



MINNESOTA RIVER
Area Agency on Aging®

TITLE III PROVIDER HANDBOOK

Title III-B Supportive Services

Title III-D Disease Prevention and Health Promotion Services

Title III-E National Family Caregiver Support Program

TABLE OF CONTENTS

Foreword.....	3
I. Overview of Older Americans Act Funding	4
A. Purpose	4
B. Eligible Persons and Target Populations	4
C. Funding Priorities	6
D. Application and Award Process	6
E. Award Period.....	7
F. Matching Requirements	7
G. Maintenance of Effort	7
H. Announcement of Funds Available	7
I. Title III Service Definitions/Units of Service	7
II. Administrative Responsibilities.....	8
A. Assurances and Certifications.....	8
B. Civil Rights Requirements and Program Accessibility	8
C. Public Information.....	11
D. Publications	11
E. Applicable Laws and Regulations	11
F. Licensure Requirements	11
G. Program Income: Cost Sharing, Voluntary Contributions and Other Payer Sources	11
H. Disaster Assistance.....	14
III. Financial Management.....	14
A. General Financial Management	14
B. Basic Accounting and Fiscal Procedures.....	15
C. Internal Control and Safeguards	16
D. Record Keeping.....	16
E. Property Management.....	17
F. Procurement.....	17
G. Allowable Costs/Project Income.....	17
H. In-kind Costs	18
IV. Reporting Requirements	18
V. Project Revisions: Budget and Program	20
VI. Supplemental Awards	20
VII. Project Monitoring and Assessment.....	21
A. Project Monitoring	21
B. Self-Assessment	21
C. Annual Assessment.....	22
D. Financial and Program Compliance Review	22
E. Close-Out Assessment.....	22
VIII. Audit/Financial and Program Compliance Review	23
IX. Final Project Close-Out	24
X. Project Award Suspension or Termination.....	24
A. Suspension.....	25
B. Termination	25
XI. Appeal Procedures.....	26
XII. Applicable Laws and Supporting Documents	26

Appendix A – Title III Service Definitions

FOREWARD

The purpose of this handbook is to provide all current and potential Older Americans Act Title III-B, D and E providers with information related to operating as an Older Americans Act grantee/contractor. The handbook combines relevant sections of the Older Americans Act, federal circulars, Minnesota Board on Aging's AAA Operations Manual, policy guidance documents, information memorandums and Minnesota River Area Agency on Aging (MNRAAA) policies in existence as of June 2019.

While the handbook is comprehensive, grantees/contractors should not consider this handbook to be all-inclusive of current regulations and policies governing Older Americans Act programs and federal grant/contract awards. References to principal laws and supporting documents are included in the final Section of this handbook. For additional information and more detailed guidance grantees/contractors should reference these documents and their amendments and successors thereto.

Comments or questions should be directed to:

Rhonda Hiller Fjeldberg, LSW, Grant and Contract Manager
201 North Broad Street, Suite 102
Mankato, MN 56001
507.387.1256, ext. 105 or rfjeldberg@mnraaa.org

I. OVERVIEW OF OLDER AMERICANS ACT FUNDING

A. PURPOSE

In 1965, President Lyndon Johnson signed into law the Older Americans Act (OAA) in response to the growing number of older persons in the United States. The OAA provided objectives for maintaining the dignity and welfare of older persons and created the means for organizing, coordinating and providing community-based services and opportunities for older Americans and their caregivers. The OAA directs each state to develop a comprehensive and coordinated network of providers who can offer services, opportunities, and protections for older Americans to help them maintain health, independence and the lifestyle of their choice.

Title III of the OAA authorizes funding to State Units on Aging (SUA) which designate and make funds available to Area Agencies on Aging (AAA) in their states. The SUA in Minnesota is the Minnesota Board on Aging (MBA). AAAs identify local needs and fund local services to support older persons and caregivers in their service area. OAA funds are to be used to expand the range of community-based programs and services designed to maintain the independence of older persons in a home environment, to support caregivers, to fill gaps in existing services and to contribute to the development of a comprehensive and coordinated system of services.

The Minnesota River Area Agency on Aging (MNRAAA) has been designated by the MBA to administer OAA funds in twenty-seven counties of southwest Minnesota including Big Stone, Blue Earth, Brown, Chippewa, Cottonwood, Faribault, Jackson, Kandiyohi, Lac qui Parle, Le Sueur, Lincoln, Lyon, Martin, McLeod, Meeker, Murray, Nicollet, Nobles, Pipestone, Redwood, Renville, Rock, Sibley, Swift, Waseca, Watonwan and Yellow Medicine. MNRAAA awards funds under several Parts of Title III of the OAA including:

- Part B - Supportive Services – designed to develop or expand a broad range of services such as Chore, Homemaker, Transportation and Legal Assistance.
- Part C - Nutrition Services – designed to reduce hunger and food insecurity and to promote health and well-being through services such as Congregate and Home Delivered Meals.
- Part D - Disease Prevention and Health Promotion Services – designed to develop or expand evidence-based programs and services that further disease prevention and health promotion such as A Matter of Balance, Self-Management Programs, Tai Ji Quan and Staying Active and Independent for Life.
- Part E - National Family Caregiver Support Program – designed to build an integrated caregiver service system that supports and empowers family and informal caregivers, provides diverse and flexible service options to address caregivers' individual needs and preferences, reduces caregiver burden, and extends the time care can be provided at home through services such as Counseling and Respite.

Information about fundable services, including definitions, and MNRAAA's priority services can be found in other sections of this handbook and in current Requests for Grant Applications/Contract Proposals. Additional information about MNRAAA is available at www.mnraaa.org.

B. ELIGIBLE PERSONS AND TARGET POPULATIONS

Eligibility for Title III services is controlled by federal and state laws and regulations including, but not limited to, those found in the OAA, MBA and MNRAAA policies, etc.

Title III-B Supportive Services and Title III-D Disease Prevention and Health Promotion Services

In general, persons 60 years of age or older are eligible for OAA Title III-B and Title III-D services. However, the Older American's Act requires Title III-funded providers to target services to older individuals with greatest economic and social need and older individuals at risk for institutional placement. Targeting means placing priority for provision of Title III-funded services on specific target populations identified by the OAA and defined as follows:

1. Individuals residing in rural areas
 - a) "Rural" for this purpose means any area that is not defined as urban. Urban areas comprise (1) urbanized areas (a central place and its adjacent densely settled territories with a combined minimum population of 50,000) and (2) incorporated places or census designated places with 20,000 or more inhabitants.
2. Individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas)
 - a) "Greatest economic need" means the need resulting from an income level at or below the federal poverty level;
3. Individuals with greatest social need (with particular attention to low-income minority individuals and individuals residing in rural areas)
 - a) "Greatest social need" means the need caused by non-economic factors, which include:
 - (1) Physical and mental disabilities
 - (2) Language barriers, and
 - (3) Cultural, social, or geographical isolation, including isolation caused by racial or ethnic status, that
 - (a) Restricts the ability for an individual to perform normal daily tasks
 - (b) Threatens the capacity of the individual to live independently;
4. Individuals at risk for institutional placement
 - a) "At risk for institutional placement" means having a limitation in at least two of the Activities of Daily Living;
5. Individuals with severe disabilities;
6. Individuals with limited English proficiency;
7. Individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction.

In addition, the following targeting criteria should be used to reach older adults with the greatest need for Chore, Homemaker and Assisted Transportation services:

- For Chore, target services to individuals who have difficulty with heavy housework, yard work or sidewalk maintenance.
- For Homemaker, target services to individuals who have difficulty with one or more Instrumental Activities of Daily Living (IADLs), such as preparing meals, shopping for food or other personal items, managing money, using the telephone or light housekeeping.
- For Assisted Transportation, target individuals who have difficulty (physical or cognitive) with using private or public transportation.

Title III-E Caregiver Support Services

An eligible caregiver is:

1. An adult (18+) family member or another individual, i.e. friend or neighbor, who is an informal provider of in-home and community care to:
 - an individual age 50 or older; or
 - an individual, regardless of age, with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.
2. An older relative caregiver (55+) (parent, grandparent, or other relative by blood, marriage or adoption) who lives with and is the primary caregiver for:
 - an individual with a disability*, age 19-59; or
 - a child under the age of 18 (cannot be the parent). *NOTE: Although caregivers for a child under the age of 18 are eligible for services under the OAA, MNRAAA is not currently funding services to this population.*

*The term "individual with a disability" is defined in section 3 of the Americans with Disabilities act of 1990 (42 U.S.C. 12102).

Special emphasis must be placed on specific target populations as previously defined.

C. FUNDING PRIORITIES

The OAA allows for funding of a broad range of services but provides a limited amount of funds. In order to make the best possible use of the limited resources available, MNRAAA establishes and periodically reviews local funding priorities. These priorities help to ensure Title III funds are awarded to projects which address the greatest service needs of older persons and their caregivers in southwest Minnesota.

Funding priorities, when applicable, are identified in MNRAAA's current Requests for Grant Applications/Contract Proposals.

