
Northwestern Illinois Area Agency on Aging



Public Information Document

NIAAA's Fiscal Year 2017 Plan Amendment to the
2016-2018 Area Plan on Aging

April 19, 2016

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Funded By Older Americans Act and Illinois General Revenue Funds
from the Illinois Department on Aging

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1. About this Public Information Document

Public Hearing Notice Northwestern Illinois Area Agency on Aging

The Northwestern Illinois Area Agency on Aging (NIAAA) is conducting two (2) Public Hearings on the proposed Fiscal Year 2017 Area Plan Amendment.

PURPOSE OF THE PUBLIC HEARING: The public hearing is an opportunity to comment on NIAAA's proposed 2017 Area Plan Amendment (Area Plan Amendment) to the 2016-2018 Area Plan. The Area Plan is a planning document for services/funds made available to NIAAA under the federal Older Americans Act (OAA) and Illinois General Revenue Funds (GRF) through the Illinois Department on Aging (IDoA). The Area Plan includes both a statewide and local aging initiative and a description of changes in aging services related to Illinois' Older Adult Services Act (P.A. 093-1031) and other state and federal legislation.

INVITATION TO ATTEND: Older adults, caregivers, grandparents raising grandchildren, aging service providers, public officials and other interested individuals are invited to attend and share comments about NIAAA's proposed 2017 Area Plan Amendment.

TESTIMONY: Testimony or comments may be presented verbally or in writing. The amount of time available to testify may be limited depending on the number testifying. Those testifying at the public hearing are encouraged to submit a written copy of comments. If you are not able to attend the public hearing, you are encouraged to submit written testimony, which is due no later than 4:00 p.m. on May 20, 2016 to the following address:

Attention: Grant Nyhammer, Executive Director
Northwestern Illinois Area Agency on Aging
1111 S. Alpine Road, Suite 600
Rockford, IL 61108
Fax: (817) 226-8984, email: gn@nwilaaa.org

Contact NIAAA if you have questions about the public hearing or need special accommodations.

PUBLIC INFORMATION DOCUMENT: The Public Information Document provides a summary of funded services and anticipated funding levels for the 2017 Area Plan Amendment. The Public Information Document will be made available beginning April 19, 2016 through the NIAAA office and the NIAAA website (www.nwilaaa.org). Copies of the Public Information Document will be available at the public hearing sites on the day of the hearing or upon request by emailing gn@nwilaaa.org.

PUBLIC HEARING INFORMATION

<u>DATE</u>	<u>TIME</u>	<u>LOCATION</u>
May 18, 2016	9:30 a.m.	Northwestern Illinois Area Agency on Aging 1111 S. Alpine Road, Suite 600, Rockford, IL 61108
May 18, 2016	2:00 p.m.	Senior Resource Center, 500 Fillmore Street Hanover, IL 61041

SUMMARY OF PUBLIC HEARING TESTIMONY: Contact the NIAAA office if interested in obtaining a copy of the summary of public hearing testimony, NIAAA's response to the testimony, and any action taken as a result of the testimony.

Glossary of Terms

AAAs	Area Agencies on Aging (NIAAA is one of thirteen in Illinois)
ADRC	Aging and Disability Resource Center (NIAAA is the pilot ADRC in Illinois)
ARE	Administratively Related Expenses (discretionary funding retained by NIAAA)
ACL	Administration on Community Living (federal aging agency formerly known as the AoA)
AoA	Administration on Aging (which is the former name for the federal agency now known as the Administration on Community Living)
APS	Adult Protective Services (program to prevent abuse to disabled and older adults)
APSPA	Adult Protective Services Provider Agency (nonprofits who contract with IDoA to do investigations and provide case management for the APS program)
Area 01	NIAAA's service area which is comprised of Boone, Carroll, DeKalb, Jo Daviess, Lee, Ogle, Stephenson, Whiteside and Winnebago Counties
CCP	Community Care Program (program to prevent premature institutionalization)
CR	Continuing Resolution (method to continue federal government without a budget)
CRP	Community Reinvestment Program (possible new program in 2017)
FY	The federal fiscal year which for 2017 begins on October 1, 2015
GRF	General Revenue Funds from the State of Illinois
HDM	Home Delivered Meals (service funded by NIAAA)
I4A	Illinois Association of Area Agencies on Aging
I&A	Information and assistance counseling (service funded and provided by NIAAA)
IDoA	Illinois Department on Aging (state agency)
LTSS	Long-term services and supports (services to prevent premature institutionalization)
M-Team	Multi-Disciplinary Teams (comprised of various groups involved in elder abuse)
n4a	National Association of Area Agencies on Aging
NIAAA	Northwestern Illinois Area Agency on Aging
NWD	No Wrong Door (intake system for human services)
NSIP	Nutrition Services Incentive Program (a federal meal program)
PID	Public Information Document (this document)
OAA	Older Americans Act (federal law which created NIAAA and the aging network)
SCSEP	Senior Community Service Employment Program (service provided by NIAAA)
SHAP	Senior Health Assistance Program (state funding for I&A)
TES	Training, education, support for the Caregiver Program
Title III-B	Community based services (services to prevent premature institutionalization)
Title III-C1	Congregate Meals (NIAAA funded service)
Title III-C2	Home Delivered Meals (NIAAA funded service)
Title III-D	Health Promotion (NIAAA funded service)
Title III-E	Caregiver services (NIAAA funded service)
Title IV	Research and innovations programs (services funded by ACL)
Title V	Senior Community Service Employment Program (NIAAA funded service)
Title VII	Elder Abuse and LTC Ombudsman (NIAAA funded service)

Purpose Of This Public Information Document

This Public Information Document (PID) provides a summary of NIAAA's proposed 2017 Area Plan Amendment including a plan for distribution of federal/state funds in NIAAA's nine county service area of Boone, Carroll, DeKalb, Jo Daviess, Lee, Ogle, Stephenson, Whiteside and Winnebago Counties. These nine counties are designated by the Illinois Department on Aging (IDoA) as Service Area 01 (Area 01).

Because funding levels are determined by Federal and State government regulations, **allocation levels listed in this document and NIAAA's Area Plan may change.** If major changes are required, public hearings will be scheduled to receive comments on the proposed changes. At the time of publication of this Public Information Document, neither the FY17 federal nor the FY17 state appropriations have been finalized so the funding amounts in this PID are projections.

Purpose of the FY17 Area Plan Amendment to the FY16-18 Area Plan

The FY17 Area Plan Amendment is a revision to the FY16-18 Area Plan (Area Plan) which is a comprehensive planning document for aging services in northwestern Illinois. Services in the Area Plan promote the dignity and independence of older adults. In developing the Area Plan Amendment, NIAAA assesses the needs of older adults and their caregivers, identifies issues for long-range planning, and sets priorities for funding.

The Public Hearings will provide information about the NIAAA's proposed plans, budget, funding formula, and priorities for community-based services for older adults and family caregivers, including:

Illinois and federal budgets for aging; Access to Services; Transportation; Gap-Filling Services; Congregate Meals; Home Delivered Meals; Legal Assistance; Respite Care, the Adult Protective Services Program, changes in the aging network, the Long Term Care Ombudsman Program; and the Senior Community Service Employment Program.

