/Neglect Age Discrimination Health Care Housing Income 	<ul style="list-style-type: none"> Long-Term Care Nutrition Utilities Other Defense of Guardianship/
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food) <input checked="" type="checkbox"/> III-B (Supportive Service) <input type="checkbox"/> III-C1 (Congregate Meal) <input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> III-D (Health Pro) <input type="checkbox"/> III-E (Caregiver) <input checked="" type="checkbox"/> CASA (State Aging) <input type="checkbox"/> Care Management (State)	<input type="checkbox"/> ADRC (State) <input checked="" type="checkbox"/> Local <input checked="" type="checkbox"/> Other
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	<ul style="list-style-type: none"> Attorney, OR Law student under the direct supervision of an attorney, OR Paralegal under the direct supervision of an attorney 	
Policies Needed:	1. Service Prioritization	
Authorizing Citations:	OAA Sec. 321(a)(5)(A)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): Legal	

17. Technology & Equipment

Definition:			
The provision of goods to an older individual at no cost or at a reduced cost that directly supports the health and independence of the individual with an assessed need. This can include assistive technology, durable medical equipment, and emergency response systems. It includes smoke detectors, eyeglasses, hearing aids, oral health, etc.			
An Emergency Response System is an electronic device with portable buttons (including pendants and bracelets) worn by the customer. These units provide 24-hour on-call support to the customer having medical or emergency needs that could become critical at any time. ERS can be landline or cell phone-based services.			
Service Unit:	Unit	Setting:	One-on-One Setting Registered Service
Origin:	State Service	Federal Service:	Other: Assistive Technology, DME, ERS In-Home Service
Eligibility:			
<ul style="list-style-type: none"> Individual must be 60 years old or older 			
Client Details:			
<input checked="" type="checkbox"/>	Collect ADLs	<input type="checkbox"/>	Client may be Anonymous
<input checked="" type="checkbox"/>	Collect IADLs	<input checked="" type="checkbox"/>	Client may Self-Direct this Service
<input type="checkbox"/>	Collect NSI Score	<input type="checkbox"/>	Client may use Voucher
Other Reporting Requirements: AAA must distinguish between SDC and Traditional Delivery on the Service Narrative, Budget, Reimbursement Requests, and PeerPlace.			
Possible Funding Sources:			
<input type="checkbox"/>	III-A (NSIP Raw Food)	<input type="checkbox"/>	III-D (Health Pro)
<input checked="" type="checkbox"/>	III-B (Supportive Service)	<input type="checkbox"/>	III-E (Caregiver)
<input type="checkbox"/>	III-C1 (Congregate Meal)	<input checked="" type="checkbox"/>	CASA (State Aging)
<input type="checkbox"/>	III-C2 (Home Delivered Meal)	<input type="checkbox"/>	Care Management (State)
		<input type="checkbox"/>	ADRC (State)
		<input checked="" type="checkbox"/>	Local
		<input checked="" type="checkbox"/>	Other
		<input type="checkbox"/>	May be MAC Eligible
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.		
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility		
Authorizing Citations:	OAA Sec. 321(a)(11)		
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B		

18. Consumable Supplies

Definition: The provision of goods to an older individual at no cost or a reduced cost directly that supports the health and independence of the individual with an assessed need. This can include commodities, pantry items, and clothing distribution.		
Service Unit: Unit	Setting: One-on-One Setting	Registered Service
Origin: State Service	Federal Service: Other: Consumable Supplies	In-Home Service
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 		
Client Details: <input checked="" type="checkbox"/> Collect ADLs <input type="checkbox"/> Client may be Anonymous <input checked="" type="checkbox"/> Collect IADLs <input checked="" type="checkbox"/> Client may Self-Direct this Service <input type="checkbox"/> Collect NSI Score <input type="checkbox"/> Client may use Voucher		
Other Reporting Requirements: AAA must distinguish between SDC and Traditional Delivery on the Service Narrative, Budget, Reimbursement Requests, and PeerPlace.		
Possible Funding Sources: <input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-D (Health Pro) <input type="checkbox"/> ADRC (State) <input checked="" 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 type="checkbox"/> Care Management (State) <input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA Sec. 321(a)(26)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B	

19. Home Maintenance

Definition: Includes minor home modifications necessary to facilitate older individual’s ability to remain at home, which is not available under other programs.		
Service Unit: Project	Setting: One-on-One Setting	Registered Service
Origin: State Service	Federal Service: Other: Home Modifications/Repairs	In-Home Service
Eligibility: <ul style="list-style-type: none"> Individual must be 60 years old or older 		
Client Details: <input checked="" type="checkbox"/> Collect ADLs <input type="checkbox"/> Client may be Anonymous <input checked="" type="checkbox"/> Collect IADLs <input checked="" type="checkbox"/> Client may Self-Direct this Service <input type="checkbox"/> Collect NSI Score <input type="checkbox"/> Client may use Voucher		
Other Reporting Requirements: AAA must distinguish between SDC and Traditional Delivery on the Service Narrative, Reimbursement Requests, and PeerPlace.		
Possible Funding Sources: <input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-D (Health Pro) <input type="checkbox"/> ADRC (State) <input checked="" 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 type="checkbox"/> Care Management (State) <input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA Sec. 321(a)(4)(A) - (C)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B	

20. Care Management

<p>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 their 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.</p>		
Service Unit:	Hour	Setting: One-on-One Setting Registered Service
Origin:	State Service	Federal Service: Case Management
Eligibility:		
<ul style="list-style-type: none"> Individual must be 60 years old or older 		
Client Details:		
<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 NSI Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: See Care Management Reporting Requirements		
Possible Funding Sources:		
<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	
Provider Requirements:	<p>The Care Management Unit Supervisor and care managers shall have the following minimum qualifications:</p> <ul style="list-style-type: none"> 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 At least two years of experience in long-term care, gerontology, or community health. In addition, a Care Management Unit Supervisor shall have at least two years of supervisory or management experience. 	
Policies Needed:	1. Service Prioritization 2. Similar Service Distinction	
Authorizing Citations:	Title 15 NAC 3	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): Care Management	

22. Senior Center Hours

Definition: 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.		
Service Unit: Hour	Setting: Group Setting	Non-Registered Service
Origin: State Service	Federal Service: Other: Senior Center	Access Service
Eligibility:		
Client Details:		
<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 NSI Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: None.		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	It must be a multi-purpose senior center.	
Policies Needed:	None	
Authorizing Citations:	OAA Sec. 321(a)(26)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): Senior Center	

24. Social Activities

Definition: Provision of activities that 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, are facilitated by a provider. This service covers activities at the provider’s location (e.g., senior center) or should be organized/planned by the provider (senior center).		
Service Unit: Activity	Setting: Group Setting	Non-Registered Service
Origin: State Service	Federal Service: Other: Socialization	Access Service
Eligibility:		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous (6/28/2023)	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NSI Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> Estimated number of participants (don’t worry about duplication) 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" 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 type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
Provider Requirements: This is a private business matter and outside the scope of SUA/DHHS.		
Policies Needed: 1. Client Estimation		
Authorizing Citations: OAA Sec. 321(a)(25)		
Related PIs/IMs: https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): Senior Center		

27. Outreach

<p>An interactive activity that conveys information about available services, aging, or the aging network. It includes in-person interactive presentations and a booth/exhibit at a fair, conference, or 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.</p>		
Service Unit: Activity	Setting: Group Setting	Non-Registered Service
Origin: State Service	Federal Service: Other Education	Access Service
Eligibility: Information about available services, aging, or the aging network.		
Client Details:		
<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 NSI Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" 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 type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements: This is a private business matter and outside the scope of SUA/DHHS.		
Policies Needed: 1. Client Estimation		
Authorizing Citations: OAA Sec. 321(a)(3) OAA Sec. 321(a)(24) OAA Sec. 321(a)(26)		
Related PIs/IMs: https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-B		

29. Legal Outreach

<p>Definition: An interactive activity that conveys information about legal issues, including but not limited to:</p> <ul style="list-style-type: none"> • Powers of Attorney • Wills • Health Care Directives • Reverse Mortgage • Social Security Benefits • Medicaid/Medicare <p>Legal Outreach includes in-person or virtual interactive community education presentations by an attorney, or a staff supervised by an attorney at senior centers, conferences, or other public events.</p>														
Service Unit: Activity	Setting: Group Setting	Non-Registered Service												
Origin: State Service	Federal Service: Legal Assistance	Legal Service												
<p>Eligibility:</p> <ul style="list-style-type: none"> • Individual must be 60 years old or older 														
<p>Client Details:</p> <table border="0"> <tr> <td><input type="checkbox"/> Collect ADLs</td> <td><input checked="" type="checkbox"/> Client may be Anonymous</td> </tr> <tr> <td><input type="checkbox"/> Collect IADLs</td> <td><input type="checkbox"/> Client may Self-Direct this Service</td> </tr> <tr> <td><input type="checkbox"/> Collect NSI Score</td> <td><input type="checkbox"/> Client may use Voucher</td> </tr> </table>			<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	<input type="checkbox"/> Collect NSI Score	<input type="checkbox"/> Client may use Voucher						
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous													
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service													
<input type="checkbox"/> Collect NSI Score	<input type="checkbox"/> Client may use Voucher													
<p>Other Reporting Requirements:</p> <ul style="list-style-type: none"> • Regularly complete the Legal Assistance Reporting workbook. 														
<p>Possible Funding Sources:</p> <table border="0"> <tr> <td><input type="checkbox"/> III-A (NSIP Raw Food)</td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input checked="" type="checkbox"/> III-B (Supportive Service)</td> <td><input type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> Local</td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> CASA (State Aging)</td> <td><input checked="" type="checkbox"/> Other</td> </tr> <tr> <td><input type="checkbox"/> III-C2 (Home Delivered Meal)</td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> </table> <p style="text-align: right;"><input type="checkbox"/> May be MAC Eligible</p>			<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)	<input checked="" 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 type="checkbox"/> Care Management (State)	
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)												
<input checked="" 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 type="checkbox"/> Care Management (State)													
<p>Provider Requirements:</p> <ul style="list-style-type: none"> • Attorney, OR • Law student under the direct supervision of an attorney, OR • Paralegal under the direct supervision of an attorney 														
<p>Policies Needed: 1. Client Estimation</p>														
<p>Authorizing Citations: OAA Sec. 321(a)(15) OAA Sec. 321(a)(20) OAA Sec. 321(a)(26)</p>														
<p>Related PIs/IMs: https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): Legal</p>														

Caregiver Services

34. Caregiver Case Management

<p>Definition: Provided to a caregiver at the direction of the caregiver:</p> <ul style="list-style-type: none"> •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 •to assess the needs and to arrange, coordinate, and monitor an optimum package of services to meet the needs of the caregiver; and <p>Includes services and coordination such as—</p> <ul style="list-style-type: none"> •comprehensive assessment of the caregiver (including the physical, psychological, and social needs of the individual). •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"> • with any other plans that exist for various formal services; and • 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. • periodic reassessment and revision of the status of the caregiver; and in accordance with the wishes of the caregiver, advocacy on behalf of the caregiver for needed services or resources. 		
Service Unit: Hour	Setting: One-on-One Setting	Registered Service
Origin: Federal Service	Federal Service: Caregiver Assistance: Case Management	
<p>Eligibility:</p> <ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver • Care Recipient must have 2 ADLs or cognitive deficits 		
Care Recipient	Caregiver	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics <input checked="" type="checkbox"/> Collect Eligibility <input checked="" type="checkbox"/> Caregiver Assessment	<input type="checkbox"/> May be Anonymous <input type="checkbox"/> May Self-Direct this Service <input type="checkbox"/> May use Voucher
Other Reporting Requirements:		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-B (Supportive Service) <input type="checkbox"/> III-C1 (Congregate Meal) <input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> III-D (Health Pro) <input checked="" type="checkbox"/> III-E (Caregiver) <input checked="" type="checkbox"/> CASA (State Aging) <input type="checkbox"/> Care Management (State)	<input type="checkbox"/> ADRC (State) <input checked="" type="checkbox"/> Local <input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	Only qualified Caregiver Case Managers can provide this service. If the person is not qualified, categorize assistance as Caregiver Information & Assistance. A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Similar Service Distinction	
Authorizing Citations:	OAA Sec. 373(b)(1), 373(b)(2)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-E	