D. APPLICATION AND AWARD PROCESS

1. INITIAL GRANT/CONTRACT AWARD PROCESS

MNRAAA awards Title III funds through a competitive process. Grants/contracts are awarded to public or private non-profit agencies, units of government and for-profit organizations that demonstrate the ability to perform successfully under the terms and conditions set forth in the current Requests for Grant Applications/Contract Proposals. (For-profit organizations can only receive Title III funds after dispensation of a waiver from MBA.)

Applicants/proposers must apply for Title III awards in the format and by the deadline specified by MNRAAA. Applications/proposals found to be incomplete and/or inaccurate may be disqualified from further consideration.

MNRAAA's Grant and Contract Manager (G/C Manager) will undertake a systematic review of the form and content of the applications/proposals. Each application/proposal will be reviewed for mathematical accuracy, programmatic content, its relationship to MNRAAA's Area Plan and conformity to other criteria specified in the Request for Grant Applications/Contract Proposals.

All applications/proposals will be reviewed by the Planning Committee of the MNRAAA board. Applicants/proposers may be required to attend a committee meeting to present their proposed project and respond to questions. Based on the application/proposal review and the applicant/proposer presentation, the Planning Committee will evaluate the applications/proposals, develop funding

recommendations for each application/proposal and submit the recommendations to the MNRAAA board.

The MNRAAA board will review the committee recommendations at a regularly scheduled or special meeting. The board will make funding awards based on review of the committee recommendations and consideration of applications/proposals that are in the overall best interest of MNRAAA, the twenty-seven county service area and the persons proposed to be served. MNRAAA's G/C Manager will notify applicants/ proposers in writing of the action taken by the MNRAAA board and of their right to appeal. MNRAAA reserves the right to reject any or all applications/proposals.

2. GRANT/CONTRACT RENEWAL PROCESS

Title III grants/contracts are approved for funding annually for one year and are subject to renewal for up to four additional years. Approval of grant/contract renewal years are not guaranteed but will be based on performance, availability of funds, emerging needs/gaps in service, federal, state and local priorities, etc.

Title III providers will be notified of the process, forms and timeline for submission of renewal applications/proposals. Review and evaluation of renewal applications/proposals will follow the same process as outlined above.

E. AWARD PERIOD

OAA funds are typically awarded for a period of one year beginning January 1 and ending December 31. However, other start and end dates may be designated as funding becomes available.

F. MATCHING REQUIREMENTS

Title III- B and E grantees/contractors must match federal dollars with local funds as outlined below:

- Title III-B – 85% federal/15% local (cash and/or in-kind)
- Title III-E – 75% federal/25% local (cash and/or in-kind)

Title III-D grantees/contractors have no match requirement.

G. MAINTENANCE OF EFFORT

The OAA places a "maintenance of effort" requirement on some, *but not all*, parts of Title III funding. Maintenance of effort means that Title III funds may NOT be used to supplant or replace other sources of funding. Any existing services funded with non-Title III funds, and their existing clients, must be maintained through sources of funding other than Title III. Contact MNRAAA's G/C Manager for addition information and guidance regarding maintenance of effort.

H. ANNOUNCEMENT OF FUNDS AVAILABLE

Announcement of the availability of Title III funds through MNRAAA is made prior to each award period using a variety of print, electronic and other methods to reach existing providers and potential applicants/proposers.

I. TITLE III SERVICE DEFINITIONS/UNITS OF SERVICE

The OAA provides an extensive list of services for older persons and caregivers that can be funded as part of a comprehensive and coordinated service delivery system. MBA defines all allowable Title III services and assigns a unit of service for each. All services

funded under Title III must meet the service definitions and use the units of service prescribed by MBA. The use of standard service definitions and units of service provides a common framework for Title III funded services. MBA's current Title III service definitions and units of service are provided in Appendix A. (Note: Not all services listed in Appendix A are funded by MNRAAA. Contact MNRAAA's G/C Manager for a current list of services being funded.)

II. ADMINISTRATIVE RESPONSIBILITIES

A. ASSURANCES AND CERTIFICATIONS

All projects funded under Title III of the OAA must be administered in compliance with Assurances of Compliance and Certifications Required by Federal Law. The person signing the Assurances of Compliance and Certifications document acknowledges and agrees that: (1) he/she is the authorized representative of the applicant/proposer agency; (2) the signature of the authorized official constitutes an acknowledgement that the applicant/proposer agency has received and reviewed each of the following assurances and certifications:

- General Assurances Agreement Between Applicant/Proposer Agency and MNRAAA Upon Submission of Application/Proposal
- Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, as Amended
- Assurance of Compliance with Civil Rights
- Assurances – Non-Construction Programs
- Certification Regarding Lobbying for Contracts, Grants, Loans, and Cooperative Agreements
- Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions
- U.S. Department of Health and Human Services Certification Regarding Drug-Free Workplace Requirements – Grantees Other Than Individuals;

(3) the authorized official's signature constitutes a signature on each of the above listed assurances and certifications; and (4) the authorized official certifies that all information in the document and the application/proposal is complete and correct to the best of his/her knowledge. A copy of the Assurances of Compliance and Certifications Required by Federal Law can be referenced in MNRAAA's current Requests for Grant Applications/Contract Proposals.

B. CIVIL RIGHTS REQUIREMENTS AND PROGRAM ACCESSIBILITY

All projects funded under Title III of the OAA, must be administered in compliance with Title VI of the Civil Rights Act of 1964 (governing regulations contained in 45 CFR 80), Section 504 of the Rehabilitation Act of 1973 (governing regulations contained in 45 CFR 84), Older Americans Act of 1965, Minnesota Human Rights Act of 1989, and the Americans with Disabilities Act of 1990, and their amendments and successors thereto.

Initially, Title III grant applicants/contract proposers indicate their compliance by signing the Assurances of Compliance & Certifications Required by Federal Law. After receiving federal funds, Title III providers must periodically review their policies and practices to determine whether discriminatory practices are occurring, and take corrective action when necessary, to assure compliance with the above statutes and regulations. Grantees/contractors must also ensure that all programs and subcontracts administered by the project are in compliance. In addition, MNRAAA has responsibility for ensuring that Title III providers are in compliance. MNRAAA will carry out this responsibility by

requiring grantees/contractors to collect data and by conducting project assessments to discuss and ensure compliance.

1. All projects receiving federal funds must make services available to all eligible (age 60+ and/or their caregivers) persons without regard to race, color, creed, religion, national origin, disability, or gender. All projects must include a non-discrimination notice, which includes all of the above protected categories on all written communications to the public, including brochures, bulletins, and posters. The following phrase is an example of a non-discrimination notice: **“Project services are available to all eligible persons without regard to race, color, creed, religion, national origin, gender, disability, use of public assistance or sexual orientation.”** All projects must have on hand a written Non-Discrimination Policy (sample follows) and display in a conspicuous location at all service sites a poster, provided by MNRAAA, explaining the Civil Rights Complaint Procedure (sample follows). The staff of Title III projects will inform older adults receiving services of their rights in writing upon their initial contact with the project and on a periodic basis thereafter.

MNRAAA will monitor grantees/contractors' compliance with civil rights, affirmative action and equal opportunity principles.

Sample Wording for Non-Discrimination Policy:

It is the Policy of _____ to provide service to all eligible persons without regard to race, color, creed, religion, national origin, gender, disability, use of public assistance, or sexual orientation.

The same requirements are applied to all and there is no distinction in eligibility for, or in the manner of providing services.

All persons and organizations having occasion either to refer persons for services or to recommend our services are advised to do so without regard to race, color, creed, religion, national origin, gender, disability, use of public assistance, or sexual orientation.

The person designated to coordinate with Section 504 of the Rehabilitation Act of 1973, Older Americans Act of 1965, Minnesota Human Rights Act of 1989, and Americans with Disabilities Act of 1990 and their amendments and successors thereto, is _____ and can be reached at _____. Persons who are deaf, deafblind, hard of hearing or speech disabled are requested to access this number through Minnesota Relay at 711.

Sample Wording for Civil Rights Complaint Procedure Poster:

The services, facilities, and benefits of this program are for the use of all eligible persons without regard to race, color, creed, religion, national origin, gender, disability, use of public assistance, or sexual orientation.

Any individual who feels he/she has been denied the opportunity to participate in this program and wishes to file a complaint of discrimination should write to the following office: Executive Director, Minnesota Board on Aging, P.O. Box 64976, St. Paul, Minnesota 55164-0976.

Your complaint will receive immediate attention and prompt corrective action as may be necessary will be undertaken. As complainant, you will be informed of the disposition of your complaint as soon as possible.