On June 20, 2016, the NIAAA Board of Directors will review and approve NIAAA's proposed 2017 Area Plan Amendment and it will be submitted to the Illinois Department on Aging before July 1, 2016.

2. Information about NIAAA

About NIAAA

NIAAA is a non-profit organization designated by the State of Illinois in 1974 to be the area agency on aging and is governed by a volunteer Board of Directors. The NIAAA Board sets policy and makes decisions about programs and is advised by an Advisory Council comprised of volunteer members from the nine counties with the majority of members' age 60 years and older.

NIAAA's mission is to assist older adults age 60 and older remain in their homes safely and with dignity as long as possible. NIAAA also provides support services to caregivers of older adults and grandparents raising grandchildren.

NIAAA is one of 13 Area Agencies in Illinois and over 650 across the nation sharing the mission stated in the OAA. NIAAA is part of the "aging network," which includes the federal Administration on Community Living, IDoA, and local public and private agencies serving older adults.

The majority of the funds administered by NIAAA are federal OAA funds. The State of Illinois contributes about one quarter of the resources for services in the Area Plan. Additional funds are raised locally by service providers and/or contributed by those who benefit from the services.

NIAAA Services

NIAAA performs the following services for seniors and caregivers:

- 1. Advocacy** - NIAAA informs seniors and caregivers about proposed legislation and public policies, takes positions on the issues, and presents our positions to elected officials at the local, state and federal levels.
- 2. Planning, Program Development and Coordination** – NIAAA assesses the needs of seniors and caregivers, identifies issues for long range planning, sets priorities for funding, coordinates services, and promotes the development of new or expanded services by forming public and private relationships.
- 3. Supporting Community Programs on Aging** – NIAAA awards federal and state grant assistance to community programs on aging for the provision of services to seniors and caregivers. Services are available to persons 60 and older, caregivers of persons 60 and older, and grandparents and other relatives raising children 18 and under. OAA services are targeted to older adults in greatest social and economic need, especially low-income minority older persons and persons with limited English proficiency, and older adults in rural areas.
- 4. Advocacy for Residents in Long Term Care Facilities** – NIAAA manages a regional Long Term Care Ombudsman Program through a grant with the IDOA and the Office of the State Ombudsman. The Ombudsman Program investigates complaints made by or on behalf of residents of licensed long term care facilities, assisted living facilities and supportive living facilities. The Ombudsmen visit residents, inform residents about their rights, refer residents to Transition Coordinators to facilitate the transition to community-based living arrangements, and advocate for public policies and culture change practices to improve the quality of life of the residents.

- 5. Elder Abuse and Neglect** – NIAAA is the coordinating agency for elder abuse and neglect in Area 01. [Note that while Illinois has changed the name of its elder abuse program to the Adult Protective Services (APS), federal law still uses the term Elder Abuse and Neglect.]
- 6. Senior Employment Programs** – NIAAA provides employment and training opportunities for persons 55 and older, through two grants from IDOA. The Older Americans Community Service Employment Program, authorized by Title V of the OAA and funded by the Department of Labor, provides part-time job placement and on-the-job training for low income persons 55 and older. The Senior Employment Specialist Program, funded through Illinois General Revenue Funds, links older persons seeking employment and training through Illinois WorkNet Centers serving Area 01.
- 7. Aging and Disability Resource Center** – NIAAA is the first Aging and Disability Resource Center (ADRC) not only in Area 01 but in Illinois. The ADRC provides information and referral to programs and services for older adults and individuals with disabilities. NIAAA also is responsible for expanding the ADRC network in Area 01.

The Older Americans Act

The purpose of the Older Americans Act (OAA) is to foster maximum independence and improve the lives of all older Americans by providing a wide array of social and community services. OAA services are targeted to those in poverty, minority, living alone, frail, over age 75, limited English proficiency, rural and older individuals at risk of institutional placement.

The OAA provides a national network for the organization and delivery of social, nutritional, and other supportive services to older persons and their caregivers.

1. Mission of AAAs under OAA

Since all 655 Area Agencies on Aging (AAAs) nationwide are subject to the OAA, they all share common mission which is defined by the OAA as follows:

The Area Agency on Aging shall be the leader relative to all aging issues on behalf of all older persons in the planning and service area. This means that the area agency shall proactively carry out, under the leadership and direction of the state agency [Illinois Department on Aging], a wide range of functions related to advocacy, planning, coordination, inter-agency linkages, information sharing, brokering, monitoring and evaluation designed to lead to the development or enhancement of comprehensive and coordinated community based systems in or serving each community in the planning and service area. These systems shall be designed to assist older persons in leading independent, meaningful and dignified lives in their own homes and communities as long as possible. 45 C.F.R. § 1321.53(a).

2. History of OAA

Following is a history of the OAA and the changes made by year:

1965

The OAA is enacted and contains ten broad policy objectives aimed at improving the lives of older persons:

- a. an adequate income in retirement;
- b. the best possible physical and mental health;
- c. suitable housing;
- d. full restorative services for those who require institutional care;

- e. opportunity for employment;
- f. retirement in health, honor and dignity;
- g. participate in and contribute to meaningful activity;
- h. efficient community services;
- i. immediate benefit from proven research knowledge;
- j. freedom, independence and the free exercise of individual initiative;
- k. full participation in the planning and operation of community based services; and
- l. protection against abuse, neglect, and exploitation.

1972

The Nutrition Program for the Elderly Act authorized \$100 million for a national nutritional services program is added to the OAA.

1973

State Units on Aging (SUAs) were required to divide their states into planning and service areas (PSAs) and to designate AAAs to administer programs for the elderly in those PSAs. AAAs were assigned the chief responsibility for planning, coordinating, developing programs and pooling resources to assure the availability and provision of a comprehensive range of services in the PSA.

1978

The Commissioner on Aging was allowed to make direct grants to the Indian Tribes. Priority services were also mandated.

1978

Title III – Social Services, Title V – Multipurpose Senior Centers, and Title VII – Nutrition Services were consolidated into one Title III with separate allocations for Title III-B – Social Services, Title IIIC1 – Congregate Meals, and Title III-C2 – Home Delivered Meals.

1981

The Act was amended to streamline and improve the efficiency of programs, increase flexibility to meet local needs, and increase the participation of older persons in the operation of the programs intended to serve them.

1984

Funding was directed to national priority services (access, in-home, legal).

1987

Increased focus was placed on serving low-income minority older persons. Extensive outreach efforts were required to inform older persons in greatest need of their eligibility to receive benefits such as Supplemental Security Income (SSI), Medicaid, and Food Stamps. Title III-D was created to provide funds for in-home services. Ombudsman programs at the state level were strengthened and expanded.

1992

Definitions of caregiver, caretaker, case management, elder abuse, exploitation, frail, greatest social need, multi-purpose senior center, and representative payee are included. A requirement was added that states submit their intrastate funding formulas to the Commissioner for approval. Title III-F was added to provide disease prevention and health promotion services. Title III-G was deleted. A new Title VII was created regarding elder rights services incorporating ombudsman programs, programs for prevention of elder abuse, neglect and exploitation, state elder rights and legal assistance development program and outreach, counseling and assistance programs. Also included was a White House Conference on Aging.