36. Caregiver Information & Assistance

<p>Definition: Provided to a caregiver at the direction of the caregiver:</p> <ul style="list-style-type: none"> •provides the individuals with current information on opportunities and services available to the individuals within their communities, including information relating to assistive technology. •assesses the problems and capacities of the individuals. •links the individuals to the opportunities and services that are available; and •to the maximum extent practicable, ensure 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. 														
<p>Service Unit: Contact</p>	<p>Setting: One-on-One Setting</p>	<p>Non-Registered Service</p>												
<p>Origin: Federal Service</p>	<p>Federal Service: Caregiver Assistance: Information & Assistance</p>													
<p>Eligibility:</p> <ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver 														
<p>Care Recipient</p>	<p>Caregiver</p>													
<p><input type="checkbox"/> Must have 2 ADLs or a cognitive deficit</p>	<p><input type="checkbox"/> Collect Demographics</p> <p><input type="checkbox"/> Collect Eligibility</p> <p><input type="checkbox"/> Caregiver Assessment</p>	<p><input checked="" type="checkbox"/> May be Anonymous</p> <p><input type="checkbox"/> May Self-Direct this Service</p> <p><input type="checkbox"/> May use Voucher</p>												
<p>Other Reporting Requirements:</p>														
<p>Possible Funding Sources:</p> <table border="0"> <tr> <td><input type="checkbox"/> III-A (NSIP Raw Food)</td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input type="checkbox"/> III-B (Supportive Service)</td> <td><input checked="" type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> Local</td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> CASA (State Aging)</td> <td><input checked="" type="checkbox"/> Other</td> </tr> <tr> <td><input type="checkbox"/> III-C2 (Home Delivered Meal)</td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> </table> <p style="text-align: right;"><input checked="" type="checkbox"/> May be MAC Eligible</p>			<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"/> 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 type="checkbox"/> Care Management (State)	
<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"/> 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 type="checkbox"/> Care Management (State)													
<p>Provider Requirements:</p>	<p>A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.</p>													
<p>Policies Needed:</p>	<p>1. Follow-up Procedures</p>													
<p>Authorizing Citations:</p>	<p>OAA Sec. 373(b)(1), 373(b)(2)</p>													
<p>Related PIs/IMs:</p>	<p>https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-E</p>													

50. Caregiver Technology & Equipment

Definition: Goods and services provided to complement the care provided by caregivers. Emergency Response System/Assistive Technology/Durable Medical Equipment services. It includes smoke detectors, eyeglasses, hearing aids, oral health, etc. The technology and equipment can be given to the caregiver or care receiver. It must benefit the Caregiver. The Caregiver is the Client.		
Service Unit: Unit	Setting: One-on-One Setting	Registered Service
Origin: Federal Service	Federal Service: Caregiver Assistive Technology/DME/ERS	
Eligibility:		
<ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver • Care Recipient must have 2 ADLs or cognitive deficits 		
Care Recipient	Caregiver	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics <input checked="" type="checkbox"/> Collect Eligibility <input checked="" type="checkbox"/> Caregiver Assessment	<input type="checkbox"/> May be Anonymous <input checked="" type="checkbox"/> May Self-Direct this Service <input type="checkbox"/> May use Voucher
Other Reporting Requirements:		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-B (Supportive Service) <input type="checkbox"/> III-C1 (Congregate Meal) <input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> III-D (Health Pro) <input checked="" type="checkbox"/> III-E (Caregiver) <input checked="" type="checkbox"/> CASA (State Aging) <input type="checkbox"/> Care Management (State)	<input type="checkbox"/> ADRC (State) <input checked="" type="checkbox"/> Local <input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA Sec. 373(b)(5)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-E	

51. Caregiver Consumable Supplies

<p>Definition: The provision of goods to an eligible individual at no cost or at a reduced cost that directly supports the health and independence of the individual with an assessed need. This can include commodities, pantry items, clothing distribution. Removed: smoke detectors, eyeglasses, hearing aids, oral health, etc.</p> <p>The consumable items can be given to the caregiver or care receiver. It must benefit the Caregiver. The Caregiver is the Client.</p>													
<p>Service Unit: Unit</p>	<p>Setting: One-on-One Setting Registered Service</p>												
<p>Origin: Federal Service</p>	<p>Federal Service: Caregiver Consumables</p>												
<p>Eligibility:</p> <ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver • Care Recipient must have 2 ADLs or cognitive deficits 													
<p>Care Recipient</p>	<p>Caregiver</p>												
<p><input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit</p>	<p><input checked="" type="checkbox"/> Collect Demographics <input type="checkbox"/> May be Anonymous</p> <p><input checked="" type="checkbox"/> Collect Eligibility <input checked="" type="checkbox"/> May Self-Direct this Service</p> <p><input checked="" type="checkbox"/> Caregiver Assessment <input type="checkbox"/> May use Voucher</p>												
<p>Other Reporting Requirements:</p>													
<p>Possible Funding Sources:</p> <table border="0"> <tr> <td><input type="checkbox"/> III-A (NSIP Raw Food)</td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input type="checkbox"/> III-B (Supportive Service)</td> <td><input checked="" type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> Local</td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> CASA (State Aging)</td> <td><input checked="" type="checkbox"/> Other</td> </tr> <tr> <td><input type="checkbox"/> III-C2 (Home Delivered Meal)</td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> </table> <p style="text-align: right;"><input checked="" type="checkbox"/> May be MAC Eligible</p>		<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"/> 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 type="checkbox"/> Care Management (State)	
<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"/> 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 type="checkbox"/> Care Management (State)												
<p>Provider Requirements:</p>	<p>A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.</p>												
<p>Policies Needed:</p>	<p>1. Service Prioritization 2. Self-Directed Care Eligibility</p>												
<p>Authorizing Citations:</p>	<p>OAA Sec. 373(b)(5)</p>												
<p>Related PIs/IMs:</p>	<p>https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-E</p>												

State Unit on Aging Program Reference Guide

52. Caregiver Home Maintenance

Definition: Includes minor modifications of homes that is necessary to facilitate the ability of older individuals to remain at home, which is not available under other programs.		
The services are provided to the Care Recipient on behalf of the Caregiver. The Caregiver is the Client.		
Service Unit: Project	Setting: One-on-One Setting	Registered Service
Origin: Federal Service	Federal Service: Caregiver Home Modifications	
Eligibility:		
<ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver • Care Recipient must have 2 ADLs or cognitive deficits 		
Care Recipient	Caregiver	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics <input checked="" type="checkbox"/> Collect Eligibility <input checked="" type="checkbox"/> Caregiver Assessment	<input type="checkbox"/> May be Anonymous <input checked="" type="checkbox"/> May Self-Direct this Service <input type="checkbox"/> May use Voucher
Other Reporting Requirements:		
Possible Funding Sources:		
<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"/> 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 type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA Section 373(b)(5)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-E	

53. Caregiver In-Home Service

<p>Definition: Hours spent providing in-home assistance to Caregivers, including delivery of groceries, prescriptions, or other supplies. This includes personal care, light housework, and heavy housework (like snow removal or lawn care).</p> <p>Homemaker, chore, and personal care services may be activities that can occur during the provision of respite care, which may offer additional support to either the caregiver or care receiver. If the service is integral to the respite care, it should be reported as Caregiver In-Home Respite.</p> <p>The Caregiver or Care Recipient may receive the service. It must benefit the Caregiver. The Caregiver is the Client.</p>		
Service Unit:	Hour	Setting: One-on-One Setting Registered Service
Origin:	Federal Service	Federal Service: Caregiver Personal Care, Homemaker, or Chore
<p>Eligibility:</p> <ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver • Care Recipient must have 2 ADLs or cognitive deficits 		
Care Recipient	Caregiver	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics <input checked="" type="checkbox"/> Collect Eligibility <input checked="" type="checkbox"/> Caregiver Assessment	<input type="checkbox"/> May be Anonymous <input checked="" type="checkbox"/> May Self-Direct this Service <input type="checkbox"/> May use Voucher
Other Reporting Requirements:		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-B (Supportive Service) <input type="checkbox"/> III-C1 (Congregate Meal) <input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> III-D (Health Pro) <input checked="" type="checkbox"/> III-E (Caregiver) <input checked="" type="checkbox"/> CASA (State Aging) <input type="checkbox"/> Care Management (State)	<input type="checkbox"/> ADRC (State) <input checked="" type="checkbox"/> Local <input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA Sec. 373(b)(5)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-E	

54. Caregiver Transportation

Definition: Services or activities that provide or arrange for individuals' travel, including travel costs, from one location to another.		
The trip can be given to the Caregiver or Care Recipient. It must benefit the Caregiver. The Caregiver is the Client.		
Service Unit:	One-Way Trip	Setting: One-on-One Setting Registered Service
Origin:	Federal Service	Federal Service: Caregiver Transportation
Eligibility:		
<ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver • Care Recipient must have 2 ADLs or cognitive deficits 		
Care Recipient	Caregiver	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> Collect Eligibility	<input checked="" type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> Caregiver Assessment	<input type="checkbox"/> May use Voucher
Other Reporting Requirements:		
Possible Funding Sources:		
<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"/> 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 type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA Sec. 373(b)(5)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-E	

55. Caregiver Meal

Definition: A meal provided to an eligible caregiver for consumption in their home via congregate, home delivery, pick-up, carry-out, or drive-thru. Meals must meet all requirements of the OAA and applicable laws and regulations.		
The Caregiver is the Client.		
Service Unit: Meal	Setting: One-on-One Setting	Registered Service
Origin: Federal Service	Federal Service: Caregiver Nutrition	
Eligibility:		
<ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver • Care Recipient must have 2 ADLs or cognitive deficits 		
Care Recipient	Caregiver	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> Collect Eligibility	<input type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> Caregiver Assessment	<input type="checkbox"/> May use Voucher
Other Reporting Requirements:		
Possible Funding Sources:		
<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"/> 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 type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA Sec. 373(b)(5)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-E	

56. Caregiver In-Home Respite

<p>Definition: A respite service provided in the home of the caregiver or care receiver and allows the caregiver time away to do other activities.</p> <p>It must benefit the Caregiver. The Caregiver is the Client.</p> <p>Homemaker, chore, and personal care services may be activities that can occur during the provision of respite care, which may offer additional support to either the caregiver or care receiver. If the service is integral to the respite care, it should be reported as Caregiver In-Home Respite.</p>														
<p>Service Unit: Hour</p>	<p>Setting: One-on-One Setting</p>	<p>Registered Service</p>												
<p>Origin: Federal Service</p>	<p>Federal Service: Caregiver Respite: In-Home</p>													
<p>Eligibility:</p> <ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver • Care Recipient must have 2 ADLs or cognitive deficits 														
<p>Care Recipient</p>	<p>Caregiver</p>													
<p><input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit</p>	<p><input checked="" type="checkbox"/> Collect Demographics</p> <p><input checked="" type="checkbox"/> Collect Eligibility</p> <p><input checked="" type="checkbox"/> Caregiver Assessment</p>	<p><input type="checkbox"/> May be Anonymous</p> <p><input checked="" type="checkbox"/> May Self-Direct this Service</p> <p><input checked="" type="checkbox"/> May use Voucher</p>												
<p>Other Reporting Requirements:</p>														
<p>Possible Funding Sources:</p> <table border="0"> <tr> <td><input type="checkbox"/> III-A (NSIP Raw Food)</td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input type="checkbox"/> III-B (Supportive Service)</td> <td><input checked="" type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> Local</td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> CASA (State Aging)</td> <td><input checked="" type="checkbox"/> Other</td> </tr> <tr> <td><input type="checkbox"/> III-C2 (Home Delivered Meal)</td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> </table> <p style="text-align: right;"><input checked="" type="checkbox"/> May be MAC Eligible</p>			<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"/> 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 type="checkbox"/> Care Management (State)	
<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"/> 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 type="checkbox"/> Care Management (State)													
<p>Provider Requirements:</p>	<p>A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.</p>													
<p>Policies Needed:</p>	<p>1. Service Prioritization</p> <p>2. Self-Directed Care Eligibility</p>													
<p>Authorizing Citations:</p>	<p>OAA Sec 373(b)(4)</p>													
<p>Related PIs/IMs:</p>	<p>https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx</p> <p>Keyword(s): III-E</p>													