2. Each grantee/contractor must take appropriate steps, as are necessary, to develop a capability for communicating effectively and fully with participants and members of the public who are sensory impaired. Specifically,
 - a) All grantees/contractors must establish and implement policies and procedures which provide for a means of communication with persons who are vision and hearing impaired. This must include the ability to make available qualified sign language interpreters, telecommunication devices for the deaf, and other auxiliary aids when necessary. This may include a cooperative communications agreement with a Deaf and Hard of Hearing Services office and/or local resource agencies that can assist in obtaining sign language interpreters, TDDs, and other auxiliary aids.
 - b) Additionally, grantees/contractors must notify the general public and persons with disabilities about the reasonable accommodations that are available. Notice of TDD (telecommunications devices for the deaf) numbers must be added to all written materials whenever a telephone number is listed, including on letterhead and bulletins. If the volume of calls received from persons using TDDs is not significant, grantees/contractors may use Minnesota Relay services. Information on Minnesota Relay can be found at <https://mn.gov/commerce/consumers/your-phone/minnesota-relay/>.

Participants in meetings, training sessions, programs or other activities must be informed of the availability of reasonable accommodations.

3. All grantees/contractors must establish and implement policies and procedures which provide for a means of communication for persons with limited-English proficiency. This must include the ability to make interpreters or bilingual staff available where necessary, either through agency staff or a cooperative communications agreement with local resource agencies that can assist in obtaining interpreters. Additionally, in areas where substantial numbers of older persons and/or caregivers are of limited-English proficiency, an individual must be employed by the project, or available to them on a full-time basis, to assure assistance is available to enable individuals of limited-English proficiency to participate in programs and receive assistance under the OAA. Grantees/contractors must provide for specific outreach efforts to potential participants of minority status.
4. All projects must be accessible to persons who are handicapped. Grantees/contractors must document how program accessibility for handicapped persons is assured in each location where service is provided. Grantees/contractors establishing services in new locations must assure that the program is accessible to persons who are handicapped prior to implementing services.
5. Grantees/contractors are responsible for informing their staff of the above-mentioned responsibilities.

TARGETING of Title III Services is REQUIRED. Grantees/contractors receiving OAA funds are required to give preference to older persons residing in rural areas, with greatest economic need (with particular attention to low-income minority persons and persons residing in rural areas), with greatest social need (with particular attention to low-income minority persons and persons residing in rural areas), at risk for institutional placement, with severe disabilities, with limited-English proficiency, and with Alzheimer's

disease and related disorders with neurological and organic brain dysfunction. Grantees/contractors may use methods such as location of services and specialization in the type of services most needed by these groups to meet this requirement. Grantees/contractors are especially advised to undertake special outreach efforts where feasible to inform targeted groups of their Title III service(s).

C. PUBLIC INFORMATION

All Title III providers must identify MNRAAA and MBA as a source of funding in all mass media coverage and public information efforts. This includes press releases, feature articles, radio or television coverage, and any pamphlets, posters or public information flyers which are developed directly related to the project. The following phrase or words to the same effect must be included: **"This project is made possible in part under the Federal Older Americans Act through an award from the Minnesota River Area Agency on Aging under an Area Plan approved by the Minnesota Board on Aging"**. A poster with the same wording, supplied by MNRAAA, shall be displayed in a prominent place at all service sites.

D. PUBLICATIONS

1. Any books, reports, pamphlets, papers, or articles based on activities receiving Title III funding must contain notices regarding source of funding and non-discrimination practices as previously outlined.
2. The Administration for Community Living (ACL), MBA, and MNRAAA each reserve the option to receive free of charge up to 12 copies of any publication published as part of a grantee/contractor's operations, and two copies of any publication based on such operations.
3. Where a grantee/contractor's activities result in a book or other copyrightable material, the author is free to obtain a copyright, but the ACL, MBA, and MNRAAA reserve a royalty-free, non-exclusive, and irrevocable license to reproduce, publish, or otherwise use, and to authorize others to use all such materials.

E. APPLICABLE LAWS AND REGULATIONS

All Title III grantees/contractors shall be subject to: a) all applicable provisions of the OAA and related regulations and guidelines, all applicable OMB Circulars relating to the utilization of funds, operation of the program, maintenance of records, and policies of the Department of Health and Human Services (DHHS) that regulate federal funds, operation of the program, maintenance of records, and all other applicable federal regulations, requirements and policies; b) MBA policies and procedures and all other applicable state regulations, requirements and policies; c) MNRAAA policies and procedures and all other applicable local regulations, requirements and policies.

F. LICENSURE REQUIREMENTS

Where state or local public jurisdictions require licensure for the provision of services, agencies providing Title III services shall be licensed, or shall meet the requirements for licensure.

G. PROGRAM INCOME: COST SHARING, VOLUNTARY CONTRIBUTIONS AND OTHER PAYER SOURCES

Program income, as defined in 45 CFR 75 (see §75.307 Program Income), includes, but is not limited to, cost share revenue, voluntary contributions and other income received by or due to the grantee/contractor organization, as a result of activities wholly or

partially supported by funds from the Title III award. Grantee/contractor organizations must report all program income to MNRAAA.

Cost Sharing

In March 2011, MBA approved an updated Title III policy regarding cost sharing and voluntary contributions. This policy extends cost sharing to include all allowable Title III funded services. In accordance with Section 315(a) of the OAA, AAAs shall assure the maintenance and self-sufficiency of services by using cost sharing. A Title III Cost Sharing Tool Kit, which outlines cost sharing in detail and includes sample documents, is available at www.mnraaa.org.

MNRAAA requires cost sharing for all Title III-B, D and E services, except those prohibited by the OAA and Special Access services. (Note: The cost sharing exemption for Special Access services requires annual approval by MBA.)

The OAA prohibits cost sharing for:

1. Information and assistance, outreach, benefits counseling, or other case management services.
2. Ombudsman, elder abuse prevention, legal assistance or other consumer protection services.
3. Congregate and home delivered meals.
4. Any service delivered through tribal organizations.

Cost sharing should be applied to all individuals receiving any Title III-funded service required to cost share except:

1. Persons at or below the federal poverty level.
2. Persons receiving services through a Medicaid Waiver Program (CADI, CAC, DD, EW, TBI) or the Alternative Care Program.

Title III service providers must have written cost sharing policies and procedures that describe how they will implement and administer the policy, including how the provider will:

1. Protect the privacy and confidentiality of each individual, specifically with respect to the declaration or non-declaration of individual income and to any share of costs paid or not paid by an individual;
2. Establish appropriate procedures to safeguard and account for cost sharing payments;
3. Use cost sharing payments collected to expand the service for which the payment was given;
4. Account for cost sharing funds under a separate accounting in the general ledger and not co-mingle the funds with funds received under any other agreement;
5. Determine the unit of service cost as the basis for the cost sharing sliding scale;
6. Establish a sliding scale so as not to impose cost sharing for an individual whose income is at or below 100 percent of the Federal poverty guidelines, but provides them with an opportunity to make a voluntary contribution;
7. Include the sliding fee scale in materials given to prospective and/or new clients;
8. Inform individuals of their rights and responsibilities in relation to cost-sharing including cost of the service, recommended level of cost sharing, availability of the cost sharing sliding scale and information on availability of services if payment is not made due to inability or unwillingness to pay;
9. Determine eligibility for cost sharing based solely on a confidential self-declaration of gross income;

10. Determine income level solely on the gross income of the individual, not considering assets, savings, or other property owned by an older individual, to determine whether cost sharing is permitted;
11. Determine when cost sharing participation shall be waived for extreme hardship (e.g. high medical or living expenses), on a case-by-case basis with approval from MNRAAA, and how the waiver will be documented in client files; and
12. Notify individuals of current cost sharing amount due (cost sharing “statements” may be provided but must not carry forward a balance due amount).

For those services for which cost sharing is required:

- The *recommended* level of cost sharing is 50%. For those individuals unable to cost share at the 50% level a cost share sliding fee scale – based solely on gross income levels and cost of delivering services – shall be used to determine the level of cost sharing. Each grantee/contractor must identify their unit of service cost as the basis for the sliding fee scale. Following is an example of a sliding fee scale (income amounts are based on 2019 FPGs):

% of Federal Poverty Guidelines (FPG)	1 person 60 years + in a single or multiple person, <i>non-spousal</i> household		2 person <i>spousal</i> household (at least 1 person is 60 years +)		Cost Share as % of Unit Price or Budget Amount	*Sample: Cost Share for a \$20 Unit Price or Budget Amount
	ANNUAL INCOME	MONTHLY INCOME	ANNUAL INCOME	MONTHLY INCOME		COST SHARE AMOUNT
Up to 100%	\$12,490 & Below	\$1,041 & Below	\$16,910 & Below	\$1,409 & Below	Voluntary Contribution	Voluntary Contribution
>100% to 150%	\$12,491 - \$18,735	\$1,042 - \$1,561	\$16,911 - \$25,365	\$1,410 - \$2,114	10%	\$ 2.00
>150% to 200%	\$18,736 - \$24,980	\$1,562 - \$2,082	\$25,366 - \$33,820	\$2,115 - \$2,818	25%	\$ 5.00
>200% and ≤250%	\$24,981 - \$31,225	\$2,083 - \$2,602	\$33,821 - \$42,275	\$2,819 - \$3,523	50%	\$10.00
>250%	\$31,226 & Above	\$2,603 & Above	\$42,276 & Above	\$3,524 & Above	100%	\$ 20.00

- Variations to the sliding fee scale that comply with the intent of the policy and encourage financial contributions by users are allowed. For example, if a grantee/contractor has been successful in generating higher levels of cost sharing using a different scale, the grantee/contractor may continue to use that scale. Scales that vary from the MNRAAA provided scale must be approved by MNRAAA prior to implementation.
- For Title III-B and D services, the participant income level will be based on self-reported gross income of the older adult service recipient. If the person is in a two-person *spousal* household, where at least one person is age 60+, the participant income level will be based on their combined, self-reported gross income.
- For Title III-E caregiver services, the participant income level is based on the self-reported gross income of the *care-receiver*. In the case where the caregiver and care-receiver are married (in a two-person spousal household) where at least one person is age 60+, the participant income will be based on their combined, self-reported gross income.