2006

AAAs are required to provide assurances that funding gives priority to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement.

AAAs are required to implement, through service providers, evidence-based programs to assist older individuals and their family caregivers in learning about and making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals.

AAAs are required to conduct analyses for making recommendations for strategies to modify the local system of long term care.

2016

The OAA is up for reauthorization and modification by Congress.

Federal Advocacy

NIAAA regularly takes positions on federal issues by contacting our legislators and through membership in the National Association of Area Agencies on Aging (n4a). The overriding federal advocacy issue this year has been the reauthorization of the OAA and a federal budget.

Even though there has been partial restoration of sequestration cuts over the past three fiscal years for some OAA programs, the threat of sequestration still remains and some critical OAA programs—such as Title III B and the Ombudsman Programs—have seen no restoration from sequestration. As it stands now, it is expected that funding will be essentially level in 2017.

There has been, however, some recent support for increasing funding for OAA programs. Senator Bernie Sanders (I-VT), and 30 colleagues, joined to ask for a 12 percent increase for all OAA programs. Representatives Suzanne Bonamici (D-OR) and Patrick Murphy (D-FL) and 47 other members urged their appropriations peers to follow the President's recommended increases for OAA III B Supportive Services. There were also letters supporting increases for OAA III C Nutrition programs, Elder Justice and Long-Term Care Ombudsman programs, and the bipartisan, bicameral Congressional Assisting Caregivers Today (ACT) Caucus sent letters in the House and Senate supporting an increase for the National Family Caregiver Support and the Lifespan Respite programs.

State Advocacy

NIAAA regularly takes positions on state issues by contacting our legislators and by our participating in the legislative committee of the Illinois Association of Area Agencies on Aging (I4A). As with federal priorities, the main state advocacy issue this year has been getting a budget for both 2016 and 2017. This PID assumes that the 2016 and 2017 state budgets will be enacted.

3. Funding

Federal Funding

President's Budget: The President's budget, which adhered to the overall funding level agreed to in the Bipartisan Budget Act (BBA) of 2015, was released in early February and contains some important recommendations for modest increases for several OAA programs, including OAA III B Supportive Services. When it was released, Congressional leaders announced no hearings would be held on the President's budget so it is expected to have little impact.

Congressional Budgets: The traditional process in Congress is that a budget resolution is reached based on budgets prepared by Budget Committees in each chamber in March. With the BBA already setting the budget amounts there is no need for a budget resolution for 2017. There is, however, discussion about ignoring the BBA spending levels so the budget process is in flux in the House. In the Senate, action on a budget resolution has been postponed but there are plans to begin crafting spending bills in accordance with the BBA.

It is possible that both chambers could pass a resolution to send "reconciliation instructions" to the committees which means that Congress could repeat last year's attempts to make major policy changes including repealing the Affordable Care Act. The federal budget process, consequently, is unclear.

Summary of the Governor's FY2017 Budget
For the Illinois Department on Aging (February 18, 2015)

Budget Item Description	FY15 Actual Expenditure	FY16 Estimated Expend	FY17 Governors Proposed	Increase from 2016
Personal Services	5,199,669	6,170,851	6,500,000	329,149
Social Security	382,758	429,674	497,300	67,626
Contractual Services	1,409,370	1,707,000	1,707,000	-
Travel	45,954	195,600	195,600	-
Commodities	11,795	23,700	23,700	-
Printing	-	42,800	42,800	-
Equipment	3,200	14,400	14,400	-
Electronic Data Processing	39,829	304,000	304,000	-
Telecommunications	326,169	650,000	650,000	-
Operation Of Auto Equipment	6,781	8,000	8,000	-
Adult Protective Services and Elder Abuse and Neglect Prevention	16,217,251	20,400,000	22,400,000	2,000,000
Senior Employment Specialist Program	190,300	190,300	190,300	-
Grandparents Raising Grandchildren Program	297,845	300,000	300,000	-
Home Delivered Meals (Non-Formula and Formula)	11,623,200	14,005,200	17,650,000	3,644,800
Program Development and Training (Formerly Specialized Training Program)	18,109	20,000	475,000	455,000
Monitoring and Support Services	52,950	52,950	182,000	129,050
Illinois Council on Aging	11,685	26,000	26,000	-
Senior Helpline	1,242,868	1,500,000	2,690,000	1,190,000
Fiscal Programmatic Monitoring (formerly BEAM)	1,095,915	1,775,000	1,390,000	(385,000)
Administration of the Senior Meal Program	19,862	30,400	32,000	1,600
Retired Senior Volunteer Program	539,400	539,400	551,800	12,400

Planning and Service Grants to Area Agencies on Aging	7,548,300	7,722,000	7,722,000	-
Foster Grandparents Program	235,975	241,400	241,400	-
Area Agencies on Aging for Long-Term Care Systems Development	238,300	273,800	273,800	-
Community Based Services for Equal Distribution to Each of the 13 Area Agencies on Aging	734,300	751,200	1,751,200	1,000,000
Community Care Program - Services, Grants and Administrative Expenses	727,062,609	370,545,600	228,789,600	(141,756,000)
Community Care Program - Capitated Coordinated Care	28,335,299	40,000,000	49,000,000	9,000,000
Community Care Program - Case Management	52,798,420	59,390,800	64,500,000	5,109,200
Balancing Incentive Program (BIP)	2,399,282	5,074,700	5,074,700	-
Community Transition and System Rebalancing	20,916,497	32,496,400	32,496,400	-
Ombudsman Program	1,137,364	5,500,000	5,500,000	-
Administration of Senior Meal Program	139,967	118,000	120,300	2,300
Older Americans Training	94,403	86,600	100,000	13,400
Governmental Discretionary Projects	1,696,985	2,500,000	4,000,000	1,500,000
Ombudsman Training and Conference Planning	50,199	68,000	150,000	82,000
Administration of Title V Services	163,668	164,200	300,000	135,800
Child and Adult Food Care Program	101,274	110,000	200,000	90,000
Title V Employment Services	3,108,521	3,200,000	4,000,000	800,000
Title III Social Services	16,339,638	17,000,000	22,000,000	5,000,000
National Lunch Program	1,606,377	1,650,000	2,000,000	350,000
National Family Caregiver Support Program	5,645,766	5,700,000	7,000,000	1,300,000
Title VII Prevention of Elder Abuse, Neglect and Exploitation	204,865	205,000	500,000	295,000
Title VII Long-Term Care Ombudsman Services for Older Americans	684,029	700,000	1,000,000	300,000
Title III D Preventive Health	601,205	600,000	1,000,000	400,000
Nutrition Services Incentive Program	6,504,670	6,500,000	7,000,000	500,000
Title III C-1 Congregate Meals Program	13,747,524	14,000,000	18,000,000	4,000,000
Title III C-2 Home Delivered Meals Program	10,060,784	10,000,000	14,000,000	4,000,000