State Unit on Aging Program Reference Guide

57. Caregiver OOH Respite (Day)

Definition: A respite service provided in settings other than the caregiver/care receiver’s home, including adult day care, senior center, or other non-residential setting (in the case of older relatives raising children, day camps), where an overnight stay does not occur.		
It must benefit the Caregiver. The Caregiver is the Client.		
Service Unit: Hour	Setting: One-on-One Setting and Group Setting	Registered Service
Origin: Federal Service	Federal Service: Caregiver Respite: OOH Respite (Day)	
Eligibility:		
<ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver • Care Recipient must have 2 ADLs or cognitive deficits 		
Care Recipient	Caregiver	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics <input checked="" type="checkbox"/> Collect Eligibility <input checked="" type="checkbox"/> Caregiver Assessment	<input type="checkbox"/> May be Anonymous <input checked="" type="checkbox"/> May Self-Direct this Service <input checked="" type="checkbox"/> May use Voucher
Other Reporting Requirements:		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-B (Supportive Service) <input type="checkbox"/> III-C1 (Congregate Meal) <input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> III-D (Health Pro) <input checked="" type="checkbox"/> III-E (Caregiver) <input checked="" type="checkbox"/> CASA (State Aging) <input type="checkbox"/> Care Management (State)	<input type="checkbox"/> ADRC (State) <input checked="" type="checkbox"/> Local <input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	1. Service Prioritization 2. Self-Directed Care Eligibility	
Authorizing Citations:	OAA Sec 373(b)(4)	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-E	

58. Caregiver OOH Respite (Overnight)

<p>Definition: A respite service provided in residential settings such as nursing homes, assisted living facilities, summer camps, or adult foster homes, in which the care receiver resides in the facility (temporarily for a full 24-hour period).</p>														
<p>It must benefit the Caregiver. The Caregiver is the Client.</p>														
<p>Service Unit: Hour</p>	<p>Setting: One-on-One Setting and Group Setting</p>	<p>Registered Service</p>												
<p>Origin: Federal Service</p>	<p>Federal Service: Caregiver Respite: OOH Respite (Overnight)</p>													
<p>Eligibility:</p> <ul style="list-style-type: none"> • Family Caregiver OR Older Relative Caregiver • Care Recipient must have 2 ADLs or cognitive deficits 														
<p>Care Recipient</p>	<p>Caregiver</p>													
<p><input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit</p>	<p><input checked="" type="checkbox"/> Collect Demographics</p> <p><input checked="" type="checkbox"/> Collect Eligibility</p> <p><input checked="" type="checkbox"/> Caregiver Assessment</p>	<p><input type="checkbox"/> May be Anonymous</p> <p><input checked="" type="checkbox"/> May Self-Direct this Service</p> <p><input checked="" type="checkbox"/> May use Voucher</p>												
<p>Other Reporting Requirements:</p>														
<p>Possible Funding Sources:</p> <table border="0"> <tr> <td><input type="checkbox"/> III-A (NSIP Raw Food)</td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input type="checkbox"/> III-B (Supportive Service)</td> <td><input checked="" type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> Local</td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> CASA (State Aging)</td> <td><input checked="" type="checkbox"/> Other</td> </tr> <tr> <td><input type="checkbox"/> III-C2 (Home Delivered Meal)</td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> </table> <p><input checked="" type="checkbox"/> May be MAC Eligible</p>			<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"/> 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 type="checkbox"/> Care Management (State)	
<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"/> 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 type="checkbox"/> Care Management (State)													
<p>Provider Requirements:</p>	<p>A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.</p>													
<p>Policies Needed:</p>	<p>1. Service Prioritization 2. Self-Directed Care Eligibility</p>													
<p>Authorizing Citations:</p>	<p>OAA Sec 373(b)(4)</p>													
<p>Related PIs/IMs:</p>	<p>https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): III-E</p>													

ADRC Direct Services

40. Comprehensive Information & Referral

Definition: A state ADRC Program whose primary purpose is to maintain and provide comprehensive information on the full range of available public and private long-term care programs, options, financing, service providers, and resources within a community, including information on the availability of integrated long-term care.		
Service Unit: Contact	Setting: One-on-One Setting	Non-Registered Service
Origin: State	Federal Service: Other: Access, not listed elsewhere	
Eligibility (Must be at least one of the below): <ul style="list-style-type: none"> • 60 years and older • Individual with a Disability • Caregiver • Representative 		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NSI Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: Complete ADRC Intake & Spenddown Risk Estimate when applicable.		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" 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 type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements: This is a private business matter and outside the scope of SUA/DHHS.		
Policies Needed: 1. Follow-up procedures		
Authorizing Citations: NRS 68-1116		
Related PIs/IMs: https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): ADRC		

41. Options Counseling

Definition: A state ADRC Program service that assists an eligible individual in need of long-term care and their representatives to make informed choices about the services and settings which best meet their 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 their choice.		
Service Unit: Hour	Setting: One-on-One Setting	Registered Service
Origin: State	Federal Service: Other: Access, not listed elsewhere	
Eligibility (Must be at least one of the below):		
<ul style="list-style-type: none"> • 60 years and older • Individual with a Disability • Caregiver • Representative 		
Client Details:		
<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 NSI Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: ADRC Intake & Spenddown Risk Estimate (when applicable)		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" 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 type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	None	
Authorizing Citations:	NRS 68-1114	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): ADRC	

42. Transitional Options Counseling

Definition: A state ADRC Program service that develops, implements, assesses, and follows up on plans for transition support. This includes the evaluation, treatment, and/or care of people who are experiencing a specific, time-limited problem such as a transition from hospitalization or group setting, or aging out of public school , to a more independent living setting, and people who need assistance to obtain and coordinate the support services that will facilitate the change. (6/28/2023)		
Service Unit: Hour	Setting: One-on-One Setting	Registered Service
Origin: State	Federal Service: Other: Access, not listed elsewhere	
Eligibility (Must be at least one of the below):		
<ul style="list-style-type: none"> • 60 years and older • Individual with a Disability • Caregiver • Representative 		
Client Details:		
<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 NSI Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: ADRC Intake & Spenddown Risk Estimate (when applicable)		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" 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 type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	None	
Authorizing Citations:	NRS 68-1116	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx	
	Keyword(s): ADRC	

43. Benefits Assistance

Definition: A state ADRC Program service assists people with difficulty understanding and/or obtaining grants, payments, services, or other benefits for which they may be eligible. The programs may help people understand the eligibility criteria for benefits, the benefits provided by the program, the payment process, and the rights of beneficiaries; provide consultation and advice; help them complete benefits application forms.		
Service Unit: Hour	Setting: One-on-One Setting	Registered Service
Origin: State	Federal Service: Other: Access, not listed elsewhere	
Eligibility (Must be at least one of the below): <ul style="list-style-type: none"> • 60 years and older • Individual with a Disability • Caregiver • Representative 		
Client Details: <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 NSI Score <input type="checkbox"/> Client may use Voucher		
Other Reporting Requirements: ADRC Intake & Spenddown Risk Estimate (when applicable)		
Possible Funding Sources: <input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-D (Health Pro) <input checked="" 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 type="checkbox"/> Care Management (State) <div style="text-align: right;"><input checked="" type="checkbox"/> May be MAC Eligible</div>		
Provider Requirements: This is a private business matter and outside the scope of SUA/DHHS.		
Policies Needed: None		
Authorizing Citations: NRS 68-1116		
Related PIs/IMs: https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): ADRC		

44. Mobility Training

Definition: A state ADRC Program service promotes the appropriate use of public transportation services by a person who does not own or cannot operate an automobile. This includes training that introduces new riders, commuters, and other residents to the transportation options that are available in their community and trains them to use the system effectively. Participants learn the basic components of the public transit system and other transportation options (e.g., bicycles, carpools and ,vanpools); the location of park-and-ride or park and pool lots, bus stops, train stations, ferry terminals, and other facilities; and basic travel skills such as how to read a bus schedule, find the bus closest to work/home, participate in a car/vanpool, and plan a commute using the system. Instruction may be provided on an individual or group basis and may involve field training in which ta customer service representative accompanies the individual The objective of the training exercise is to encourage the use of the use of transportation by building rider confidence and comfort with the system.		
Service Unit: Hour	Setting: One-on-One Setting	Registered Service
Origin: State	Federal Service: Other: Access, not listed elsewhere	
Eligibility (Must be at least one of the below):		
<ul style="list-style-type: none"> • 60 years and older • Individual with a Disability • Caregiver • Representative 		
Client Details:		
<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 NSI Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: ADRC Intake & Spenddown Risk Estimate (when applicable)		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" 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 type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	
Policies Needed:	None	
Authorizing Citations:	NRS 68-1116	
Related PIs/IMs:	https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx Keyword(s): ADRC	

State ADRC Administrative Services

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

45. Point of Entry

Definition:

A convenient point of entry to the range of publicly supported long-term care programs for an eligible individual. Each organization or agency that provides ADRC service(s) will be designated as a Point of Entry.

Note: This is a designation; a direct ADRC service must be provided by an organization to be considered a Point of Entry.

Reporting Requirements:

The SUA will provide an annual ADRC report to the state legislature, including the number of organizations that act as Points of Entry.

46. Unmet Service Needs

Definition:

A process for identifying unmet service needs in communities and developing recommendations to respond to those unmet needs.

Reporting Requirements:

Unmet needs are collected as part of the uniform data collection process. For this administrative service to be used, data must be collected, and recommendations must be made to address unmet needs.

The SUA will provide an annual ADRC report to the state legislature, including details unmet needs. If this administrative service is provided, the Point of Entry will need to provide recommendations to the SUA.

47. Home Care Provider Registry

Definition:

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

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

Reporting Requirements:

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

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

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

State Unit on Aging Program Reference Guide

Title III-B Service Designations

The State Plan requires each [AAA](#) to spend these minimums for the following Title III-B service designations. Title-A, C-1, C-2, D, and E do not have minimums.

III-B Service Designation	Minimum %
In-Home	15%
Access	15%
Legal	2%

Note: Locally Created Services are not listed, but if applicable, will be counted towards minimums

#	Service	Designation Type
1	Personal Care	In-Home
2	Homemaker	In-Home
3	Chore	In-Home
6	Case Management	Access
7	Assisted Transportation	Access
10	Transportation	Access
11	Nutrition Education ¹¹	Access
12	Information & Assistance	Access
13	Health Programs	Access
14	Health Activities	Access
16	Legal Assistance	Legal
17	Technology & Equipment	In-Home
18	Consumable Supplies	In-Home
19	Home Maintenance	In-Home
22	Senior Center Hours ¹¹	Access
24	Social Activities	Access
27	Outreach	Access
29	Legal Outreach	Legal

¹¹ Only services funded by III-B is counted toward III-B Service Minimums.

State Unit on Aging Program Reference Guide

State Service to Federal Service Mapping

#	State Service	Federal Service
1	Personal Care	Personal Care
2	Homemaker	Homemaker
3	Chore	Chore
4	Home Delivered Meals	Home Delivered Meals
5	To Go Meals	Home Delivered Meals
6	Case Management	Case Management
7	Assisted Transportation	Assisted Transportation
8	Congregate Meals	Congregate Meals
10	Transportation	Transportation
11	Nutrition Education	Nutrition Education
12	Information & Assistance	Information & Assistance
13	Health Program	Health Promotion/Disease Prevention (Evidence-Based)
14	Health Activities	Health Promotion/Disease Prevention (Non Evidence-Based)
16	Legal Assistance	Legal Assistance
17	Technology & Equipment	Other: Technology & Devices
18	Consumable Supplies	Other: Consumable Supplies
19	Home Maintenance	Other: Home Maintenance
20	Care Management	Case Management
22	Senior Center Hours	Other: Senior Centers
24	Social Activities	Other: Socialization
27	Outreach	Other: Public Education
29	Legal Outreach	Legal Assistance
34	Caregiver Case Management	Caregiver Case Management
36	Caregiver Information & Assistance	Caregiver Information & Assistance
50	Caregiver Technology & Equipment	Caregiver Supplemental: Technology & Devices
51	Caregiver Consumable Supplies	Caregiver Supplemental: Consumables
52	Caregiver Home Maintenance	Caregiver Supplemental: Home Maintenance
53	Caregiver In-Home Services	Caregiver Supplemental: In-Home
54	Caregiver Transportation	Caregiver Supplemental: Transportation
55	Caregiver Meals	Caregiver Supplemental: Nutrition
56	Caregiver In-Home Respite	Caregiver In-Home Respite
57	Caregiver OOH Respite (Day)	Caregiver OOH Respite (Day)
58	Caregiver OOH Respite (Overnight)	Caregiver OOH Respite (Overnight)
40	Comprehensive Information & Referral	Other: Access Not Reported Elsewhere
41	Options Counseling	Other: Access Not Reported Elsewhere
42	Transitional Options Counseling	Other: Access Not Reported Elsewhere
43	Benefits Assistance	Other: Access Not Reported Elsewhere
44	Mobility Training	Other: Access Not Reported Elsewhere

Create A Local Service

The State Unit on Aging has removed a few unused or rarely used state and federal services from the general taxonomy. Details are in the Where Are They Now? Section. The SFY 2020 – 2023 taxonomy was developed to be as comprehensive as possible. Some services were shoehorned into a State Service that kind of fit. The SFY 2024 – 2027 taxonomy’s goal is to be flexible. [AAAs](#) can continue to provide a removed service, but the service will need to be documented through the Local Service Creation Process.