- A means test shall not be utilized to determine eligibility.
- The grantee/contractor may not deny service to any individual unable or unwilling to cost share for service.

Title III providers must submit a copy of their cost sharing policies, sliding fee scale and related client education and notification materials to MNRAAA within the first month of the project year, and annually thereafter, for review, comment and approval.

Voluntary Contributions

All other Title III services, including those for which cost sharing is not required, are to establish and implement a voluntary contribution policy.

The Older Americans Act Sec. 315(a) and MBA guidance requires that providers will:

1. Provide individuals with an opportunity to voluntarily contribute to the cost of a service;
2. Clearly inform each individual that service will not be denied due to inability or unwillingness to pay;
3. Protect the privacy and confidentiality of each individual with respect to their contribution or lack of contribution;
4. Establish appropriate procedures to safeguard and account for all contributions;
5. Have in place a schedule of suggested contributions; and
6. Use all collected contributions to expand the service for which the contributions were given.

Providers who utilize voluntary contribution policies cannot:

- Mandate a fee or rate; or
- Means test for any service.

Other Payer Sources

All primary payers, including third-party payers, Medicare, Medical Assistance, Home and Community-Based Medicaid Waivers (Alternative Care Program and Elderly Waiver), and health plans (MSHO) should be maximized whenever possible for qualifying participants. Services funded under payment of any of the above payer sources are not eligible for payment with Title III funds.

H. DISASTER ASSISTANCE

When natural disasters strike, it is the responsibility of the entire aging network to respond to the special needs of older adults that may make them especially vulnerable. In such situations, Title III providers must cooperate with MNRAAA in providing emergency services and staffing Disaster Assistance Centers. MNRAAA will take the lead and inform projects as to the need for services and staff.

III. FINANCIAL MANAGEMENT

A. GENERAL FINANCIAL MANAGEMENT

The Title III grantee/contractor's bookkeeping system must reflect all receipts and expenditures on a current basis by program. Non-federal funds generated in conjunction with Title III grants/contracts (contributions, donations, and project income) must flow through the same accounting system as the federal funds but be identified separately.

Each entry in the grantee/contractor's accounting system must refer to supporting documentation such as purchase orders, receipts, invoices, cancelled checks, etc. Documentation should be maintained in well-organized and readily accessible files.

The accounting system of the project must allow for the identification of the source of all funds. The accounting system must also allow for identification of obligations and expenditures by line item, and for periodic comparison of actual expenditures against planned or budgeted expenditures.

MNRAAA requires that Title III grantees/contractors meet minimum standards for the fiscal management of their Title III grants/contracts. The grantee/contractor's fiscal management system should allow the Title III grantee/contractor to:

1. Maintain an accounting system and internal controls that are adequate to safeguard assets, check the accuracy and reliability of accounting data, promote operational efficiency and encourage adherence to prescribed management policies and grant requirements;
2. Maintain an accounting system that adequately identifies receipts and expenditures for the grant/contract as opposed to those for non-assisted activities;
3. Maintain an accounting system that provides for recording non-federal share contributions;
4. Assemble the grant/contract fund costs incurred by service or function in accordance with generally accepted accounting principles directly from accounting records;
5. Comply with grant, contractual and regulating requirements;
6. Use standards for grantee/contractor financial management systems contained in OMB Circular Part 200 and the MBA audit policies and procedures.

B. BASIC ACCOUNTING AND FISCAL PROCEDURES

1. Basic Controlling Documents

A checking account and a running ledger of cash disbursements should be used as the Title III grantee/contractor's basic control documents for all fiscal transactions. Supporting materials, such as deposit slips, invoices, in-kind records, and cancelled checks, must be retained.

2. Checking Account

A Title III project's checking account should reflect all receipts and expenditures. The quarterly bank statement for the same quarter is a cross-check to ensure that all expenditures have been properly recorded.

3. Distribution of Duties

Whenever possible, accounting duties should be distributed among two or more employees for internal control purposes.

4. Recording of Transactions

Revenues should be recorded only when the cash is actually received and deposited in the agency account. Expenditures should be recorded only when the actual cash payment has been made.

5. Minute Book

The grantee/contractor agency should maintain a minute book or comparable log to record the board of directors' fiscal actions concerning the grant/contract budget,

appropriations for specific purposes, delegation of financial authority and all other fiscally related authorization.

C. INTERNAL CONTROL AND SAFEGUARDS

1. GENERAL

All revenue should be promptly and accurately recorded and deposited in the grantee/contractor account. Projects should maintain a daily receipt log and this record should agree with the day's deposit record.

2. CUSTODY OF CHECKS AND CASH

Cash receipts should be reported and deposited on the day received. Records of deposit should be obtained from the bank and filed.

3. RECONCILIATION AND CROSS-CHECK

Bank accounts should be completely reconciled on a monthly basis through a comparison of the transactions shown on the bank statement with those entered in the cash receipts and disbursement records.

4. EXPENDITURE CONTROLS

All expenditures should be recorded on the cash disbursements record on the date the check is drawn. The checks should be pre-numbered and entered in sequence in the cash disbursements record. All expenditures should be made by check except for small items from petty cash.

5. CHECK-SIGNING AUTHORITY

Persons signing checks should be authorized in writing to do so by the board of directors. Checks should be signed by two persons and no blank or incomplete checks should be signed in advance.

6. SAFEGUARDING CHECKS

All checks should be safeguarded by the staff member responsible for books and records. Checks should be kept in a controlled-access file.

7. SUPPORT DOCUMENTS REVIEW

All expenditures should be reviewed and approved before payment by the individual(s) designated by the grantee/contractor's internal financial policies and procedures. Checks presented for authorized signatures should be accompanied by supporting documents for review by the signer. Supporting documents should be cancelled or otherwise marked to prevent duplication.

8. PAYROLL CONTROLS

Individual payroll records, showing earnings and withholdings, should be maintained for each employee. Changes in compensation rates should be fully documented, dated, and included in the employee's personnel file. All paychecks should be reviewed by the director prior to issuance.

D. RECORD KEEPING

Financial records, supporting documents, statistical records and any other reports, documents, or material pertinent to the Title III operations of the grantee/contractor must be retained for at least five years. Such records should include but not be limited to: receipts, cancelled checks, bank statements, vouchers, purchase records, property records, payroll and personnel files, ledgers and journals, program reports and plan components, fiscal reports from plan components, data on consumption of service,

quarterly reports, approved grants and contracts, records relating to the receipt of Title III grants/contracts and any other grant/contract related materials.

Title III grantees/contractors are required to retain their records for longer than five years in the following instances:

1. Audits (when required) – Any and all records dating from a fiscal period which has not been subjected to a complete and satisfactorily resolved audit must be retained until such an audit is performed and resolved. This applies even to records that are more than five years old.
2. Property – When a Title III grantee/contractor has acquired non-expendable tangible property with Title III or other federal funds, the records relating to such property must be kept for at least five years after the final sale or disposition of the property. Non-expendable property is equipment charged directly to the federal award and having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.

E. PROPERTY MANAGEMENT

Title III grantees/contractors must maintain property records for all non-expendable, tangible property. At a minimum, such records must include:

1. Distribution of the property;
2. Manufacturer's serial number;
3. Acquisition date and cost;
4. Source of property;
5. Percentage and fund sources of Title III funds used in the acquisition;
6. Location, use and condition of the property;
7. Ultimate disposition data, including sale price or method used to determine current fair market value.

A physical inventory must be taken, and the results reconciled to property records at least annually to verify the existence, current utilization and continued need for the property.

Standards governing the use and disposition of federally financed property are contained in OMB Circular Part 200.

F. PROCUREMENT

Procurement is the acquisition of goods and/or services at the best possible total cost of ownership, in the right quantity and quality, at the right time, in the right place for the direct benefit or use of governments, corporations, or individuals generally via, a contract. All grantees/contractors shall establish written procurement procedures. Standards for procurement are contained in OMB Circular Part 200.

G. ALLOWABLE COSTS/PROJECT INCOME

1. Composition of Cost
All Title III project costs must be shown as direct costs. No indirect costs are allowed.
2. Allowable Costs

Generally, costs must be necessary, reasonable and directly related to the grant/contract. In addition, they must be legal, proper and consistent with the policies that govern the grantee/contractor's own expenditures.