Community Care Program - Administration and Services Grants	84,522,820	446,000,000	221,000,000	(225,000,000)
Community Reinvestment Program	-	-	225,000,000	225,000,000
Long-Term Care Ombudsman Fund	1,745,264	1,200,000	2,600,000	1,400,000
Senior Health Assistance Programs	1,600,000	1,600,000	1,600,000	-
Private Partnership Projects	35,182	50,000	345,000	295,000
Personal Services	195,207	262,429	287,600	25,171
Retirement	82,687	129,600	128,200	(1,400)
Social Security	14,363	20,075	20,500	425
Group Insurance	43,556	45,000	69,000	24,000
Contractual Services	48,058	50,000	50,000	-
Travel	1,805	10,200	15,200	5,000
Commodities	-	5,000	6,500	1,500
Equipment	-	1,500	2,000	500
Electronic Data Processing	19,110	50,000	60,000	10,000
Telecommunications	-	60,000	60,000	-
Operation Of Auto Equipment	-	1,800	2,000	200
Senior Health Insurance Program Administration	2,114,557	1,430,000	2,200,000	770,000
Personal Services	544,607	576,075	790,100	214,025
Retirement	226,963	320,000	352,200	32,200
Social Security	40,370	44,070	60,400	16,330
Group Insurance	106,632	166,000	207,000	41,000
Contractual Services	2,302	31,000	36,000	5,000
Travel	<u>10,191</u>	<u>45,000</u>	<u>65,000</u>	<u>20,000</u>
Total	1,032,244,806	1,085,080,724	987,506,000	(97,574,724)

4. NIAAA Allocation Process

FY17 Funding and Designation Status

Grants awarded in the 2017 Area Plan are for a one-year and renewed dependent upon satisfactory performance by the grantee in meeting grant requirements.

Long Term Care Ombudsman Program Designation: Catholic Charities is the designated ombudsman for Area 01.

Adult Protective Services Designation: The NIAAA designates adult protective service agencies by location. The following are the designated agencies through June 30, 2019: DeKalb County (Elder Care Services of DeKalb); Carroll, Lee, Ogle and Whiteside Counties (Lifescape Community Services); Jo Daviess and Stephenson Counties (Stephenson Resource Center); and Boone and Winnebago Counties (VNA of Rockford). Adult protective service contracts are for a one-year period, with the option to extend a maximum of five additional one-year periods for a total of six years (July 1, 2013 through June 30, 2019). NIAAA will be requesting proposals from interested organizations in providing services on July 1, 2019.

FY17 Planning Process — NIAAA Priority Services by Funding Source

NIAAA collected, reviewed and analyzed a variety of information to identify the needs of older adults and caregivers in Area 01. Needs assessment information was collected primarily from a written survey that was disseminated to any interested parties. The NIAAA Board, NIAAA Advisory Council, and the NIAAA ADRC Advisory Council also provided input to the NIAAA Area Plan Amendment.

Service priorities for community based services (which are funded by Title III-B of the OAA and GRF from IDOA) funding are:

1. Community Based Services (Title III-B)

Funding is used to foster the development of a comprehensive and coordinated service system. IDOA mandates the following minimums for categories of service: access 33.1%, in-home 0.4%, and legal 3.2%. Given this, Title III-B funded services in FY17 are: Information and Assistance, Transportation, Respite, Legal, Gap Filling, and Ombudsman.

2. Home Delivered Meals (Title III-C2)

Funding is used to provide home delivered meals to persons aged 60 and over who are homebound by reason of illness, incapacitating disability, or are otherwise isolated. Illinois General Revenue Funds also support this service.

3. Congregate Meals (Title III-C1)

Funding is used to meet the nutritional and social needs of people 60 and over who do not eat adequately due to limitations of income, mobility, lack of food preparation skills and equipment, or lack of incentive to prepare and eat meals alone.

4. Health Promotion (Title III-D)

Funding is used to provide disease prevention and health promotion services and information at senior centers, congregate meal sites, through home delivered meal programs or at other appropriate sites. Priority in Title III-D funds must be given to areas which are medically underserved and in which there are a large number of older individuals who have the greatest economic need for services.

5. Caregiver Support (Title III-E)

Funding is used to provide assistance under the Caregiver Support Program. Services include information about and assistance in gaining access to available services, training/education/support, respite and gap filling services. The OAA requires no more than twenty percent of federal funding can be expended for gap filling service. Up to ten percent (federal and non-federal) can be allocated to grandparents raising grandchildren.

Older Adults Living in Area 01

Based on the 2014 census estimates, there are 150,520 persons 60 years or older living in Area 01. As demonstrated by the below table, NIAAA's older adult population in Area 01 has increased over 2% since 2013. This increase, however, is below the statewide average of 3.4% as indicated below:

Increase in Older Adults from 2013 to 2014 based on census estimates

County	2014 Over 60	2013	Increase	% Inc.
Boone	10,505	10,189	316	3.1%
Carroll	4,676	4,576	100	2.2%
DeKalb	16,702	16,132	570	3.5%
Jo Daviess	7,320	7,147	173	2.4%
Lee	8,415	8,264	151	1.8%
Ogle	12,249	12,006	243	2.0%
Stephenson	12,827	12,576	251	2.0%
Whiteside	14,723	14,490	233	1.6%
Winnebago	63,103	61,899	1,204	1.9%
Area 01 total	150,520	147,279	3,241	2.2%
State Total	2,552,902	2,469,688	83,214	3.4%
Area 01 % of total	5.9%	6.0%	3.9%	

The census data is important because it is how Area 01 is allocated both federal and state funding. Extra funding is also allocated for older adults contained in six categories known as "greatest social and economic need." The first of these categories is "rural" with Area 01 having six counties (Carroll, Jo Daviess, Lee, Ogle, Stephenson, Whiteside) classified as rural. In addition to rural category, the other five greatest need categories are:

- 1) 75 and older;
- 2) 85 and older;
- 3) minority;
- 4) living alone; and
- 5) living below the poverty level.

The change in population for the greatest need categories in Area 01 is as follows:

Area 01 Increase in people 75 and older

75 and older	2014	2013	Difference	% Diff.
County				
Boone	2,975	2,904	71	2.4%
Carroll	1,521	1,527	-6	-0.4%
DeKalb	5,153	5,094	59	1.2%
Jo Daviess	2,327	2,265	62	2.7%
Lee	2,771	2,745	26	0.9%
Ogle	4,014	3,895	119	3.1%
Stephenson	4,634	4,628	6	0.1%
Whiteside	5,067	5,014	53	1.1%
Winnebago	19,732	19,709	23	0.1%
Area 01 total	48,194	47,781	413	0.9%
State Total	786,338	779,182	7,156	0.9%
Area 01 % of total	6.1%	6.1%		

Area 01 increase in people 85 and older

85 and older	2014	2013	Increase	% Inc.
County				
Boone	804	798	6	0.8%
Carroll	510	510	0	0.0%
DeKalb	1,662	1,670	-8	-0.5%
Jo Daviess	689	678	11	1.6%
Lee	845	850	-5	-0.6%
Ogle	1,235	1,192	43	3.6%
Stephenson	1,565	1,571	-6	-0.4%
Whiteside	1,677	1,645	32	1.9%
Winnebago	6,516	6,493	23	0.4%
PSA TOTAL	15,503	15,407	96	0.6%
Statewide	253,366	250,530	2,836	1.1%
Area 01 % of total	6.1%	6.1%	3.4%	