Service Removal Reasons:

1. There may be only one [AAA](#) providing the service. The SUA would rather work with the [AAA](#) on a service description and expectation that meets the [AAA](#)’s needs.
2. Two or three agencies may be providing the same state service – but the service is not the same. For example: Counseling was purposefully created as a catch-all – but each [AAA](#) used it a little differently.
3. If a few agencies are providing the same state service – and one agency wants to make a fundamental change to the state service – either the [AAA](#) conforms or forces other [AAAs](#) to change to their new idea.

[AAAs](#) can continue to provide a removed service, but the service will need to be documented through the Local Service Creation Process.

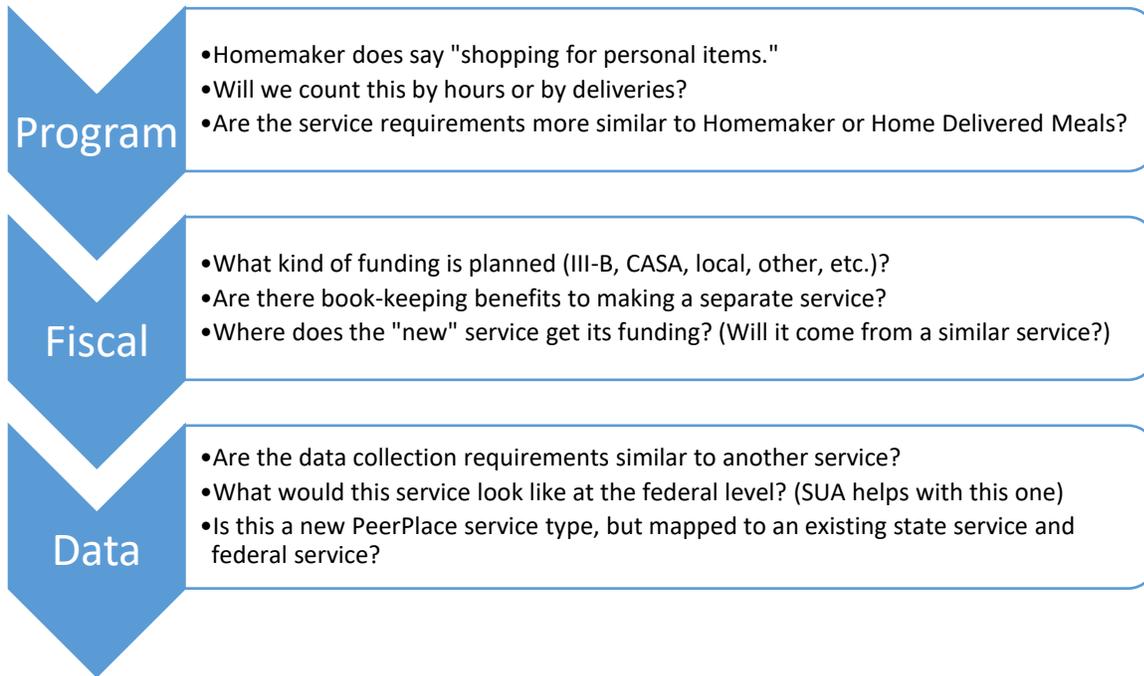
When to Use the Local Service Creation Process:

There isn’t a one-size-fits-all answer. Consider:

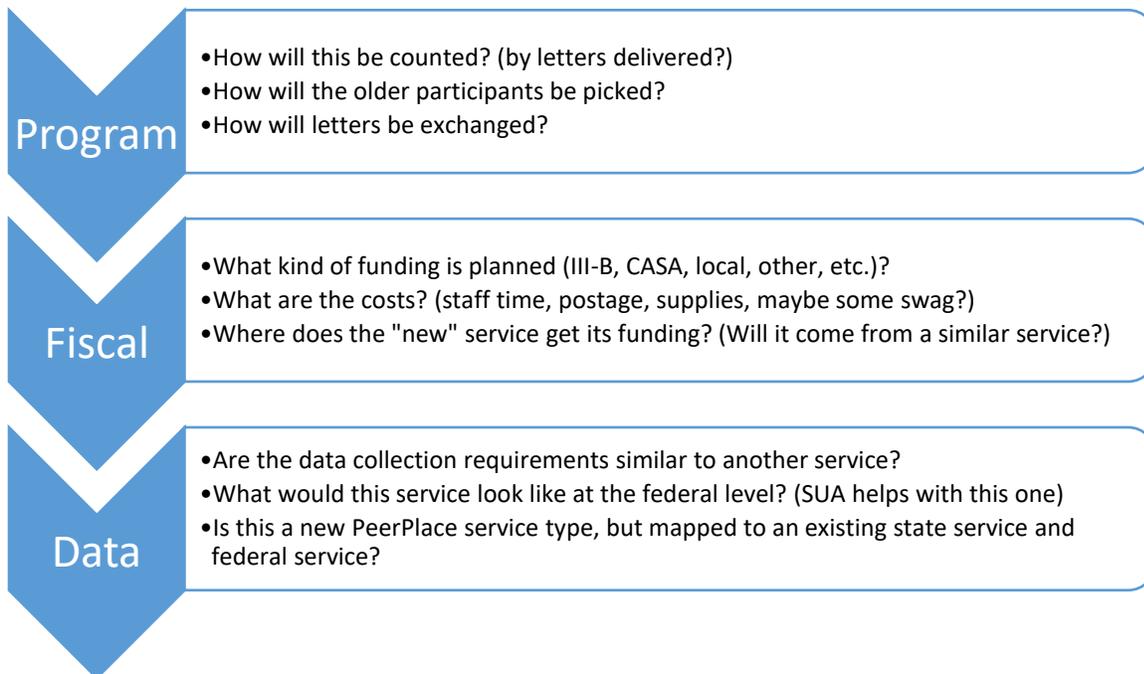
1. Is the proposed service unique & distinct from other services?
 - Can your agency easily distinguish between the proposed and established services?
 - Think about the service narrative, definition, and the rest of the service details.
 - Does it align with its matching federal service?
2. Is there a business need for the proposed service to be separate for funding reasons?
 - Consider the budget and Form As. Will it be easy to track it separately from other services?
 - Is the funding similar or different to other state and federal services?
3. Does a new PeerPlace Service Type need to be made for a current state service?
 - Is the proposed service an already established service?
 - PeerPlace service types can provide more detail than State-level services.

State Unit on Aging Program Reference Guide

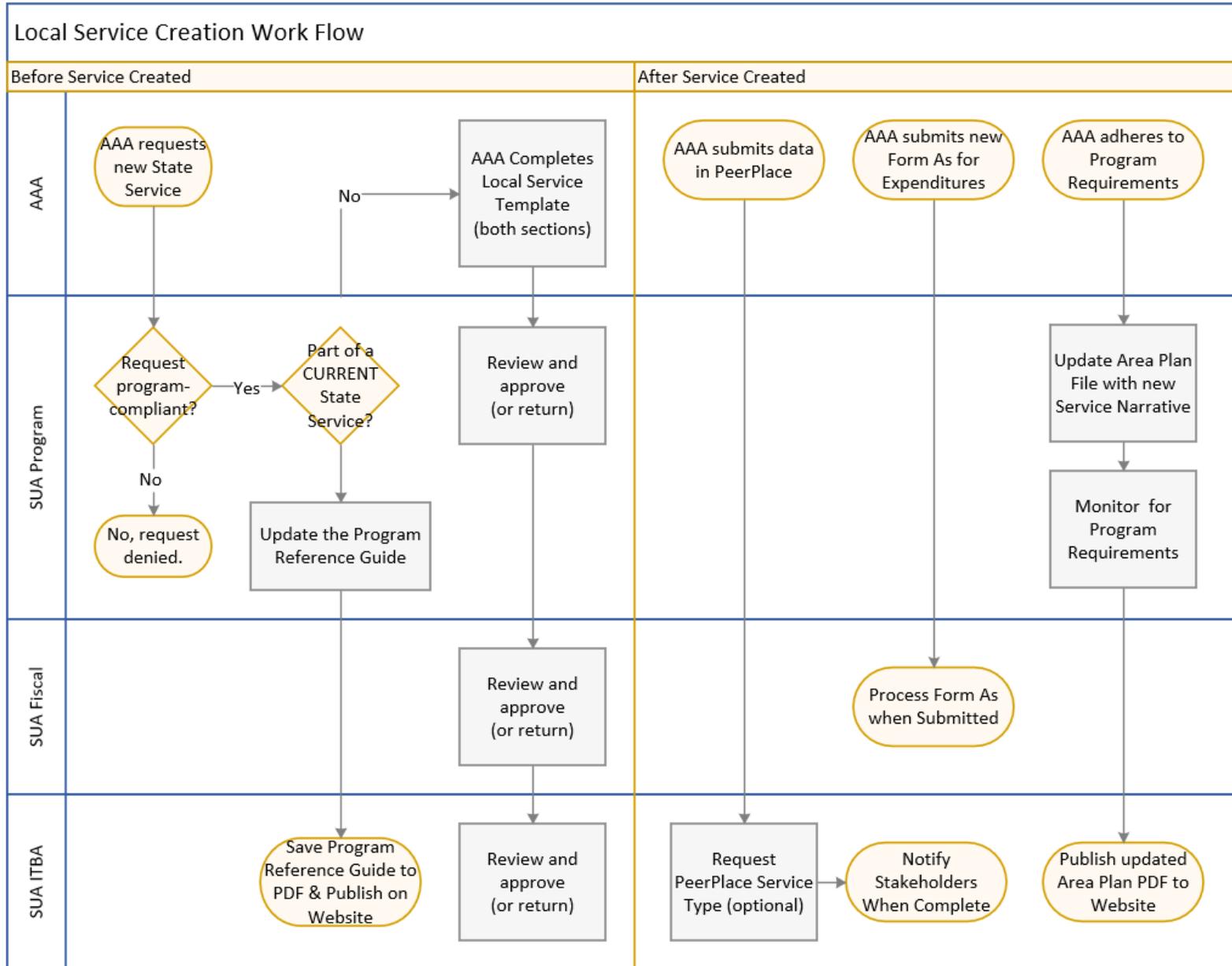
Example 1: [AAA #1](#) wants to partner with Door Dash to deliver medications and groceries to OAA-eligible individuals. Should this be a new state service? Or should it be part of Homemaker?



Example 2: [AAA #2](#) wants to start a grandparent pen pal program with a local grade school.