More specific rules for determining allowable costs are contained in OMB Circular Part 200.

3. Project Income

Project income represents gross income earned by a grantee/contractor from the organization's federally supported activities, including income from participant contributions for services received and interest earned on Title III funds.

H. IN-KIND COSTS

Grantees/contractors are required to record in-kind contributions in their books of account. All in-kind contributions must be valued according to the Department of Health and Human Services' Federal Regulations, Title 45, Part 74.

IV. REPORTING REQUIREMENTS

- A. All Title III grantees/contractors are required to complete reports as directed by MNRAAA, including format and deadlines.

Monthly Reporting (generally due within ten days of the last day of each month - February 10, March 10, April 10, etc.):

- National Aging Program Information System (NAPIS) Report for the following Title III services: Title III-B Homemaker, Chore and Assisted Transportation; and all Title III-E services;
 - ▶ Grantees/contractors providing Registered Services must agree to work with service participants to complete NAPIS registration forms and ensure that current, accurate and comprehensive participant data is obtained and either entered into the MBA approved NAPIS data system or reported to MNRAAA by the specified due date. The NAPIS data is used for meeting the requirements of the U.S. Administration for Community Living, participant targeting and service planning, and verification of participant eligibility. Particular attention must be given to 1) collecting complete and accurate information for basic eligibility determination, including date of birth, and client demographics (income level, race/ethnicity, etc.) and 2) determining limitations in Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs), when applicable. Each person receiving Registered Services must be assessed, preferably in person, prior to or within 10 working days after the beginning of service delivery. Reassessment shall occur as needed, but at least annually. Although clients may not be denied service if they refuse to complete the registration form, older adults and caregivers are encouraged to complete the form. However, client (or care-receiver for Title III-E) date of birth is required to determine Title III eligibility.
 - ▶ NAPIS Registration Process
 1. Clients served for the first time should fill out the Participant Registration form. Project staff must determine eligibility for Title III services according to Older Americans Act requirements.
 2. Project staff may interview and complete the registration form for the client if he/she is not able to complete the registration form for him/herself. The

client should sign and date the registration form. If the client is unable to sign the form, project staff should indicate such, sign (using their own name) and date the form. By signing the registration form the individual is agreeing to the following use of information statement: "I understand that the information I am providing on this form is for registration purposes. The information will be used by the U.S. Health and Human Services Administration for Community Living (ACL), the Minnesota Board on Aging (MBA) and the local Area Agency on Aging, to create statistical reports. ACL, MBA and/or its assignees may use this information to conduct a study and/or survey of this service. In addition, information provided here, may be used by other service providers to help identify other services from which I may benefit, such as follow up to the Nutrition Risk Assessment. This information will not be released to anyone other than the above mentioned parties in a way that will identify me as an individual unless I sign a separate consent for that purpose."

3. Client Registration forms must be updated annually. The client may review a prior year's registration and make necessary changes and sign and date the form. Changes should be initialed. (Note: Most Title III providers have determined it to be more efficient and easier for the client to complete a new NAPIS Registration form annually rather than updating an existing form.) Every other year a new client registration form must be completed.
 4. Clients are encouraged to complete all sections of the registration form except for the shaded areas. As previously stated, client (or care-receiver for Title III-E) date of birth is required to determine Title III eligibility.
 5. Provide MNRAAA with NAPIS Client Registration Forms and Monthly NAPIS Tracking Forms by the 10th of the month for the previous month's activities. (Note: Some providers enter their data directly into MBA's data software system.)
- Other reports requested by MNRAAA.

Quarterly Reporting (this is generally due within ten days of the last day of each quarter – April 10, July 10, October 10, and January 10):

- Program and Financial Report;
- Program and Financial Report by Service, if applicable;
- Performance Report (non-registered services only);
- Outcome Report (for Titles III-B and E);
- Other reports requested by MNRAAA.

Request for Payment/Reimbursement (generally due within ten days of the last day of each quarter – April 10, July 10, October 10, and January 10). Note: Requests for reimbursement can be submitted and paid monthly with prior MNRAAA approval (generally due within ten days of the last day of each month).

Annual Reporting (due March following the end of the project year):

- Final Financial Report;
- Other reports requested by MNRAAA.

B. Late Reports

The submission of prompt, complete, and accurate reports is essential to the fulfillment of the grantee/contractor's obligations for accountability. MNRAAA in turn must be accountable to MBA. Consequently, to ensure timely reports, MNRAAA will abide by the following:

1. Any grantee/contractor failing to submit a report by the specified deadline will not receive payment of funds until the report is received, and all corrections have been made.
2. Any grantee/contractor that fails to submit a report within 30 days of the deadline will be declared to be in non-compliance and will be subject to immediate suspension of Title III funding as outlined in Section X.

MNRAAA will notify the grantee/contractor of any corrections to be made in reports. The grantees/contractor must submit a corrected report by the date specified by MNRAAA.

V. PROJECT REVISIONS: BUDGET AND PROGRAM

- A. Whenever there is any material change in the content or administration of the project award as approved, the approved project grant/contract documents must be appropriately revised. The nature and extent of the request for revision will determine the action to be taken by MNRAAA.
- B. All project budget revisions shall be made in the manner prescribed by MNRAAA. Revisions must also be justified in narrative form.
- C. The following types of revisions shall require written approval by MNRAAA. All such changes must be approved in writing before the revision may occur:
 1. A change in any cost category, income, other non-federal cash, in-kind, etc. that significantly changes the overall project budget;
 2. A change in the recipient of awards;
 3. Significant changes in project outcomes;
 4. Significant changes in program content.
- D. Revisions considered as minor may be made in writing, at the option of MNRAAA.
- E. Revisions 1. and 2. under letter C above must be made by MNRAAA with a revised grant/contract agreement; revision a. requires the grantee/contractor complete a revision of the approved budget included in the grant application/contract proposal; and revisions 3. and 4. may be made by letter.
- F. Grantees/contractors considering a project revision should contact MNRAAA's G/C Manager for revision procedures, due dates, et al.

NOTE: A budget over-expenditure of 10% or more in any single approved cost category (budget line item) requires a written explanation upon submission of the project's Final Financial Report.

VI. SUPPLEMENTAL AWARDS

MNRAAA may consider requests for supplemental awards if funds are available and the need for additional funds is apparent and urgent. Funds may be awarded in the form of a supplement to the original award. A supplemental award may be awarded only during the current project year.

- A. A request for supplemental funds is made by a project in the form of a revised grant application/contract proposal. All amounts stated in the budget sections must reflect the revised total budget.
- B. A supplemental grant application/contract proposal is subject to the award process described in Section I.D. This process may be modified as deemed necessary and appropriate.
- C. For grants, a successful application is followed by the issuance of a revised Notification of Grant Awarded (NGA) reflecting the entire award for the budget year and superseding any previous NGAs. For contracts, a successful proposal is followed by the issuance of a Contract Amendment or Addendum.

VII. PROJECT MONITORING AND ASSESSMENT

A. PROJECT MONITORING

MNRAAA requires monitoring and assessment of Title III grantees/contractors to ensure that funds are expended in keeping with the purpose for which they were awarded.

1. Title III grantees/contractors are monitored for:

- Compliance with the laws, regulations and policies of the ACL, MBA, and MNRAAA.
- The need for technical assistance as requested by project staff or as identified by MNRAAA staff in areas where assistance may be beneficial or required.
- Areas requiring corrective action.

2. MNRAAA will regularly monitor Title III grantee/contractor activities through the following methods including, but not limited to:

- a) Reviewing and analyzing monthly and/or quarterly financial, program and statistical reports and data;
- b) Assessing progress on project outcomes (when applicable);
- c) Periodic on-site visits;
- d) Communication via telephone, electronic and written correspondence;
- e) Requests for special reports/data;
- f) Review of client satisfaction surveys and other performance measures.

B. SELF-ASSESSMENT

Each Title III grantee/contractor must have in place an ongoing plan for self-assessment, monitoring and improving the quality of service provided by the project. At a minimum, this plan should include:

- 1. Staff, and if applicable volunteer, performance appraisal protocols and;
- 2. Client satisfaction protocols.

The plan should also include how the perspectives of older persons are gathered and utilized in monitoring and improving services quality.

The project must determine (measure) whether there has been improvement in the quality of service as a result of the project's quality assurance protocols.

C. ANNUAL ASSESSMENT

1. PURPOSE

Each grantee/contractor will be formally assessed by MNRAAA at least annually prior to the end of the project year. The purpose of the project assessment will be:

- a) To give MNRAAA a better understanding of the project's overall purpose, performance, method of operation, and client population.
- b) To gain specific information about the project that would not be available through other sources, such as the written application or quarterly reports.
- c) To ensure grantees/contractors are in compliance with all civil rights and program accessibility requirements.
- d) To give grantees/contractors an opportunity to express their concerns, talk about problems, and request technical assistance if necessary.
- e) To provide MNRAAA with general information on the methods and problems of service delivery for use in developing future priorities and project recommendations.
- f) To make judgments regarding whether or not the project is meeting all federal, state, local and MNRAAA regulations and policies regarding project operations.
- g) To provide commendations for program achievements, make recommendations for improvement and identify items for corrective action.