Area 01 Increase in Minority Population

Minority	2014	2013	Difference	% Diff.
Boone	934	854	80	9.4%
Carroll	128	118	10	8.5%
DeKalb	1,031	938	93	9.9%
Jo Daviess	158	134	24	17.9%
Lee	449	440	9	2.0%
Ogle	522	479	43	9.0%
Stephenson	842	809	33	4.1%
Whiteside	1,071	1,001	70	7.0%
Winnebago	8,187	7,822	365	4.7%
PSA TOTAL	13,322	12,595	727	5.8%
Statewide total	638,399	590,754	47,645	8.1%
Area 01 % of total	2.1%	2.1%	1.5%	

Area 01 increase in older persons living alone

Living Alone	2013	2012	Difference	%
Boone	1,565	1,475	90	6.1%
Carroll	1,070	1,040	30	2.9%
DeKalb	3,990	4,050	-60	-1.5%
Jo Daviess	1,350	1,370	-20	-1.5%
Lee	1,910	2,020	-110	-5.4%
Ogle	3,060	2,815	245	8.7%
Stephenson	3,245	3,225	20	0.6%
Whiteside	3,465	3,470	-5	-0.1%
Winnebago	15,125	14,890	235	1.6%
PSA TOTAL	34,780	34,355	425	1.2%
Statewide	604,154	595,675	8,479	1.4%
Area 01 % of State	5.8%	5.8%	5.0%	

Area 01 Increase in older persons living in poverty

Poverty	2014	2013	Difference	%
Boone	819	602	217	36.0%
Carroll	249	228	21	9.2%
DeKalb	804	812	-8	-1.0%
Jo Daviess	386	400	-14	-3.5%
Lee	519	487	32	6.6%
Ogle	747	621	126	20.3%
Stephenson	962	880	82	9.3%
Whiteside	852	752	100	13.3%
Winnebago	4,933	4,871	62	1.3%
PSA TOTAL	10,271	9,653	618	6.4%
Statewide	207,813	198,282	9,531	4.8%
Area 01 % of State	4.9%	4.9%	6.5%	

As you can see from these tables, the only greatest need category that Area 01 has increased higher than the State average is in the number of older adults living in poverty.

NIAAA Allocation Process

NIAAA allocates funds for specific services and counties within the Area 01 through the following process:

- NIAAA’s Geographic Funding Formula provides the county based total dollar amounts for all funds (except Title III-B ombudsman and Title VII elder abuse prevention, which require different formulas).
- The OAA and IDOA regulations allocate dollars for specific Titles and identify services eligible for funding under each Title.
- Funds within the NIAAA Board's discretion are prioritized by the NIAAA Board for funding levels using NIAAA’s planning process.
- Funding received from IDOA for Title III-B and Title VII Ombudsman is determined by the number of licensed long term beds in Area 01 as contained in the "Illinois Department of Public Health List of Long Term Care Beds."

Application of these requirements establishes the dollar amounts available for allocation.

NIAAA Geographic Funding Formula for FY17

The OAA and accompanying GRF must be targeted to older persons in greatest economic and social need with particular emphasis on low-income minority seniors. The NIAAA Advisory Council recommended and the NIAAA Board of Directors approved continuation of the factors and weightings for NIAAA’s geographic funding formula. The 2014 Census information from the Administration on Community Living is used by the IDoA to allocate FY17 Area Plan Older Americans Act and General Revenue Funding to Illinois’ thirteen area agencies on aging. NIAAA also uses the geographic formula to determine the amount of Title III services (except Long Term Care Ombudsman Program and Title VII elder abuse prevention) allocated to each of the nine counties in Area 01.

The weight given to each targeted category for the geographical funding formula is as follows:

NIAAA Geographic Funding Formula Weight and Factors

- 41.0% weight to 60+ Population
- 25.0% weight to 60+ Population in Poverty
- 10.0% weight to 60+ Minority Population
- 7.5% weight to 75+ Population
- 7.5% weight to 60+ Living Alone
- 9.0% weight to Rural Population
- 100.0%

Using this data in the geographic formula, the percentages of funds available by county are:

County Funding Formula Percentages			
County	2000	2010	2017
Boone	4.5%	5.3%	6.4%
Carroll	3.8	3.3	3.1
DeKalb	8.1	8.5	8.9
Jo Daviess	5.0	5.1	4.8
Lee	6.9	6.3	6.0
Ogle	8.2	8.3	8.7
Stephenson	10.9	10.0	9.8
Whiteside	11.9	11.4	10.6
Winnebago	<u>40.7</u>	<u>41.8</u>	<u>41.7</u>
Total	100%	100%	100%

The NIAAA Board may vary the distribution of funds within 10% of the county/geographic formula allocation.

Inter-Title Transfer of III-C Funds / III-C Priorities

The NIAAA Board is allowed to transfer funds as follows:

- A maximum of 15% can be transferred annually between community based services (i.e. Title III-B) and meals (i.e. Title III-C) only. The NIAAA Board proposes no transfers for FY17.
- A maximum of 15% of available dollars can be transferred annually from congregate meals (Title III-C1) to home delivered meals (Title III-C2). NIAAA has requested and received a waiver to increase this amount to 40% since 2004. (The 40% transfer was approved on March 17, 2004 by the NIAAA Board.) In FY17, NIAAA will again be requesting to increase this transfer from 15% to 40% as the trend (which has been ongoing for decades) continues in that demand for congregate service is decreasing while demand for home delivered meal services is increasing. This is evidenced by the unmet needs for home delivered meals which is described in the below in the

next section titled "Home Delivered Meals Unmet Needs." Any interested party in Area 01 may testify in person or in writing regarding this waiver request to increase the transfer from congregate meals to home delivered meals to 40%.

- Money allocated for Title III-D, III-E, Long Term Care Ombudsman Program and Title VII cannot be transferred to other Titles.

5. Home Delivered Meals Unmet Needs

Home Delivered Meals Unmet Needs

Despite NIAAA exceeding the maximum amount transferable to home delivered meals (HDMS), unmet need still continues. This unmet need is expected to continue in FY17 as NIAAA is anticipating an increase in demand as the baby boomers continue to retire.