State Unit on Aging Program Reference Guide



State Unit on Aging Program Reference Guide

Unused Federal Services

Term	Service Unit Type	Definition
Adult Day Care/Health	Hour	Services or activities provided to adults who require care and supervision in a protective setting for a portion of a 24-hour day. Includes out of home supervision, health care, recreation, and/or independent living skills training offered in centers
Caregiver Counseling	Hour	A service designed to support caregivers and assist them in their decision-making and problem solving. Counselors are service providers that are degreed and/or credentialed as required by state/territory policy, trained to work with older adults and families and specifically to understand and address the complex physical, behavioral, and emotional problems related to their caregiver roles. This includes counseling to individuals or group sessions. Counseling is a separate function apart from support group activities or training (see definitions for these services).
Caregiver Information Services	Activity	A public and media activity that conveys information to caregivers about available services, which can include an in-person interactive presentation to the public conducted; a booth/exhibit at a fair, conference, or other public event; and a radio, TV, or Web site event.
Caregiver Respite (Other)	Hour	A respite service provided using OAA funds in whole or in part, that does not fall into the previously defined respite service categories.
Caregiver Support Groups	Session	A service that is led by a trained individual, moderator, or professional, as required by state/territory policy, to facilitate caregivers to discuss their common experiences and concerns and develop a mutual support system. Support groups are typically held on a regularly scheduled basis and may be conducted in person, over the telephone, or online. For the purposes of Title III-E funding, caregiver support groups would not include “caregiver education groups,” “peer-to-peer support groups,” or other groups primarily aimed at teaching skills or meeting on an informal basis without a facilitator that possesses training and/or credentials as required by state/territory policy.
Caregiver Training	Hour	A service that provides family caregivers with instruction to improve knowledge and performance of specific skills relating to their caregiving roles and responsibilities. Skills may include activities related to health, nutrition, and financial management; providing personal care; and communicating with health care providers and other family members. Training may include use of evidence-based programs; be conducted in-person or on-line and be provided in individual or group settings.
Nutrition Counseling	Hour	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.

Other Service Domains

Domain Names

- Assistive Technology/ Durable Equipment/ Emergency Response
- Consumable Supplies
- Home Modifications/ Repairs
- Elder Abuse Prevention/ Elder Rights
- Health
- Outreach
- Public Education
- Socialization
- Access [Service] Not Reported Elsewhere
- Other

Supplemental Service Domains

Domain Names

- Assistive Technology/ Durable Equipment/ Emergency Response
- Consumable Supplies
- Home Modifications/ Repairs
- Legal and/or Financial Consultation
- In-Home Services (Homemaker, Chore, Personal Care)
- Transportation
- Nutrition Services
- Other

SHIP Counseling

From the Nebraska Department of Insurance:

“Nebraska SHIP educates people with Medicare, empowering seniors, and people with disabilities to make informed decisions about health insurance. Because Medicare can be confusing, the federal government, through the Administration on Community Living (ACL), funds a SHIP or State Health Insurance Assistance Program in every state. The Nebraska SHIP is a division of the Nebraska Department of Insurance. SHIP does not sell insurance, nor does it endorse any insurance company, product, or agent.

Nebraska SHIP has a statewide network of certified counselors and partner organizations. Our counselors receive extensive training on Medicare and related health insurance. Counselors are available to meet for one-on-one counseling, help with problem-solving, and support during decision making. SHIP counselors will not recommend policies, companies, or insurance agents, but will provide free, confidential, and unbiased assistance.

An important role of SHIP is to provide outreach and education regarding health insurance options, benefits, and choices. SHIP participates in outreach, presentations, and media activities and assists with Open Enrollment.”

<https://doi.nebraska.gov/consumer/senior-health>

Area Agencies on Aging may provide SHIP services. Some [AAAs](#) recruit and pay for volunteers to be trained SHIP Counselors. Some [AAAs](#) have seasonal or full-time staff that are trained, SHIP Counselors.

Title III-B and CASA funds can be used to support the provision of SHIP Services, but ONLY those expenses paid by III-B and CASA should be reported. Expenses paid with SHIP funding and SHIP funds received should NOT be reported on reimbursement forms. Agencies should work with their SHIP grantor to determine whether Title III-B or CASA funds should be reported as SHIP support in that reporting system.

SHIP Services are reported to the ACL through a different reporting mechanism than the SPR and should NOT be documented in PeerPlace.

If Title III-B or CASA funds are used to support the SHIP program, the Local Service Creation process should be followed. [AAAs](#) will submit a service narrative and fiscal reimbursement requests (Form As) to the SUA. Data will not be collected in PeerPlace – it will be solely reported in the SHIP software system.

Nutrition Goals

The Goals of the Older Americans Act Title III-C programming are to:

- Reduce hunger, food insecurity, and malnutrition
- Promote socialization of older individuals
- Promote health and well-being with access to nutrition and health promotion/disease prevention services to delay the onset of chronic diseases

Congregate and Home Delivered Meals:

[AAAs](#) should provide nutrition programming set forth by ([Title 15-Chapter4](#)). The OAA requires that all meals adhere to the current Dietary Guidelines for Americans ([DGAs](#)) and provide a minimum of one-third of the Dietary Reference Intake (DRI). In doing so, nutrition programs should make meals both nutritious and appealing to older adults. Programs should strive to increase participation by soliciting feedback from meal participants and working with individuals who may have barriers to accessing both congregate and home-delivered meal programs.

[AAAs](#) may consider partnerships with other entities (i.e., restaurants, caterers, grocery stores, etc.) to provide meals to nutrition sites or as a voucher program. Registered Dietitians review, develop, and approve menus, allowing nutrition programs to provide well-balanced meals. This also applies to programs that utilize other food preparation services and contracts.

Reaching older adult minorities, including, those with the greatest economic and social need is a priority of the OAA. Expanding services to minority populations throughout all of Nebraska is integral to Title III-C programming. Increasing program participation among older adult minorities that includes culturally appropriate services (e.g., culturally appropriate meals, nutrition education, and communication) is a central goal to reducing food insecurity, and malnutrition within these populations.

To Go Meals:

Adding To Go Meals should assist nutrition programs in catering to individuals who wish to participate, by receiving their meals to be consumed outside a congregate setting. This additional service should assist [AAAs](#) by increasing meal participation and appealing to both new and current meal participants. Program guidance and regulations should be followed according to the SUA.

Nutrition Education:

[AAAs](#) should strive to prioritize nutrition education for all meal participants. Increasing the frequency and quality of curriculum should be at the forefront of nutrition programs, especially for individuals who may be at risk for chronic health conditions. Nutrition education may include live presentations, videos, and physical handouts. Emphasis should always be placed on nutrition specific to the older adult.

Dietary Guidelines for Americans: <https://www.dietaryguidelines.gov/>

Dietary Reference Intakes: <https://ods.od.nih.gov/HealthInformation/nutrientrecommendations.aspx>

ACL Nutrition Services: <https://acl.gov/programs/health-wellness/nutrition-services>

Non-Older Americans Act Programs

Care Management Unit Program

The state Care Management program operates through Care Management Units.

It was established through the [Care Management Act](#), §81-2229 to 81-2235

Care Management Units follow state regulations ([Title 15 - Chapter 3](#)). Units must be periodically recertified.

The purpose of the Care Management program is to maintain a statewide system of Care Management units through area agencies on aging to aid in coordinating the delivery of services for older Nebraskans. This includes properly utilizing all available resources to ensure individuals receive the level of care that best matches their needs.

Care Managers utilize the Standardized Long-Term Care Assessment document to evaluate the needs of clients and then develop a Long-Term Care Plan which serves to

- Establish individual goals and objectives agreed to by the client
- Establish a time frame for the implementation of the Long-Term Care Plan
- Define the services which are needed, including any equipment or supplies
- Define who provides each service. Specify the availability of services, supplies, and equipment
- Specify the costs and methods of service delivery
- Provide for reassessment upon a change in client status

Care Managers then provide ongoing monitoring and review of the Long-Term Care Plan. Care Management services include:

- Consultation
- Assessment
- Care plan development and coordination
- Referral
- Care plan review and monitoring

Individuals with a family income below three hundred percent of the federal poverty level pay from zero to ninety percent of the fee for the services provided by a care management unit based upon a sliding fee scale established and published by the Nebraska State Unit on Aging.

Senior Volunteer Program

The Senior Volunteer Program operates through public agencies and non-profit organizations that receive grants to operate a Senior Volunteer program.

The Senior Volunteer Program Act established it. §81-2273 to 81-2283

Senior Volunteer Programs follow state regulations ([Title 15 - Chapter 5](#)).

Senior volunteers assist older adults by providing one-on-one companionship and daily living assistance. The goal is to assist older individuals with difficulty with daily living tasks to continue living in their own homes in their community. Services can include:

- Assistance with important daily tasks such as getting mail, shopping, or transportation to medical appointments.
- Encouragement to remain active and live with independence.
- A watchful eye to notice when extra care is needed.
- Friendship and companionship.

Senior volunteers give families or professional caregivers much-needed time off from their duties, run errands, and often provide friendship for their clients.

Senior volunteers must be age 60 or older and enjoy helping older adults. Volunteers receive:

- Pre-service orientation and ongoing training.
- Annual physical examination.
- Accident, personal liability, and excess auto insurance coverage while volunteering.
- Assistance with transportation fuel and meals taken during the service.
- Annual recognition event.
- The satisfaction of knowing they are making a difference in someone's life.

State Unit on Aging Program Reference Guide

Aging & Disability Resource Center

The ADRC program operates through Aging and Disability Resource Centers.

It was established by the [Aging & Disability Resource Center Act](#). The State Unit on Aging (SUA) oversees the program and funds, part of Nebraska's Department of Health & Human Services.

The [ADRC](#) is for Nebraskans aged 60 years or older, people with disabilities of all ages, family members, caregivers, and advocates. Local ADRCs provide information, referral, and assistance for accessing community services and long-term care options.

The SUA works with the [AAAs](#) and partnering organizations to ensure the legislative intent of the ADRCs is met. This includes developing definitions of services, maintaining data regarding ADRC services provided, contracting with organizations to develop and maintain the Nebraska ADRC website, and developing a required annual report for the Nebraska State Legislature.

See the ADRC Services section for service-specific information.

The Nebraska Association of Area Agencies on Aging (NE4A) and ADRC partners can contract with an outside entity to serve as ADRC Project Coordinators. They may facilitate Leadership Team and Consumer Review meetings in which the SUA participates.

Work Force Development Grant

Place holder text – This will be added later.

ADRC Reporting Requirements

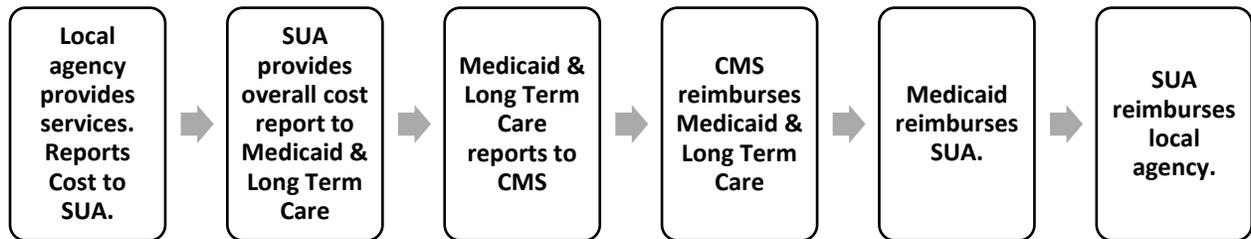
The SUA provides an annual report to the Nebraska State Legislature each December. This report will encompass the State Fiscal Year that ended during the calendar year. If an ADRC service requires more than service units to be provided, additional information must be given to the SUA by October 1st of the calendar year.