2. PROCEDURE

- a) Project assessments are conducted by MNRAAA staff and usually consist of a two-hour, on-site visit. Board members and/or MBA staff may also be involved.
- b) The grantee/contractor is notified in advance of the date of the assessment and is provided with a copy of the Title III Assessment Guide for review and preparation.
- c) The assessment is conducted with the project director and any other project staff, board members, etc. using the Title III Assessment Guide.
- d) Following the assessment, MNRAAA staff will write a report including recommendations for improvement and corrective action, if necessary. Compliance with any corrective action must be documented by the grantee/contractor within the time prescribed by MNRAAA.
- e) The grantee/contractor will receive a copy of the written assessment.
- f) MNRAAA will follow up on corrective action and provide technical assistance when requested.

D. FINANCIAL AND PROGRAM COMPLIANCE REVIEW

The purpose of the Financial and Program Compliance Review is to evaluate certain compliance and management aspects of project operations. In most cases, this review is completed by MNRAAA's G/C Manager at the same time as the Annual Assessment. Additional detail is provided in Section VIII.B.

E. CLOSE-OUT ASSESSMENT

1. PURPOSE

Each project will be formally assessed by MNRAAA within three months following the close of its final project year. The purpose of the close-out assessment will be:

- a) To review with MNRAAA the project's overall methods of operation and service delivery, major project outcomes and their results, and client benefits.
- b) To discuss whether or not the project is continuing independent of Title III funding and how client needs will continue to be met.
- c) To give project staff the opportunity to share successes, problems and lessons learned, to provide suggestions, and to request technical assistance from MNRAAA.
- d) To inventory and make judgments regarding capital equipment purchased through the project.
- e) To provide commendations for program achievements and request items necessary for final project close-out.

2. PROCEDURE

- a) Close-out assessments are conducted by MNRAAA staff and usually consist of a 1-2 hour, on-site visit. Board members and/or MBA staff may also be involved.
- b) The project director is notified in advance of the date of the assessment and is provided with a copy of the Title III Close-Out Assessment Guide for review and preparation.
- c) The assessment is conducted with the project director and any other project staff, board members, etc. using the Title III Close-Out Assessment Guide.
- d) Following the assessment, MNRAAA staff will write a report including requested items necessary for final project close-out and prescribed timelines for submission of those items. If applicable, a Title III Equipment Inventory Release form will be included.
- e) A copy of the close-out documents will be provided to the project director.
- f) MNRAAA will monitor submission of requested items and provide technical assistance when requested and feasible.

VIII. AUDIT/FINANCIAL AND PROGRAM COMPLIANCE REVIEW

MNRAAA has established audit standards that meet the minimum standards prescribed by MBA which are based on OMB Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards.

PURPOSE

The purpose of the audit/compliance review is to attest to the financial position of the grantee/contractor, to determine how the project and its sub-grantees/contractors will discharge their financial responsibilities, and to evaluate certain compliance and management aspects of the project operation.

SCOPE

The scope of the audit/compliance review is all program operations since the beginning of the project if it is the initial audit/review or since the last audit/review if a prior audit/review has been performed. The audit/review covers financial and compliance elements.

- A. All grantees/contractors must complete and submit to MNRAAA a Single Audit Determination Form.

- B. Upon receipt of the form, MNRAAA will determine whether or not the grantee/contractor is subject to an on-site Financial and Program Compliance Review or an audit.
1. Title III providers with less than \$750,000 in federal expenditures in any one year are required to participate in an on-site Financial and Program Compliance Review. The review will be arranged and conducted by MNRAAA staff and will address: allowable activities; allowable costs; eligibility; matching level of effort/client contributions; and reporting. Frequency of the review will be determined through a risk assessment; however, a review must be conducted on at least a bi-annual basis. A self-assessment will not be accepted.
 2. Title III providers with \$750,000 or more in federal expenditures in any one year shall be responsible for annual audits to be completed, in accordance OMB Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards, within 180 days following the end of the project year. The audit will verify, at a minimum, allowable expenses and income receipts during the project period relative to the performance of each service and how many service units were provided. To the extent the grantee/contractor's payments during the project period exceed the documented and allowable expenses identified by the audit, MNRAAA will require repayment by the grantee/contractor of the excess payments made to the grantee/contractor.
 - a) The grantee/contractor assumes the responsibility for the fiscal and contractual arrangements of the audit.
 - b) The grantee/contractor must furnish the audit report and schedules to MNRAAA. MNRAAA will initiate the resolution process and will provide the grantee/contractor with an initial letter of resolution. Grantees/contractors will be requested to prepare a written response to all recommendations having to do with their grant/contract or agency. In addition, they will be required to take the necessary action for transfer of funds in order to close out the grant/contract award, i.e., requests for amounts due or payment of audit exceptions or over advances. The response from the grantee/contractor will be addressed to MNRAAA. Responses will be reviewed by MNRAAA and, upon their approval, the grantee/contractor will be provided with a final letter of resolution.

MNRAAA has complete access to all grantee/contractor records and financial statements and may consult with the audit firm to resolve questions of whether the responses adequately resolve audit recommendations.

IX. FINAL PROJECT CLOSE-OUT

Upon completion or termination of the project, MNRAAA staff will notify the grantee/contractor of the final project closeout procedure. The project closeout process will include an assessment, equipment inventory (if needed), a final financial resolution, and the completion of audit requirements (if applicable).

X. PROJECT AWARD SUSPENSION OR TERMINATION

BASIS FOR SUSPENSION OR TERMINATION

Any project may be suspended or terminated for good cause. Good cause is generally defined as evidence supporting the fact of potential harm to clients, serious or consistent lack of financial accountability or a lack of service provision. Further, good cause may be defined as:

- Repeated failure to comply with reporting requirements, including the accurate and timely submission of reports;

- The recipient of award fails to comply with conditions under which the project proposal is approved;
- Project performance is inadequate;
- Non-federal resources (i.e. match) are not available*;
- Misuse of funds is indicated by audit reports for previous project award;
- Bankruptcy is declared by the sponsoring agency; or
- For termination, project operations have been suspended for more than three consecutive months in any project year.

A. SUSPENSION

When conditions warrant, MNRAAA may suspend project operations prior to the end of an approved project year. The following stipulations become part of the suspension and/or suspension process.

1. MNRAAA must notify the grantee/contractor in writing of the action being taken, the reason(s) for such action and the conditions of suspension. This notice must be given prior to the effective date of suspension and must note the right of the recipient to appeal such decision.
2. There can be no federal participation in any cost accrued by the project during a period of project suspension.
3. In suspending project operations, MNRAAA must determine the amount of unearned Title III funds the grantee/contractor has on hand. The anticipated length of the project suspension and the amount of Title III fund balance on hand will dictate whether MNRAAA will require the balance to be returned at the beginning of the suspension.
4. MNRAAA may reinstate a suspended project if it determines conditions warrant such action. Such reinstatement will be made by issuance of a new NGA/contract.
5. Federal participation in project costs may resume immediately upon reinstatement, but not for any cost accrued during the period of suspension. The obligational authority unearned at the time of suspension becomes available for earning by the project at the previously established matching ratio.
6. Federal support shall automatically be terminated when such operations have been suspended for more than three consecutive months in any project year.
7. The grantee/contractor may appeal the decision to suspend according to MNRAAA's appeal procedures.

B. TERMINATION

1. When conditions warrant, MNRAAA may terminate federal support for project operations prior to the end of an approved project year.
2. To terminate a project, MNRAAA must notify the grantee/contractor in writing of the action being taken and the reason(s) for such action. This notice must specify reports to be completed, the right of the grantee/contractor to appeal and the procedures to be followed for appeal.
3. If support for a project is terminated in the same Area Plan year in which it was awarded, the project's funds from that Area Plan year are then available to MNRAAA and may be re-obligated to other projects.

4. When MNRAAA receives a request to resume support for a project which was terminated, it should satisfy itself that the reason(s) for which support was terminated no longer exist. If MNRAAA decides to reinstate support, it will issue a new NGA/contract. The funding ratio which applied at the time of termination shall apply at the time of reinstatement. The project year in which termination took place is then extended by no more than the length of time necessary to give a total of twelve months. Any funds awarded to such a reinstated project must be in the form of new obligational authority.
5. When federal support to a project terminates on completion of the final approved project year or earlier, the grantee/contractor must complete and submit a final project and financial report to MNRAAA.
6. The grantee/contractor may appeal the decision to terminate according to MNRAAA's appeal procedures.