The following is a list of older persons denied home delivered meals in FY 15 due to a lack of funding and older persons currently on waiting lists:

Name of County	FY 2015 # of Older Persons Denied HDMS due to Lack of Funding	Current # of Older Persons on Waiting Lists
NICAA		
Carroll County	2	2
Jo Daviess County	10	10
Stephenson County	4	4
Whiteside County	3	3
Voluntary Action Center (VAC)		
Dekalb	25	64
Lifescape		
Winnebago	254	244
Boone	21	20
Ogle	19	20
Lee	19	20
Area 01 total	357	387

The following is a list of older persons needing home delivered meals by township and townships with unmet needs in FY15:

County	Unserved Townships/Communities/Neighborhoods	# of Older Persons Needing HDMs
Stephenson County	Buckeye, Erin, Jefferson, Kent, Loran, Oneco	38
Jo Daviess County	Barreman, Council hill, Derinda, Nora, Pleasant Valley, Rawlins, Rice, Rush, Thompson, Vinegar Hill, Wards Grov	29
Carroll County	Cherry Grove, Washington, Woodland	14
Whiteside County	Clyde, Garden Plain, Hahnaman, Hume, Jordan, Portland, Ustick	37
DeKalb	Afton Township	2
	Pierce Township	1
	Portion of Squaw Grove Township	2
	Portion of Franklin Township	1
	South Grove Township	1
	Mayfield Township	2
	Milan Township	1
	Paw Paw Township	1
Lee	Alto	4
	East Grove	3
	Hamilton	2
	Harmon	3
	Marlon	2
	May	3
	Melson	6
	Palmyra	24
	S Dixon	8
	Viola	2
	Willow Creek	4
Ogle	Eagle Point	3
	Lafayette	2
	Lincoln	4
	Taylor	13

	White Rock	5
Boone	Woosung	3
	Bonus	24
	Flora	33
Winnebago	Burritt	7
	Laonaa	16
	Shirland	7
Area 01 Total		<u>307</u>

Reasons for Unmet Need

A lack of funding is the main reason for the unmet need. This is exacerbated by variable fuel costs for providers and aging equipment/vehicles that require more maintenance. Delays in state payments have also strained the budgets of providers as vendors are starting to charge late fees. This increase in costs reduced the number of meals served. All of these contributed to the unmet need in Area 01.

Home Delivered Meal Providers have used various strategies to address shortages such as: delivering more meals at a time, using frozen meals, limiting service to one meal a day, and applying for more grants. The drawback to these strategies is that the participant loses the daily “welfare” check of having a delivery and some participants cannot accept frozen meals.

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6. Changes in Service Delivery System

While NIAAA is not planning any significant changes to the service delivery system, IDoA is planning on transferring 48,000 people on July 1, 2016 from the Community Care Program (CCP) to the Community Reinvestment Program (CRP). The CCP provides community based services allowing older and disabled adults to continue living in their homes. In providing minimal services (such as a home delivered meal or help doing house cleaning), the CCP saves the State from having to pay the exorbitant costs of premature institutionalization. The CRP will have a similar focus and purpose to the CCP.

The Illinois Department on Aging states the reason for creating the CRP is because "sustaining the CCP as it exists today will cost an additional \$93.9 million over the next six years." The clients being transferred to CRP are those who are not Medicaid eligible. IDoA is working on developing rules for the CRP which are expected sometime in April.

7. Funding Allocations

FY17 Proposed Allocation for Community Based Services By Service and County

Community based services (i.e. Title III-B) are used to develop a comprehensive and coordinated service system. As part of this system, NIAAA will be continuing funding in FY17 the following services: Information and Assistance (I & A), Transportation, Respite, Legal, Gap Filling, and Ombudsman (OMB). As part of I & A, NIAAA plans to continue to fund Options Counseling which was a new service added in FY 2014.

1. FY17 Allocation for Community Services and Health Promotion

The following is a table of FY17 allocation for community based services (Title III-B and GRF) and health promotion (Title III-D) funding by service by county:

FY17 Community Based Services and Health Promotion Allocations

COUNTY	I & A	Transport.	Respite	Legal	Gap Filling	Ombuds.	Health Promotion
BOONE	\$ 40,156	\$ 8,281	\$ 32	\$ 6,400	\$ 2,240	\$ 15,900	\$ 2,742
CARROLL	19,450	4,011	16	3,100	1,085	7,701	1,328
DEKALB	55,841	11,516	45	8,900	3,115	22,110	3,813
JO DAVIESS	30,117	6,211	24	4,800	1,680	11,925	2,056
LEE	37,646	7,764	30	6,000	2,100	14,906	2,571
OGLE	54,586	11,257	44	8,700	3,045	21,614	3,727
STEPHENSON	61,488	12,681	49	9,800	3,430	24,346	4,199
WHITESIDE	66,508	13,716	53	10,600	3,710	26,334	4,541
WINNEBAGO	261,638	53,959	207	41,700	14,595	103,596	17,865
Total	\$ 627,430	\$ 129,396	\$ 500	\$ 100,000	\$ 35,000	\$ 248,432	\$ 42,842
2016 Total	578,960	129,396	500	100,000	35,000	150,782	39,953
Increase	48,470	-	-	-	-	97,650	2,889
Increase %	8.4%					64.8%	7.2%

Note that the 2016 totals are what was budgeted if there is a 2016 appropriation
A 10% variance in distribution may be considered by the NIAAA Board of Directors.

FY17 Projected People and Units

The following are the projected people and units for FY 17 for community services (Title III-B), meals (Title III-C1, C2, and GRF), and health promotion (Title III-D). A unit is generally one hour of service or, in the case of meals, one meal delivered.

FY 17 Projected People and Units

Service	Actual 2015		Projected 2017	
	People	Units	People	Units
Info. & Assistance	17,210	94,792	17,000	85,000
Transportation	1,300	35,968	1,000	20,000
Legal Services	440	1,750	500	1,800
GAP Filing	89	89	-	-
Congregate Meals	7,302	149,099	5,000	100,000
Home Delivered Meals	2,259	407,593	1,800	350,000
Ombudsman	N/A	N/A	N/A	N/A
Health Promotion	<u>1,140</u>	<u>1,983</u>	<u>800</u>	<u>1,000</u>
Total	29,740	691,274	26,100	557,800

FY17 Proposed Allocation for Elder Abuse Prevention Funding

IDoA has designated four adult protective services prevention agencies (APSPAs) which are: Elder Care Services (for DeKalb County); Lifescape Community Services (Carroll, Lee, Ogle, Whiteside); Senior Resources (Jo Daviess, Stephenson); and VNA (Boone, Winnebago). The APSPAs conduct investigations into reports of abuse against older and disabled adults. APSPAs report their investigations directly to IDoA and are paid accordingly by IDoA for these activities. NIAAA does not fund the APSPAs to conduct investigations or case management.

NIAAA does, however, fund the APSPAs to perform other APS activities as described below. The expected amount available for these activities in FY17 is \$16,179 which is a little less than FY16.

Specifically, NIAAA funds the APSPAs for the following:

- Multi-Disciplinary Teams (M-Teams) at the rate of \$250 per meeting. Each APSPA will receive a minimum of \$3,000 for holding 8 required M-Team meetings per fiscal year. APSPAs will receive up to an additional \$250 per meeting for each additional M-Team meeting (maximum of 4) held during the fiscal year;
- Expenses for training including the annual Adult Protective Services Conference. The APSPAs have \$2,482 available for reimbursement for training expenses (\$1,682 allocated to the four APSPAs and \$800 to the long-term care ombudsman program);
- APS presentations at \$50 per event; and
- Public education and training materials which includes: training videos; curriculums; and other materials for use in public education/training such as bookmarks, business cards, magnets, etc.

No Title VII Elder Abuse funds are used for NIAAA's administrative costs as all funding will be used for APS advocacy activities as outlined above.