Medicaid Administrative Claiming (MAC)

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

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

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



Activities that can receive funding:

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

An example of the math for administrative claiming:

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

Frequently Asked Questions

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

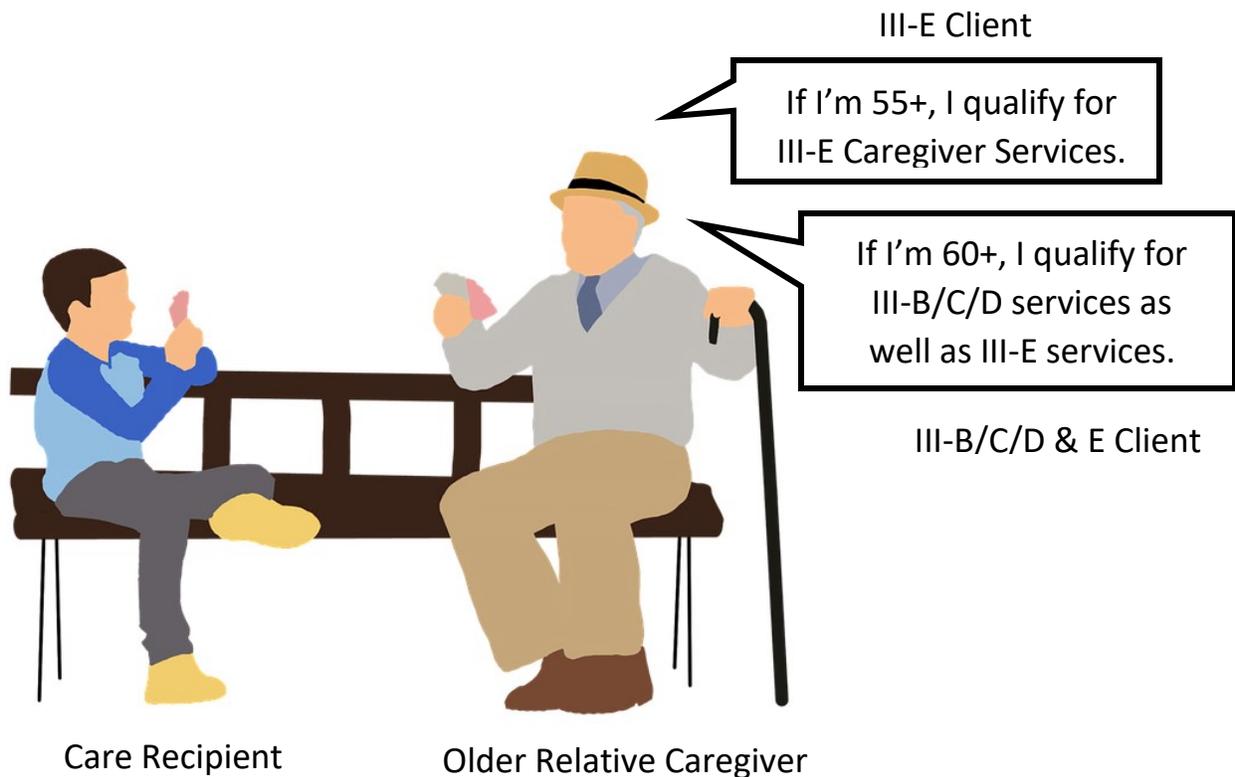
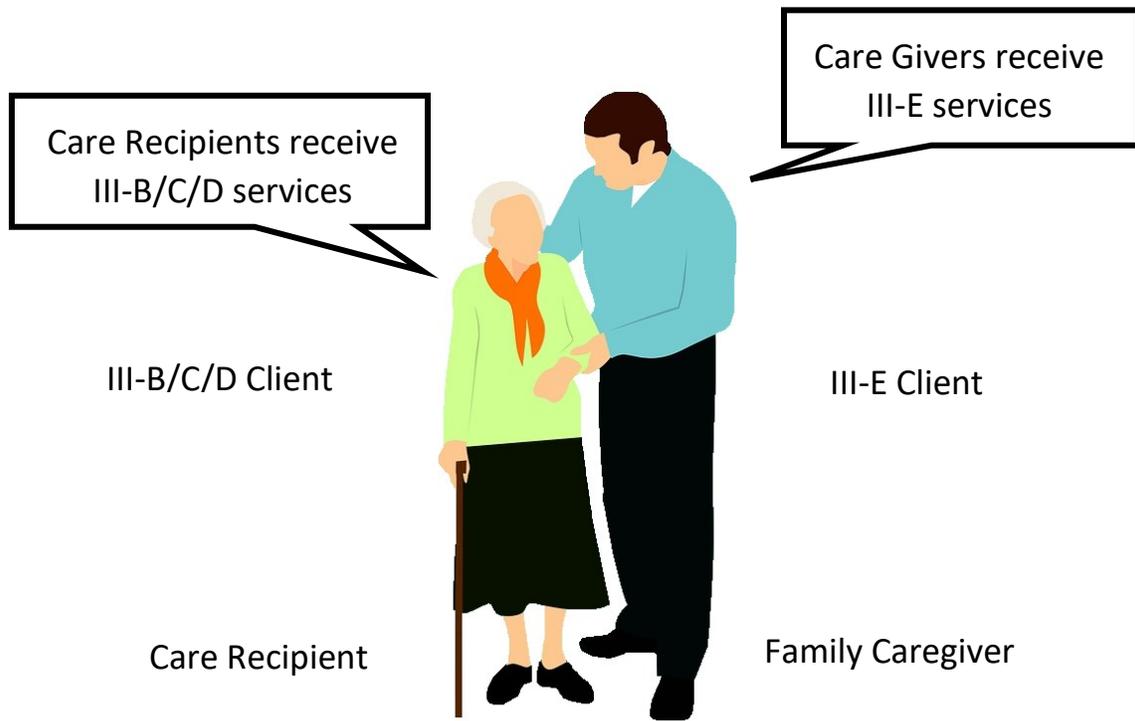
Similar services can be provided for an Older Individual or to a Caregiver (Family or Older Relative) and funded through III-B (Supportive Services) or III-E (Caregiver).

Older Individual service	Caregiver service
1. Personal Care	53. Caregiver In-Home Service
2. Homemaker	53. Caregiver In-Home Service
3. Chore	53. Caregiver In-Home Service
4. Home Delivered Meals	55. Caregiver Meals
6. Case Management	34. Caregiver Case Management
7. Assisted Transportation	54. Caregiver Transportation
8. Congregate Meals	55. Caregiver Meals
10. Transportation	54. Caregiver Transportation
12. Information & Assistance	36. Caregiver Information & Assistance
17. Technology and Equipment	50. Caregiver Technology and Equipment
18. Consumable Supplies	51. Caregiver Consumable Supplies
19. Home Maintenance	52. Caregiver Home Maintenance

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

See the next page for clarification.

State Unit on Aging Program Reference Guide



What's the difference between...?

1. Care Management / Case Management

Care Management and **Case Management** are often synonymously for care coordination services. The State Unit on Aging recognizes these as two different services.

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

Care Management requires the use of the [Care Management Assessment](#).

2. Information & Assistance / Information & Referral

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

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

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

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

3. Options Counseling / Care or Case Management

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

4. Caregiver Information & Assistance / Caregiver Case Management

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

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

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

6. Outreach / Information & Assistance

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

7. Outreach / Social Activities

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

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

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

8. Health Programs / Health Activities

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

9. Transitional Options Counseling / Options Counseling

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

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

10. Mobility Training / Information & Assistance

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

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

11. Senior Center Hours / Social Activities

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

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

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

Example: The senior center holds a book club meeting every Friday.

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

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

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

12. Multipurpose Senior Center / Nutrition Site

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

Who is a Family Caregiver or Older Relative Caregiver?

1. Does a Family Caregiver have to be family?

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

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

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

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

Yes. While Alzheimer’s disease mainly affects those 65 years or older, about 5% of all Alzheimer’s patients who have “early-onset” Alzheimer’s are diagnosed in their 40s or 50s. An adult providing informal in-home and community services for an individual with Alzheimer’s qualifies as a [Family Caregiver](#) under the National Family Caregiver Support Program, regardless of the Care Recipient’s age.

Can Emergency Response Systems be counted as a respite service?

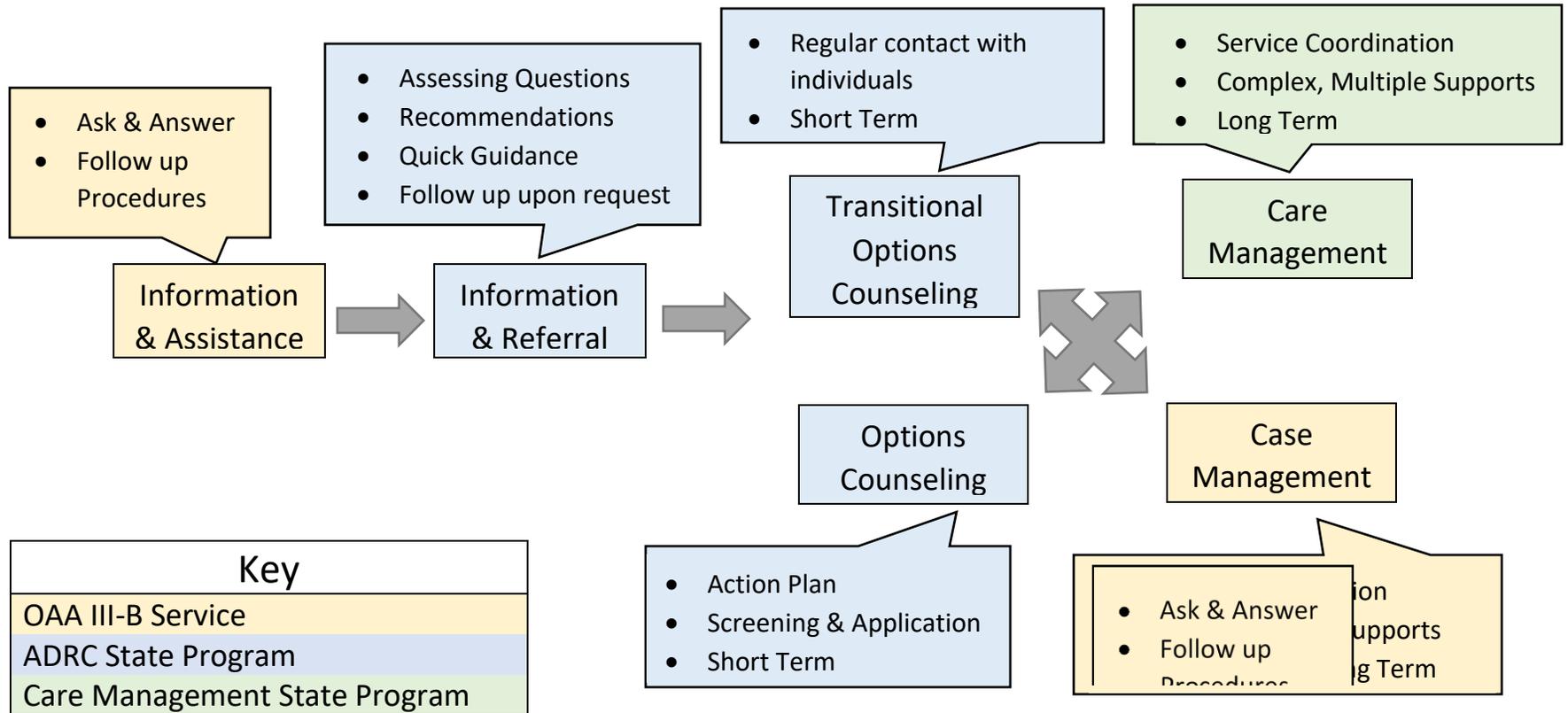
No. Emergency Response Systems (ERS) are meant to provide 24-hour coverage. Respite services are intended to short-term relief from caregiver responsibilities.

Emergency Response Systems should be documented under 17. Technology & Equipment or 50. Caregiver Technology and Equipment.