XI. APPEAL PROCEDURES

Unsuccessful grant applicants/contract proposers and Title III providers have the right to appeal a decision made by MNRAAA. An applicant/proposer or grantee/contractor must provide written notice of its intent to appeal to MNRAAA. The Notice of Appeal must be directed to the Executive Director of MNRAAA within 10 working days of written notification of MNRAAA's decision. The Notice of Appeal must describe the adverse action taken, who took the action, and the reason for believing the action to be in error. No additional information should be included. Notice by electronic media such as facsimile (FAX) transmittal or email will not be accepted. *MNRAAA shall consider an appeal on procedural grounds only and shall not consider issues of merit.*

XII. APPLICABLE LAWS AND SUPPORTING DOCUMENTS

MNRAAA adopts by reference the following principle law and other source documents which govern the award and implementation of Older Americans Act grants/contracts. Grant/contract law, particularly federal grant/contract law, is diverse, complex, and continually evolving. In instances where they appear to be contradictory, conflicting or divergent in their requirements, MBA has the final authority in interpreting these documents.

- Older Americans Act of 1965 and Native Americans Programs Act of 1974, (Public Law 89-73) and any amendments thereto as may be promulgated in law by the Congress of the United States. As amended in 2016 (<https://acl.gov/about-acl/authorizing-statutes/older-americans-act>)
- U.S. Department of Health and Human Services, Office of Human Development Services, 45 Consolidated Federal Regulation (CFR), Parts 1321, 1322 and 1323, Grants for State and Community Programs on Aging; and Grants to Indian Tribes and Organizations Serving Older Native Hawaiians for Supportive and Nutrition Services, and any amendments or revisions as issued thereto by the Department of Health and Human Services, Administration for Community Living
- Part III, U.S. Department of Labor, Employment and Training Administration 20 CFR, Part 626, 627, 628, 631, and 637, Job Training Partnership, and any amendments or revisions as issued thereto by the Department of Labor (http://www.dol.gov/dol/cfr/Title_20/Chapter_V.htm)

- Uniform Administrative Requirements, Cost Principles and Audit Requirements for HHS Awards, 45 CFR Part 75
- OMB Circular PART 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (superseded OMB circulars A-87, A-102, A-110, A-122 and A-133) <https://www.govinfo.gov/app/details/CFR-2014-title2-vol1/CFR-2014-title2-vol1-part200>
- The Civil Rights Act of 1991, Title I, and any amendments or revisions thereto as issued by the Congress of the United States (<http://www.eeoc.gov/policy/cra91.html>)
- Americans with Disabilities Act of 1990, as amended (PL 101-336), 42 USC, Section 12101 et seq., and any amendments or revisions thereto as issued by the Congress of the United States (<http://www.eeoc.gov/policy/ada.html>)
- Section 504 of the Rehabilitation Act of 1973 and HHS 45 CFRT Part 84
- 45 CFR Part 76 Governmentwide Debarment and Suspension (Non-procurement) (<http://www.gpo.gov/fdsys/granule/CFR-2002-title45-vol1/CFR-2002-title45-vol1-part76-appB>)
- Minnesota River Area Agency on Aging (www.mnraaa.org)

Title III Service Definitions
Revised 3B Service Definitions
Effective CY 2014

	A	B	C	D
1	MBA Service	MBA Unit	MBA Service Definition	Allowable T3 Funds
2	Self-Directed Supportive Services	N/A	Services and supports directly chosen and purchased by an individual through using an individual budget allocation to meet their identified supportive service needs.	3B
3	Chore	1 hour	Assistance such as heavy housework (including but not limited to washing floors, windows and walls; basic home maintenance; or moving or removal of large household furnishings and heavy appliances), yard work or sidewalk maintenance for a person.	3B
4	Homemaker	1 hour	Assistance such as preparing meals, shopping for food and other personal items, managing money, answering or making telephone calls or doing light housework (including but not limited to laundry).	3B
5	Home Modification	1 project	Physical adaptations to the home and vehicle that are necessary to ensure the health and safety of an individual or that enables the individual to function with greater independence in their home.	3B, 3E Supplemental
6	Technology	1 project	Technology that enables an individual or family caregiver to improve their ability to perform activities of daily living; perceive, control, interact or communicate with their environment; monitor for safety or self-management of chronic conditions; or facilitate safe medication use.	3B, 3E Supplemental
7	Transportation	1 one-way trip	Provision of a means for going from one location to another. Does not include other activity.	3B
8	Assisted Transportation	1 one-way trip	Provision of assistance, including escort, to a person who has difficulties (physical or cognitive) using private or public transportation. The trip may include assisting the older individual in preparation for the trip, assisting the older individual from their place of residence into the transportation vehicle, assisting the older individual from the transportation vehicle to the destination (such as the doctor's office), staying with the older individual at the point of destination, assisting the older individual from the destination into the transportation vehicle, assisting the individual from the transportation vehicle into their place of residence and carrying packages into the residence.	3B

**Revised 3B Service Definitions
Effective CY 2014**

	A	B	C	D
1	MBA Service	MBA Unit	MBA Service Definition	Allowable T3 Funds
9	Counseling	1 session	Via interview, discussion or supportive listening to advise and to enable the other person and/or their family to resolve problems or to relieve temporary stress. May be done on a 1-to-1 basis or on a group basis.	3B, 3D
10	Consultation	1 <u>hour</u>	Assistance provided to an individual who is seeking support services to enable them to live independently in their own home. May include assistance in setting goals, identifying needs, determining potential sources of support (informal and formal), and determining if private pay for services is an option. This assistance may also include support planning (the development and implementation of a self-directed service option) and/or the development of a risk management action plan.	3B
11	Legal Assistance	1 hour	Provision of legal advice, counseling and representation by an attorney or other person acting under the supervision of an attorney. Does not include legal education.	3B
12	Legal Education	1 session	A presentation to inform older persons of their legal rights/ benefits and how to access the legal system.	3B
13	Guardianship		Performing legal & financial transactions on behalf of a client based upon a legal transfer or responsibility (e.g. as part of protective services). Includes conservatorship.	
14	Personal Care	1 hour	Providing personal assistance, stand-by assistance, supervision or cues for persons having difficulties w/1 or more of the following ADL: eating, dressing, bathing, toileting, transfer in/out of bed, grooming, bed mobility, walking	

**Revised 3B Service Definitions
Effective CY 2014**

	A	B	C	D
1	MBA Service	MBA Unit	MBA Service Definition	Allowable T3 Funds
15	Information and Assistance	1 contact	A service for older individuals that (A) provides the individuals with current information on opportunities and services available to the individuals within their communities, including information relating to assistive technology; (B) assesses the problems and capacities of the individuals; (C) links the individuals to the opportunities and services that are available; (D) to the maximum extent practicable, ensures that the individuals receive the services needed by the individuals and are aware of the opportunities available to the individuals, by establishing adequate follow-up procedures. Information and assistance topics include, but are not limited to: Medicare, long- term care insurance, prescription drug programs, forms assistance and pension rights. Information and assistance services can be provided through county coordinators on aging, Senior Linkage Line®, or individual advocacy.	3B
16	Outreach	1 contact	Interventions initiated by an agency or organization for the purpose of identifying potential clients (or their caregivers) and encouraging their use of existing services and benefits. [NOTE: service units for outreach refer to individual, 1-on-1 contacts between a service provider and an elderly client or caregiver. An activity that involves a contact with several current or potential clients/caregivers (what is considered group services) should not be counted as a unit of outreach.]	3B
17	Visiting	1 visit	Providing regular visits to isolated, homebound or institutionalized elderly to reduce their isolation and loneliness. Letter writing, reading letters and conversation and typical activities of friendly visitors.	3B
18	Telephone Reassurance	1 call	Regular telephone contacts w/isolated older persons or family caregivers to insure continued well being of the individual and to provide social contact.	3B, 3E Supplemental

**Revised 3B Service Definitions
Effective CY 2014**

	A	B	C	D
1	MBA Service	MBA Unit	MBA Service Definition	Allowable T3 Funds
19	Education/ Training	1 session	Providing formal or informal opportunities for individuals to acquire knowledge, experience or skills. Includes individual or group sessions designed to increase awareness in such areas as crime or accident prevention; promote personal enrichment, for example, through continuing ed; to increase or gain skills in a specific craft, trade, job or occupaion. Does not include wages or stipends.	3B
20	Special Access		Activities that link elders to community and government services that are not easily accessible due to language and/or cultural barriers.	
21	Special Access	1 hour	Individual services - information and referral, advocacy, outreach, phone contact, escort, translation, home visit, form completion, service coordination and limited case management.	3B
22	Adult Day Care/Adult Day Health	1 hour	Provision of personal care for dependent adults in a supervised, protective, congregate setting during some portion of a 24-hour day. Services offered in conjunction w/adult daily care/adult day health typically include social and recreational activities, training, counseling, meals for adult day care and services such as rehabilitation, medications assistance and home health aide services for adult day health.	3B