<p>FY17 Proposed Allocation for Congregate and Home Delivered Meals By Service Area</p>
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Following is a table of the anticipated funding for meals by county service area:

2017 Meals by County Service Area	FORMULA %	Congregate III-C1	Federal HDM III-C2	HDM State	HDM TOTAL	Total HDM and Congregate
BOONE, LEE, OGLE, WINN CARROL, JO DAVIESS	62.8%	\$ 317,470	\$ 537,153	\$ 686,113	\$1,223,266	1,540,736
STEPHENSON, WHITESIDE	28.3%	143,064	242,061	309,187	551,248	694,312
DEKALB	8.9%	44,992	76,125	97,236	173,361	218,353
TOTAL		\$ 505,526	\$ 855,339	\$ 1,092,536	\$1,947,875	2,453,401

These figures reflect a 40% transfer from Title III-C-1 to Title III-C-2. A 10% variance in distribution may be considered by the NIAAA Board of Directors.

In addition to the above meal funding, NIAAA also receives additional federal funding from the Nutrition Services Incentive Program (NSIP). NSIP funding is based on the: 1) FY17 federal appropriation; 2) number of meals provided nationwide in FY16; and 3) number of meals provided throughout Illinois in FY16. The NSIP projected allocation will, consequently, be revised when the actual FY16 meal count is calculated and the FY17 appropriation is made by Congress. Given this, the following is the estimated NSIP meal allocation for FY17:

FY 17 NSIP Allocation

SERVICE AREAS	%	FY 16 Alloc	FY16 III-C1	FY16 III-C2	Total C1+C2
BOONE, LEE, OGLE, WINN CARROL, JO DAVIESS	53.33%	214,295	60,003	154,292	214,295
STEPHENSON, WHITESIDE	32.15%	129,187	36,172	93,015	129,187
DEKALB	14.52%	58,345	16,337	42,008	58,345
TOTAL	100.00%	401,827	112,512	289,315	401,827

FY17 Proposed Allocation for Caregivers and Grandparents by Service and County

Caregiver funding (Title III-E) provides assistance to caregiver clients. Services include information about and assistance in gaining access to available services (I&A), training/education/support (TES), respite and gap filling services. The OAA requires no more than twenty percent of federal funding can be expended for gap filling service and up to ten percent (federal and non-federal) can be allocated to grandparents raising grandchildren. Given this, the following is the FY17 allocation:

FY17 Caregiver Allocation by County

COUNTY	I & A	Grandparent I & A	GAP	Respite	T/E/S	Total
BOONE	\$ 13,023	\$ 1,280	\$ 2,075	\$ 4,992	\$ 1,600	\$ 22,970
CARROLL	6,308	620	1,005	2,418	775	11,126
DEKALB	18,110	1,780	2,885	6,942	2,225	31,942
JO DAVIESS	9,767	960	1,556	3,744	1,200	17,227
LEE	12,209	1,200	1,945	4,680	1,500	21,534
OGLE	17,703	1,740	2,821	6,786	2,175	31,225
STEPHENSON	19,942	1,960	3,177	7,644	2,450	35,173
WHITESIDE	21,570	2,120	3,437	8,268	2,650	38,045
WINNEBAGO	84,856	8,340	13,520	32,526	10,425	149,667
Total	\$ 203,488	\$ 20,000	\$ 32,421	\$ 78,000	\$ 25,000	\$ 358,909

Based on the above caregiver allocation, the following are the projections for people and units:

FY17 Caregiver - People and Unit Projections

<u>Service</u>	FY 2014 Actual		FY17 Projected	
	<u>People</u>	<u>Units</u>	<u>People</u>	<u>Units</u>
Caregiver I&A	2,458	5,279	2,500	6,000
Grandparent I&A	143	727	150	900
Caregiver Gap filling	72	72	75	75
Caregiver Respite	54	3,339	60	4,000
TES	<u>152</u>	<u>628</u>	<u>175</u>	<u>650</u>
Total	2,912	13,476	2,960	12,550

The above projections are for unduplicated clients by service.

8. Funding Changes

FY17 Funding Increases, Decreases And Carryover Funds

NIAAA will comply with the intent of Congress, the Illinois General Assembly or administrative directives (from the ACL or IDoA) in the event of funding increases, decreases and carryover funds.

Carryover Dollars

Carryover funds will be used as follows:

- Carryover from specified Titles will remain with those Titles for reprogramming according to ACL and IDoA policies.
- Any carryover will be reprogrammed and made available for one-time expenditures, including gap-filling and respite services.

Funding Increases

Should the amount of federal or state General Revenue Funds increase at any time during the FY17 funding cycle:

- All increases will go to the specified Title;
- For Title III-C1, all increases will go to the specified Title within the NIAAA Board's 40% transfer policy from C-1 to C-2. If, for example, General Revenue Funds for Home Delivered Meals are increased by the General Assembly, NIAAA will allocate the additional funds for nutrition services;
- The increased funds will be distributed according to the service priority distribution, the geographic funding formula and any other pertinent data;
- If additional GRF for ombudsman services is received, it will be allocated to the designated ombudsman provider and utilized consistent with legislative intent.

Funding Decreases

Should the amount of federal or state General Revenue Funds decrease at any time during the FY17 funding cycle:

- Decreases will come from the corresponding Title (within the transfer policy from C-1 to C-2).
- Under Title III-B/GRF and Title III-C1 and III-C2/GRF, decreases will be determined through the application of the service priority distribution and the geographic funding formula.

Funding Increases and Decreases for NIAAA Administration and Direct Services

To the extent possible, funding increases/decreases will allocated to the counties by formula by Title.

Information on Funding Possibilities

NIAAA receives most of its funding under the federal OAA and Illinois GRF but it is always seeking other sources of funding. NIAAA recently applied for funding from several foundations for the Chronic Disease Self Management Program and legal services grant. Other possible funding sources for NIAAA include:

- National nonprofits such as the National Council on Aging;
- Local nonprofits such as the United Way;

- Other State units such the Illinois Department of Public Health;
- Special project grants from the Administration on Aging;
- Community Development Block Grants from local government such as Winnebago County;
and
- Community foundations (both local and national) such as the Northern Illinois Community Foundation.

NIAAA plans to explore these as well as other funding for sources.

9. NIAAA Expenses and Direct Services

NIAAA Administrative Expenses

During FY17, NIAAA is proposing to provide services for its administration function. NIAAA is limited by federal law to receiving 10% of total Title III and Title VII funding. Given this, NIAAA projects the amount available for its administration expenses to be as follows:

Administrative - (OAA \$271,986) (GRF \$ 90,662)	\$362,648	Activities including reporting, bidding, contracting, reimbursing, accounting, monitoring, quality assurance, area plan development and analysis.
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This amount is \$3,529 (or .9%) more than was budgeted in FY 2016. Funds will be expended for administration before costs are incurred for administratively related direct services.

NIAAA Administratively Related Expenses (ARE)

In addition to the 10% administration amount above, NIAAA has discretion to retain extra funding for three activities under what is known as 'Administratively Related Expenses' (ARE). The three activities under ARE are: 1) coordination; 2) program development and 3) advocacy. NIAAA proposes retaining the following amounts for these ARE activities:

<u>Activity</u>	<u>Amount</u>	<u>Purpose</u>
1. <i>Coordination</i>	\$ 60,000	Developing a comprehensive and integrated service delivery system through the creation of working relationships with funding agencies and service providers.
2. <i>Project Development</i>	\$ 90,000	Creating new services or improving services.
3. <i>Advocacy</i>	\$ 30,000	Representing, supporting, or helping seniors get needed services, inducing change in stereotypes, or influencing legislation and policies which impact the lives of seniors.
Total ARE	\$180,000	

The amount NIAAA is retaining for ARE in FY17 is the same as the past five years. Should AAA FY16 carryover become available FY17, it will be reprogrammed at the AAA level to the extent allowable by IDOA.