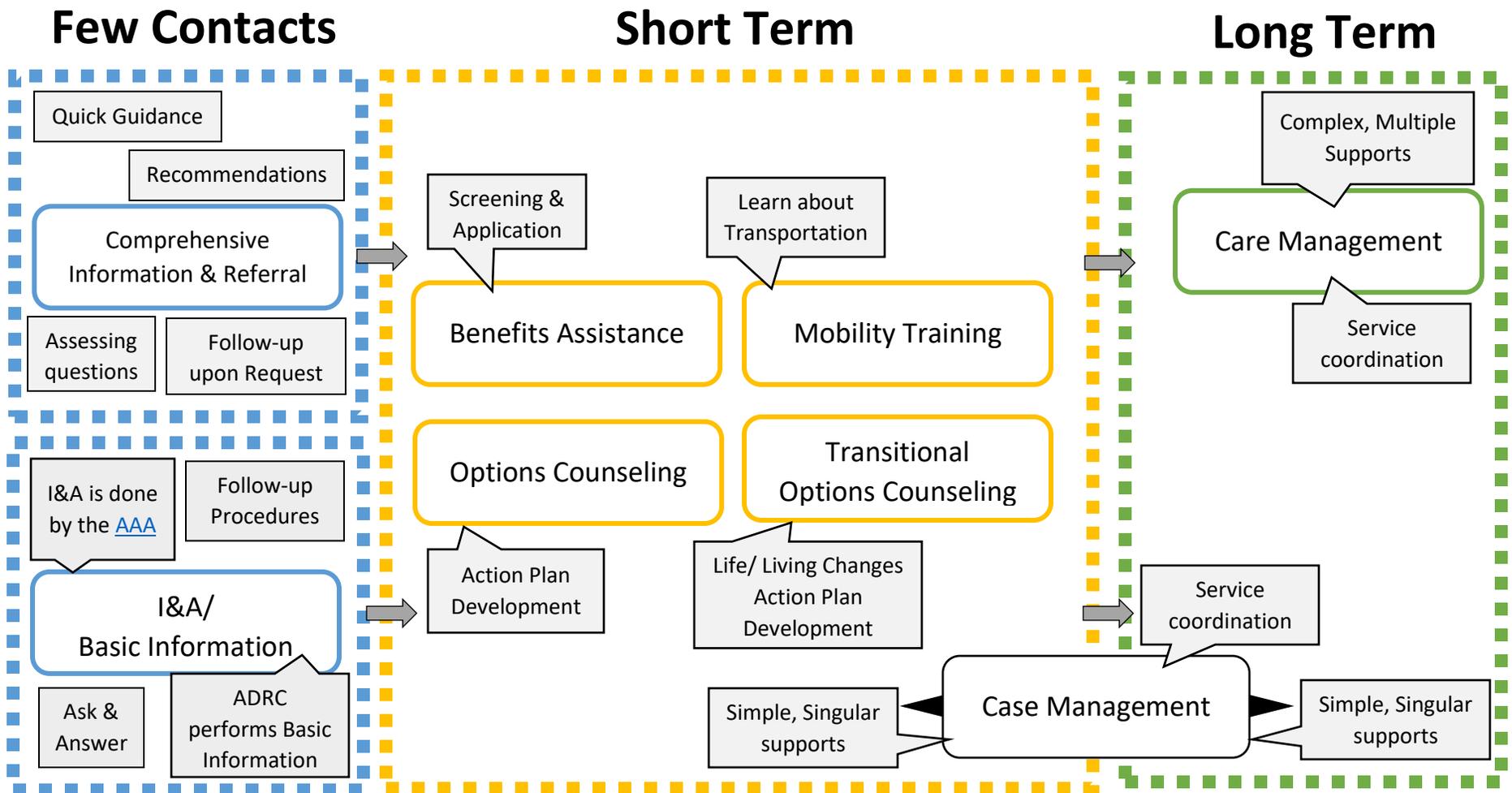
Under Home Delivered Meals and Congregate Meals mentions “Meals provided to an individual through means-tested programs may be included.” Should we be means-testing for meals?

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

Service Workflow I



Service Workflow II



Old Taxonomy Services – Where are they now?

5. Adult Day Care/Health

This service was removed from the FY 24 – 27 Program Reference Guide because the service was not provided. Local Service Creation Candidate

Previously defined as: Services or activities provided to adults who require care and supervision in a protective setting for a portion of a 24-hour day. Includes out of home supervision, health care, recreation, and/or independent living skills training offered in centers most commonly known as Adult Day, Adult Day Health, Senior Centers, and Disability Day Programs.

During the new area plan planning process, it was noted that Adult Day Care/Health had not been provided in four years.

9. Nutrition Counseling

This service was removed from the FY 24 – 27 Program Reference Guide because the service was not provided. Local Service Creation Candidate

Previously defined as: 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.

13. Health Promotion / Disease Prevention Evidence-Based

This service was renamed Health Program.

14. Health Promotion / Disease Prevention Non Evidence-Based

This service was renamed Health Activities.

21. Telephone & Visiting

This service was removed from the FY 24 – 27 Program Reference Guide. Local Service Creation Candidate

Previously defined as: Phoning a client in order to provide comfort or help. Telephone & Visiting services shall:

- Provide regular telephone or in person contact to or from isolated individuals.
- Be provided by staff, knowledgeable and skilled in the services provided, including a volunteer under the supervision of the Care Manager or Options Counselor.
- Include a prearranged schedule for contacting the participant.
- Maintain a log of contacts documenting:
 1. Date of the contact.
 2. Length of the call.
 3. Summary of the contact.
 4. Determination of safety and well-being; and

5. Determination of special assistance needed.

- Establish a procedure to be implemented in the event of a non-answered call.

Include the participant's preference regarding frequency of calls.

23. Material Distribution

This service was removed from the FY 24 – 27 Program Reference Guide to meet federal reporting requirements. It was replaced by 17. Technology & Equipment, 18. Consumable Supplies, and 19. Home Maintenance.

Previously defined as: 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.

25. Counseling

This service was removed from the FY 24 – 27 Program Reference Guide. Local Service Creation Candidate

Previously defined as: Services that assist older adults to address issues, concerns, or make decisions. This can include counseling on specific topics like financial issues, SHIP (Senior Health Insurance Information Program, managed through a federal grant to the Nebraska Department of Insurance), housing, health insurance, taxes, etc.

See the SHIP Counseling section for more information.

26. Respite

This service was removed from the FY 24 – 27 Program Reference Guide because the service was not provided. Local Service Creation Candidate

Previously defined as Service which offer temporary, substitute supports or living arrangements for care recipients to provide a brief period of relief or rest for caregivers.

28. Information Services

This service was removed from the FY 24 – 27 Program Reference Guide.

Previously defined as: 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.

30. Caregiver Counseling

This service was removed from the FY 24 – 27 Program Reference Guide. Local Service Creation Candidate

Previously defined as: A service designed to support caregivers and assist them in their decision-making and problem solving. Counselors are service providers that are degreed and/or credentialed as required by state policy, trained to work with older adults and families and specifically to understand and address the complex physical, behavioral, and emotional problems related to their caregiver roles. This includes counseling to individuals. Counseling is a separate function apart from support group activities or training (see definitions for these services).

31. Caregiver Training

This service was removed from the FY 24 – 27 Program Reference Guide. Local Service Creation Candidate

Previously defined as: A service that provides [family caregivers](#) with instruction to improve knowledge and performance of specific skills relating to their caregiving roles and responsibilities. Skills may include activities related to health, nutrition, and financial management; providing personal care; and communicating with health care providers and other family members. Training may include use of evidence-based programs; be conducted in-person or on-line; and be provided in individual or group settings.

32. Caregiver Respite

This service was removed from the FY 24 – 27 Program Reference Guide. It has been split into three services to track the location (56. Caregiver In-Home Respite, 57. Caregiver Day OOH Respite, 58. Caregiver Overnight OOH Respite).

Previously defined as: Service which offer temporary, substitute supports or living arrangements for care recipients to provide a brief period of relief or rest for caregivers.

33. Caregiver Supplemental Services

This service was removed from the FY 24 – 27 Program Reference Guide. It has been split into six services to meet federal reporting requirements (50. Caregiver Technology & Equipment, 51. Caregiver Consumables, 52. Caregiver Home Maintenance, 53. Caregiver In-Home Service, 54. Caregiver Transportation, 55. Caregiver Meals).

Previously defined as: 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 Meal.

ERS services for the Care Recipient should be recorded under this service. The Client is the Caregiver.

35. Caregiver Support Groups

This service was removed from the FY 24 – 27 Program Reference Guide. Local Service Creation Candidate

Previously defined as: A service that is led by a trained individual, moderator, or professional, as required by state policy, to facilitate caregivers to discuss their common experiences and concerns and develop a mutual support system. Support groups are typically held on a regularly scheduled basis and may be conducted in person, over the telephone, or online.

37. Caregiver Outreach

This service was removed from the FY 24 – 27 Program Reference Guide. Put all service units under Outreach.

Previously defined as: 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.

38. Caregiver Information Services

This service was removed from the FY 24 – 27 Program Reference Guide. Local Service Creation Candidate

Previously defined as: A media activity that conveys information to caregivers about available services, aging, or the aging network. It is a one-way mode of communication. Examples include Facebook posts, TV Ads/PSAs, radio ads/PSAs, website hits, brochures, newspaper ads, press releases.

This service was removed from the FY 24 – 27 Program Reference Guide as service units no longer need to be tracked. Track costs associated with the service under Print & Supplies.

Definitions

Letter A

Abuse

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

Activities of Daily Living

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

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

Administration on Community Living

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

Adult Protective Services

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

Aged and Disabled Waiver

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

Aging and Disability Resource Center

Also known as **ADRC**. A community-based entity established to provide information about long-term care services and support and to facilitate access to options counseling to assist eligible individuals and their representatives in identifying the most appropriate services to meet their long-term care needs. **§68-1114** Only Area Agencies on Aging are eligible to receive funds directly from the State Unit on Aging. Other agencies can provide ADRC services and receive ADRC funding by becoming a sub-grantee of the [AAA](#). The [AAA](#) in turn will monitor the sub-grantee and provide technical assistance.

Aging Network

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

OAA §102 (a) (5)

Annual Budget

The annual budget is a document identifying fiscal year expenditures based on services to be provided in the Planning and Service Area, and corresponding service unit projections. **15 NAC 1-002.02**

Area Agency on Aging

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

Assessment

An assessment is a comprehensive appraisal of individuals by making orderly and purposeful observations, conducting interviews, and recording the results of those observations and interviews on a standardized assessment document issued by the Department. **15 NAC 1-002.03**

Assistance

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

Assistive Device

(A) The term “assistive device” includes an assistive technology device.

(B) The terms “assistive technology”, “assistive technology device”, and “assistive technology service” have the meanings given such terms in section 3 of the Assistive Technology Act of 1998 (29 U.S.C. 3002).

(C) 1 The term “State assistive technology entity” means the agency, office, or other entity designated under subsection (c)(1) of section 4 of the Assistive Technology Act of 1998 (29 U.S.C. 3003) to carry out State activities under such section. **OAA § 102 (a) 8 A-C**

At Risk for Institutional Placement

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

Authority and Capacity

The authority and capacity are the power and right of an Area Agency on Aging to enforce, administer, and implement laws, rules, and regulations and programs for which it is responsible. **15 NAC 1-002.04**

Letters B & C

Caregiver / Family Caregiver / Older Relative Caregiver

Caregiver

An individual who has the responsibility for the care of an older individual, either voluntarily, by contract, by receipt of payment for care, or because of the operation of law and means a family member or other individual who provides (on behalf of such individual or of a public or private agency, organization, or institution) compensated or uncompensated care to an older individual.

OAA §102 (a) (18) (B) Caregiver is defined in the area defining exploitation, abuse, and other related terminology. It does not reference the National Family Caregiver Service Program (NFSCP), Part E of the Older Americans Act.

Family Caregiver

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

Older Relative Caregiver

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

Care Management Fee Scale

The Care Management fee scale is the document issued annually by the State Unit on Aging, using the Federal Poverty Level, for Area Agencies on Aging to determine the client fee for Care Management services based on family income. Defined as follows:

- (A) Family income is the total income the individual and spouse (if any) receives annually;
- (B) Income is money received as profit from fees (net income after business expenses, before taxes) from a person's own business, professional practice, partnership, or farm;
- (C) Income includes but is not limited to, regular payments such as social security, income from public assistance or welfare, interest, dividends, pensions, net rents, alimony, child support, or allotments;
- (D) Income includes wages, salary, commission, bonuses, or tips from all jobs (before deductions from taxes), including sick leave pay; and
- (E) For the purposes of this Title, family means an individual and his or her spouse.

15 NAC 1-002.06 A-E

Care Management Unit

The Care Management Unit is the organization, which is created by, or which is contracting with, an Area Agency on Aging, or the public or private entity contracting with the Department, to provide Care Management program services as defined in the Act and this Title. **15 NAC 1-002.07**

Care Recipient

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

Case

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

Center for Independent Living

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

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

Centers for Medicare & Medicaid Services

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

Medicaid

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

Medicare

A federal health insurance program for:

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

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

Child

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

CHOICES

Also known as **Choosing Home or In Community Elder Services**. A combination of three programs (Aged and Disabled Waiver, Care Management, and Senior Care Options) which work together to assure that older Nebraskans receive the right services at the right time through case management, assessment, and planning. Aged and Disabled Waiver and Senior Care Options are not regulated by the SUA and will only be defined. The SUA oversees Care Management, and it can be found in the Services section.

Client

An eligible individual receiving services authorized by the Older Americans Act of 1965, or 15 Nebraska Administrative Code (NAC) services, also known as a participant. **15 NAC 1-002.09**

Client Approval

See Individual Approval.

Community Focal Point

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

Congregate Meal Site

See **Nutritional Site**.