Revised TITLE 3C DEFINITIONS

MBA Service	MBA Unit	MBA Service Definition	Allowable T3 Funds
Home Delivered Meals	1 meal	Provision, to an eligible client or other eligible participant at the client's place of residence. A meal which: a. complies with the most recent Dietary Guidelines for Americans (published by the Secretaries of the Department of Health and Human Services and the United States Department of Agriculture); b. provides to each participating individual a minimum of one-third of the Dietary Reference Intakes, established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences, if one meal is served, two-thirds if two meals are served, and 100 percent if 3 meals are served; and c. meets all of the requirements of the Older Americans Act and State/Local laws.	3C-2
Congregate Meals	1 meal	Provision, to an eligible client or other eligible participant in a congregate or group setting. A meal which: a. complies with the most recent Dietary Guidelines for Americans (published by the Secretaries of the Department of Health and Human Services and the United States Department of Agriculture); b. provides to each participating individual a minimum of one-third of the Dietary Reference Intakes, established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences, if one meal is served, two-thirds if two meals are served, and 100 percent if 3 meals are served; and c. meets all of the requirements of the Older Americans Act and State/Local laws.	3C-1
Self-Directed Nutrition	N/A	Services and supports directly purchased by an individual through the use of an individual budget allocation to meet their identified nutrition needs.	3C-1, 2

Revised TITLE 3C DEFINITIONS

MBA Service	MBA Unit	MBA Service Definition	Allowable T3 Funds
Nutrition Counseling	1 session per participant	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, chronic illnesses, medications use, or to caregivers, and addresses options and methods for improving nutritional status. Counseling is performed by a licensed dietician or other licensed professional in accordance with state law and policy.	3C-1, 2

Revised 3D Service Definitions CY 2014

MBA Service	MBA Unit	MBA Service Definition	Allowable T3 Funds
Self-Directed Health Promotion Services	N/A	Services and supports directly chosen and purchased by an individual through using an individual budget allocation to meet their identified health promotion service needs.	
Evidence-Based Health Promotion Program	N/A	<p>Evidence-based programs to educate older adults about chronic disabling conditions, prevention and reduction of effects, alcohol and substance abuse reduction, smoking cessation, weight loss and control and stress management. Programs must meet AoA's highest tier of evidence.</p> <p>AoA's Highest Tier Criteria:</p> <ul style="list-style-type: none"> •Undergone Experimental or Quasi-Experimental Design; and •Level at which full translation has occurred in a community site; and •Level at which dissemination products have been developed and are available to the public. 	3D
Health assessment/ screening	1 hour	Administering standard exams, procedures or tests for the purpose of gathering info about a client to determine need and/or eligibility for services. Preadmission screening, routine health screening (blood pressure, glaucoma, cholesterol, cancer, vision, hearing & diabetes) and mental health screening activities are included. Assessments/screenings must be conducted by a credentialed health professional to meet AoA's minimal tier of evidence.	3B, 3D
Home Injury Control Services	1 hour	Screening of high-risk home environments & provision of educational programs on injury prevention (including fall & fracture prevention) in the home environment. This funding is for screening & education. It may not be used to pay for home modification & repair (e.g. building ramps, specialized equipment, etc.). Home Injury Control Services must be conducted by a credentialed professional to meet AoA's minimal	3D

**Revised 3D Service Definitions
CY 2014**

MBA Service	MBA Unit	MBA Service Definition	Allowable T3 Funds
Medication management and screening	1 hour	Prevent incorrect medication and adverse drug reactions. Allowable services include: (1) Group education sessions to increase awareness about proper medication usage, safety and storage issues, drug interactions, side effects and other related information and (2) 1-to-1 medication screening and counseling sessions to review medications, identify drug interactions, potential side effects and address individual questions and concerns and referral to physicians. These services must be conducted by a credentialed health professional to meet AoA's minimal tier of evidence.	3D
Nutrition Education	1 session per participant	A program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information and instruction to participants, caregivers, or participants and caregivers in a group or individual setting. Sessions must be conducted by a credentialed professional to meet AoA's minimal tier of evidence.	3C, 3D

**Revised 3E Service Definitions
Effective CY 2014**

MBA Service	MBA Unit	MBA Service Definition
Self-Directed Caregiver Support Services	N/A	Services and supports directly chosen and purchased by an individual through using an individual budget allocation to meet their identified caregiver support service needs.
Caregiver Counseling	1 session per participant	<p>Services under this category assist family caregivers in making decisions and solving problems related to their caregiving roles. This includes: individual or family counseling, coaching, support groups, training and education, and self-directed support services. These services may be provided in person, by telephone or via the internet depending on the needs of the caregiver/s.</p> <p><i>Individual or Family Counseling</i> : Assistance provided to caregivers in making decisions and solving problems related to their caregiver roles. Counseling may include: identification of needs and preferences, development of individualized approaches and plans, problem solving, decision support, service planning and coordination, access assistance and referrals; exploring personal lifestyle and the impact of caregiving on health status, relationships and finances. Developing an informal support network.</p>

Revised 3E Service Definitions Effective CY 2014

		<p><i>Coaching/Consulting</i> : An individualized support service that equips caregivers with the knowledge, skills and tools to perform their caregiving role while achieving a balanced lifestyle.</p> <p>At minimum, the caregiver coach/consultant service includes a comprehensive caregiver assessment to identify the caregiver’s needs, and values, and strengths related to their caregiving role, and development of a customized plan that includes goal setting, and problem solving, coaching, and ongoing support to reach established goals. Support may be provided as education, skills development including self-advocacy, coping and disease management; self-care skills, managing difficult behaviors, and creating an informal support network; coaching skills such as cognitive reframing, crisis management, problem solving, family meetings and resource information.</p> <p>Title III-E funded CCs will conduct a caregiver assessment on those caregivers receiving ongoing support. This assessment will address the caregiver’s needs, risk factors, strengths and abilities, and informal support network,-as well as, key domains and constructs outlined in Caregiver Assessment: Principles, Guidelines and Strategies found at: http://www.caregiver.org/caregiver/jsp/content/pdfs/v1_consensus.pdf. The assessment tool will include a validated stress/burden and depression measure with follow up strategies and support to improve individual outcomes.</p> <p>Caregiver coaches/consultants meet state Title III-E Caregiver Coach Consultant standards and competencies [Revised 08.17.10 07.05.07], complete the Caregiver Coaching/Consulting basic training using state owned curriculum, and participate in state or locally sponsored coach training.</p>
		<p><i>Support Groups</i>: Group sessions that offer caregiver education, information about community resources, or emotional support and networking with other caregivers. Title III-E funded support groups must include an educational component as a part of sessions.</p>

**Revised 3E Service Definitions
Effective CY 2014**

		<p><i>Caregiver Training and Education:</i> Individual or group sessions (Registered service) that build caregiver capacity to provide, manage, and cope with caring for an older adult or other eligible person, and promote or preserve their own health and well-being. These services may include training or education on managing risk factors (e.g., caregiver stress and depression), caregiver role development and identity change, family dynamics, direct care skills, disease management, managing difficult behaviors, communicating with health care providers, navigating health and long-term care systems, building a support network, and financial and legal issues.</p>
Respite	1 hour	<p>Services that offer temporary, substitute care, supervision, support, or living arrangements to older persons in order to provide a brief period of relief or rest for informal caregivers. Respite Care includes: (1) in-home respite; (2) out-of-home respite; and (3) facility-based respite.</p>
		<p><i>In-home Respite :</i> This includes personal care, homemaker, chore, companion, supervision, or nursing care provided by an organization or agency. Trained volunteers may be utilized to provide companionship respite (e.g., assistance with meals, medications reminders and general supervision). Respite volunteers are screened, trained and matched with older adults and supervised by provider.</p>
		<p><i>Out-of-Home Non-Facility Respite :</i> This option may be provided on a group or individual basis and include licensed Adult Day Services, licensed adult foster care, services by a family, friend, neighbor, or volunteer in a non-licensed private residence, or escorted transportation to medical appointments or community activities.</p>
		<p><i>Facility-based Respite:</i> This includes services provided in a licensed nursing facility, hospital, or registered housing site that has services provided by a licensed home care agency.</p>
Supplemental Services	N/A	<p>Services provided on a limited basis to ease the burden of care or to complement the care provided by caregivers. (Note: Funding limited to no more than 20% of Title III-E allocation.)</p>

**Revised 3E Service Definitions
Effective CY 2014**

Access Assistance	1 contact	<p>Service that assists caregivers in obtaining access to available services and resources within their communities. To the maximum extent practicable, it ensures that the individuals receive the services needed by establishing adequate follow-up procedures. Information and assistance to caregivers is an access service, that:</p> <ul style="list-style-type: none"> a. provides individuals with information on services available within the communities; b. links individuals to the services and opportunities that are available within the communities; and c. establishes adequate follow-up procedures. Internet web site hits are to be counted only if information is requested and supplied. These caregiver-related services include outreach, transportation, assisted transportation, legal assistance, and other professional business services required for accessing self-directed services.
Information Services	1 activity	<p>Service for caregivers that provides the public and individuals with information about available resources and services statewide. Note: service units are for activities directed at large audiences of current or potential caregivers (e.g. large group sessions, distribution of consumer materials, media campaigns, caregiver fairs or conferences).</p>