Information & Assistance Services Provided Directly By NIAAA

NIAAA proposes to continue to provide area-wide information and assistance (I&A) services during FY17 through its Aging Disability Resource Center (ADRC) by using \$100,000 from Title III-B/GRF funding. This is a \$75,000 (or 43%) decrease from FY13. NIAAA, consequently, has eliminated four direct services positions in the past several years.

Justification for NIAAA Providing I&A

The ADRC began in 2005 and provides a unique service otherwise not available in Area 01 as the IDOA statewide initiative in the FY17-18 Area Plan is to expand ADRCs statewide through what is now being called the No Wrong Door (NWD) System. The ADRC will play an integral role in this transition by using its experience as a pilot ADRC project to help develop the NWD in Area 01. The ADRC will also continue administering a grant started in FY14 in Area 01 for organizations providing options counseling which is a key component of an ADRC and the NWD.

In addition to the ADRC, NIAAA has a long history of providing I&A as it has been doing so since 1974. NIAAA has been, and will continue to be, the back-up provider for all funded I&A in Area 01 as we will serve all clients of Area 01 regardless of where they live. Further, the ADRC is strategically located in Winnebago County which has nearly half the seniors in Area 01. NIAAA providing I&A, therefore, is both necessary and sufficient to meet the needs in Area 01. Given our distinctive history and experience as an ADRC, NIAAA is again requesting a waiver to provide I&A.

Caregiver Access Services Provided Directly By NIAAA

NIAAA is also proposing to continue to provide Title III-E caregiver access at a cost of \$20,000 in FY17 which is a \$17,000 decrease (or 43%) from FY13. As with the decrease in NIAAA's I&A clients, a similar reduction has occurred for the number of caregiver clients served by NIAAA.

Justification for Caregiver direct service

NIAAA has provided area wide caregiver assistance since FY01 and is the only regional caregiver assistance provider in northwestern Illinois. NIAAA also serves as the back-up provider for Area 01 funded caregiver assistance. NIAAA will be doing additional outreach to increase the clients served and will evaluate in FY17 if the caregiver direct service waiver is justified going forward.

NIAAA's past Request for Proposal for caregiver I&A service yielded only county-based or two county providers of caregiver assistance service. NIAAA providing caregiver access services, therefore, is both necessary and sufficient to meet the needs in Area 01.

NIAAA FY17 Projected People and Units for Direct Services for I&A and Caregiver
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As stated above, NIAAA has a long history with providing both I&A and caregiver access services in Area 01. The following is a summary of recent direct service activity along with FY17 projections.

**NIAAA Direct Service History
FY06-17**

Fiscal Year	I&A People	I&A Units	Title III-E People	Title III-E Units
FY06	9,624	18,972	1,005	1,181
FY07	7,591	17,575	1,077	1,307
FY08	6,598	8,126	870	1,139
FY09	6,431	11,603	449	560
FY10	7,067	11,964	452	563
FY11	5,681	12,103	489	793
FY 12	3,266	8,624	435	702
FY13	2,103	3,668	672	898
FY14	1,223	2,705	670	904
FY 15	1,666	2,918	669	899
FY 16 projected*	1,126	1,715	341	438
FY 17 projected	1,500	2,700	600	900
* = based on clients served through March 2016				

OTHER NIAAA ACTIVITIES

NIAAA administers the following additional programs:

- The Chronic Disease Self-Management Program which is an evidenced based program designed to help clients with chronic diseases manage their illness;
- The Senior Community Service Employment Program which is an employment training program for clients 55 and older;
- The Senior Health Assistance Program which provides counseling to clients about health benefits;
- The Senior Medicare Patrol which trains Medicare beneficiaries how to prevent fraud;
- The State Health Insurance Program which helps clients with health insurance issues;
- Dental Health Program which helps clients receive dental services;
- The Aging & Disability Resource Center Options Counseling program where NIAAA is assisting 11 grantees in implementing options counseling standards; and
- Assisting clients and working the Managed Care Organizations as they begin the process of privatizing Medicaid in Area 01.

Proposed FY17 Allocations by County

PROPOSED FY2017 ALLOCATIONS BY COUNTY										
TITLE	Bonne	Carroll	DeKalb	Jo Dav.	Lee	Ogle	Steph.	White.	Winn.	Total
IIIB/GRF SUPPORTIVE SER	59,114	28,633	82,205	44,335	55,419	80,358	90,518	97,907	385,162	923,651
IIIB/GRF/VII OMBUDSMAN	15,900	7,701	22,110	11,925	14,906	21,614	24,346	26,334	103,596	248,432
IIIC-1 CONGREGATE MEALS	32,354	15,671	44,992	24,265	30,332	43,981	49,541	53,586	210,803	505,525
IIIC-2/GRF HOME DEL MEALS	124,664	60,384	173,361	93,498	116,872	169,465	190,892	206,475	812,264	1,947,875
IIID HEALTH PROMOTION	2,742	1,328	3,813	2,056	2,571	3,727	4,199	4,541	17,865	42,842
IIIE CAREGIVER SUPPORT	22,970	11,126	31,942	17,227	21,534	31,225	35,173	38,045	149,667	358,909
TOTAL ALL TITLES	257,744	124,843	358,423	193,306	241,634	350,370	394,669	426,888	1,679,357	4,027,234
VII ELDER ABUSE			PER ELDER ABUSE AGENCY - FOR M-TEAM SUPPORT							12,000
III-C NSIP										401,827
TOTAL										4,441,061
2016 Budget by County										
IIIB/GRF SUPPORTIVE SER	54,495	28,633	83,129	45,259	56,343	76,663	90,518	96,983	391,628	923,651
IIIB/GRF/VII OMBUDSMAN	14,657	7,701	22,359	12,173	15,154	20,620	24,346	26,085	105,335	248,430
IIIC-1 CONGREGATE MEALS	29,826	15,671	45,497	24,771	30,837	41,959	49,541	53,080	214,343	505,525
IIIC-2/GRF HOME DEL MEALS	114,925	60,382	175,309	95,446	118,820	161,674	190,892	204,527	825,899	1,947,874
IIID HEALTH PROMOTION	2,528	1,328	3,856	2,099	2,613	3,556	4,199	4,498	18,165	42,842
IIIE CAREGIVER SUPPORT	21,176	11,127	32,302	17,587	21,893	29,789	35,173	37,685	152,177	358,909
TOTAL ALL TITLES	237,607	124,842	362,452	197,335	245,660	334,261	394,669	422,858	1,707,547	4,027,231
VII ELDER ABUSE			PER ELDER ABUSE AGENCY - FOR M-TEAM SUPPORT							12,000
III-C NSIP										399,506
TOTAL										4,438,737
Increase from 2016 to 2017	20,137	1	(4,029)	(4,029)	(4,026)	16,109	-	4,030	(28,190)	3