Conflict of Interest

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

Continuum of Care

Continuum of care is a range of services designed to ensure that persons are receiving, when reasonably possible, the level of care that best matches their level of need. **15 NAC 1-002.10**

Contractor

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

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

Contribution

Also known as **Voluntary Contribution**. Contribution shall mean a donation of money or anything of value that is voluntarily given by a participant to a service provider. **15 NAC 1-002.11** A noncoercive solicitation encouraged for individuals whose self-declared income is at or above 185 percent of the poverty line, at contribution levels based on the actual cost of services. **OAA § 315 (b) (1)**

Cost Sharing

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

Letters D - F

Direct Care Program

A direct care program is any program of an Area Agency on Aging, except the Care Management program, providing services to older eligible individuals. **15 NAC 2001.01K**

Disability

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

Dietary Guidelines for Americans

Also known as **DGAs**. Provides advice on what to eat and drink to meet nutrient needs, promote health, and help prevent chronic disease. **HHS Office of Disease Prevention and Health Promotion, USDA Center for Nutrition Policy, and Promotion.**

Dietary Reference Intakes

Also known as **DRIs**. They are a set of reference values used to plan and assess nutrient intakes of healthy people. **Food and Nutrition Board of the National Academies of Science Engineering, and Medicine.**

Ethnicity

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

Environmental Needs

Environmental needs are factors required to maintain an individual in an appropriate and safe living arrangement. **15 NAC 1-002.15**

Fee Scale

See Cost Sharing or Care Management Fee Scale.

Federal Poverty Level

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

It is issued annually by the federal Department of Health and Human Services (HHS).

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

Fiscal Year

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

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

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

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

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

Federal Fiscal Year

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

State Fiscal Year

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

Local Fiscal Year

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

Frail

Also known as **Functionally Impaired**.

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

Functionally Impaired

See Frail.

Functional Needs

Functional needs are factors that affect an individual's ability to perform the activities of daily living and the instrumental activities of daily living. **15 NAC 1-002.16**

Letters G & H

Gender

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

Geographic Distribution

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

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

Non-Rural/Urban

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

Rural

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

Grant

Also known as Subaward. An award of financial assistance in the form of money, or of property in lieu of money, by the Department.

Grantee

Grantee is any legal entity to which a grant is awarded, and which is accountable to the Department for the use of the grant. The grantee includes the entire legal entity even if only a particular component of the entity is designated in the grant. **15 NAC 1-002.18**

Greatest Economic Need

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

Greatest Social Need

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

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

OR

- threatens the capacity of the individual to live independently

OAA §102 (a) (24)

Group Setting

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

Hispanic/Latino

See [Ethnicity](#).

Home Care Consumer Rights

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

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

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

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

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

or her needs and preferences, and involving anyone he or she chooses to participate with him or her in that planning;

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

(7) The right to refuse home care services;

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

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

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

Home Care Provider

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

Home Care Services

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

Household Status

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

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

Letters I, J, K

In-Home Services

See Home Care Services.

In-Kind

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

Indirect Setting

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

Individual Approval

Also known as Client Approval. Individual approval or client approval is confirmation given after full disclosure, on a form by the eligible individual or the client, or their legal representative. **15 NAC 1-002.21**

Individual with a Disability

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

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

Information Memorandum

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

Instrumental Activities of Daily Living

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

Letter L

Limitation

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

Long-Term Care

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

Long-Term Care Facility

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

Long-Term Care Ombudsman

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

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

State Long-Term Care Ombudsman

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

Local Long-Term Care Ombudsman

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

Ombudsman Associate

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

Long Term Care Plan

A document prepared with a client by the Care Management Unit in compliance with 15 NAC 3. **15 NAC 1-002.23**

Long Term Support and Services

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

Letter M

Meal

food served as the morning, mid-day, or evening meal. The meal must meet Older Americans Act of 1965, state, and local law requirements. **15 NAC 1-002.25**

Medicaid Administrative Claiming

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

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

Agencies providing ADRC services must pursue federal matching funds. **§ 68-11115**

Medical Nutrition Therapy

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

Minority Status

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

Multipurpose Senior Center

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

Letter N

NAMIS

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

NAPIS

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

No Wrong Door

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

Non-Registered Service

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

Nutrition Risk Assessment

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

Nutrition Screening Initiative

Also known as **NSI**. Previously known as **Nutrition Risk Assessment** or **NRA**. The DETERMINE Nutritional Risk Screening Tool was developed by the Nutrition Screening Initiative. It indicates the person’s potential Nutrition Risk. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1694757/>

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

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

Nutrition Site

Also known as a Congregate Meal Site. A location that has congregate meals available for older adults. A site that provides a meal but does not offer other regular aging services like a multipurpose senior center. It is often a restaurant or eating establishment.

Nursing Facility Level of Care

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

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

For more detailed information reference 480 NAC Home and Community-Based Services. This is State Medicaid policy.

Nutrition Services Incentive Program

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

NSIP Qualified Meal (Congregate)

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

- Served to an eligible individual, i.e., a person who is qualified to receive services under the OAA as defined in Title III; and
- Served to an eligible person who has NOT been means-tested for participation; and

State Unit on Aging Program Reference Guide

- Compliant with the nutrition requirements; and
- Served by an eligible agency, i.e., has a grant or contract with a SUA or [AAA](#); and
- Served to a person who has an opportunity to contribute toward the cost of the meal.

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

NSIP Qualified Meal (Home-Delivered)

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

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

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

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

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

Letter O - P

Older Americans Act Performance System

Also known as **OAAAPS**. The system used by the SUA to upload and report SPRs to the ACL. It replaced the **NAPIS** system in FFY 2022.

Older Individual

Any individual who is 60 years of age or older.

One-on-One

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

Pass-Through Entity

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

Planning and Service Area

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

Point of Entry

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

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

Potentially Hazardous Foods

Potentially hazardous foods are foods that require time control, temperature control, or both, for safety to limit pathogenic microorganism growth or toxin formation. **15 NAC 1-002.31**

Poverty Status

See [Federal Poverty Level](#).

Program Income

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

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

Program Instruction

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

Provider

See Service Provider.

Psycho-Social Needs

Those basic needs which include, but are not limited to, social participation, orientation, understanding, and a sense of well-being. **15 NAC 1-002.32**

Letters Q - R

Race

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

African American/Black

Having origins in any of the black racial groups of Africa.

American Indian/Alaska Native

Having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian

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

Pacific Islander/Native Hawaiian

Having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White

Having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Registered Service

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

Relationship

The familial relationship of the caregiver to the care recipient.

Representative

A person who oversees the legal affairs of another.

Request for Proposal

Also known as RFP. A document containing criteria which is used to solicit applications for a contract or subgrant from potential service providers. **15 NAC 1-002.34**

Restricted Service

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

Letter S

Self-Directed Care/Self-Direction

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

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

The [AAA](#) provides oversight to ensure the services are received, the quality of services, and appropriate use of funds.

Senior Care Options

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

Senior Health Insurance Program

Previously called **SHIP**. See the SHIP section.

Senior Housing

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

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

https://www.hud.gov/program_offices/fair_housing_equal_opp/seniors

Service Delivery Method

The way a service is provided to a client.

Traditional Service Delivery

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

Self-Directed Service Delivery

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

Voucher

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

Service Priority or Prioritization

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

For individuals that are/have:

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

OAA §306 (a) (4) (A)

Service Provider

Also known as **Provider**. Any entity that is obligated under law, subaward, or contract to provide community aging services to eligible individuals, in any Planning and Service Area.15 NAC 1-002.35Service Unit

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

Sign-In Service

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

Social Service Block Grant

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

State Program & Performance Report

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

Staff Type

Full-Time Staff

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

Part-Time Staff

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

Volunteer

An uncompensated individual who provides services or support. Federal programs like Foster Grandparents may offer a stipend to those that are 200% of the FPL or below. The stipend is meant to defray costs associated with volunteering, not as compensation. (Someone should not have to pay to volunteer.)

State Plan

State Plan is a document developed, approved, and submitted to the Governor, and the Administration on Aging, a division of the Administration for Community Living, for the purposes of administering grant funds allocated to the state under the Older Americans Act of 1965. **15 NAC 1-002.37**

State Unit on Aging

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

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

Subaward

Also known as a **Subgrant**. An award of financial assistance in the form of money, or property in lieu of money, made under a grant by a grantee to an eligible subgrantee. The term includes financial assistance when provided by contractual legal agreement, but does not include procurement purchases,

nor does it include any form of assistance which is excluded from the definition of grant in this part. **Title 41 (C) §105-71.102**

Subrecipient

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

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

Letter T

Technical Assistance

Also known as TA. Sharing information and expertise, instruction, skills training, guidance.

Time Study

Also known as Random Moment Time Study or RMTS. A method used to allocate personnel costs.

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

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

III-B (Supportive Services and Senior Centers)

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

III-C1 (Congregate Nutrition Services)

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

III-C2 (Home Delivered Nutrition Services)

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

III-D (Disease Prevention and Health Promotion Services)

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

III-E (National Family Caregiver Support Program)

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

Title-V (Community Service Employment for Older Americans)

Part of the OAA that allows [AAAs](#) to assist older workers.

Title-VI (Grants for Native Americans)

This is given directly to tribal organizations – not the [AAAs](#). It is not administered by the SUA.

Title-VII (Vulnerable Elder Rights Protection Activities)

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

Letters U - Z

Unmet Need

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

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

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

Unduplicated Client Count

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

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

Note: Number of cases, whether they are for the same person are captured in the Cases Closed section of the report. This definition of unduplicated client comports with AOA's/ACL's definition for its National Aging Program Information System (NAPIS) Reporting System.

Voluntary Contribution

See Contribution.

Acronyms

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

Electronic Resources

The State Unit on Aging publishes the following on DHHS' public website:

<https://dhhs.ne.gov/Aging>

- State Plan
- GetSetUp documentation
- Senior Center Lists

<https://dhhs.ne.gov/Pages/Aging-Grantee-Resources.aspx>

- National Resource Links
- State Resource Links
- Nutrition Resource Links
- Forms & Guidance Documents
- Active PIs
- Active IMs
- Monitoring Tools

<https://dhhs.ne.gov/Pages/Aging-and-Disability-Resource-Center.aspx>

- Client Resources
- Regulation Links

<https://dhhs.ne.gov/Pages/Aging-Advisory-Committee.aspx>

- Agendas
- Meeting Minutes

<https://dhhs.ne.gov/Pages/Aging-Elder-Justice-Training.aspx>

- Annual Event Information
- Training Materials

<https://dhhs.ne.gov/Pages/Aging-Program-Documents.aspx>

- Reports
- Area Plans
- Subawards
- Senior Volunteer Program Plans

The State Unit on Aging publishes the following on [DHHS' partner website](#) (External SharePoint):

SUA & Grantee Collaboration Spaces

- Area Plan
- Contacts
- DHHS Access
- Fiscal Submissions
- Monitoring
- Senior Center Management
- SPR
- State Plan

Technical Assistance

- ADRC
- Care Management
- Fiscal
- Medicaid Administrative Claiming
- Nutrition
- PeerPlace

State Unit on Aging Program Reference Guide

Calendar of Events

	Area Plans	Monitoring	SPR	Legal Reporting	Senior Volunteer	Care Management	ADRC Report	MAC	Aging Advisory Committee
January	✓	✓	✓	✓	Reports Due	FPL Changes		✓	
February	✓	✓		✓		Sliding Fee Scale Updates		✓	
March	✓	✓		✓				Cost Reports Due	
April	✓ (2023 Only)			✓	Reports Due			✓	✓
May	✓ (Update Years)			✓	Annual Plan Due			✓	
June				WEAAD Due				Cost Reports Due	
July				✓	Reports Due	New Rates Take Effect	SFY Data Due	✓	
August		✓		SFY Due				✓	
September		✓	✓	✓				Cost Reports Due	
October		✓	✓	✓	Reports Due		Review Report	✓	✓
November		✓	✓	FFY Due				✓	
December	✓	✓	✓	✓			SUA submits to Legislature	Cost Reports Due	

Change List

Date	Page No.	Description
1/9/2023	29	Added Setting: One-on-One Setting or
6/28/2023	21	Updated definition to: Tasks may include preparing meals, shopping for personal items or goods ,
6/28/2023	55	Updated definition to: such as a transition from hospitalization, group setting, or aging out of public school ,
6/28/2023	29	Greyed out client details (they do not need to be collected for the service)
6/28/2023	39	Checked the Client May be Anonymous box under Client Details
6/28/2023	32	Removed III-D language and labeled for Health Programs & Health Activities