

# **EASTERN SIERRA AREA AGENCY ON AGING**

## **--Meeting of the ADVISORY COUNCIL--**

**Wednesday, October 10, 2018 - 10:00 a.m.-noon**

**In person meeting at**

***437 Old Mammoth Road, Suite Z (Town of Mammoth Lakes Council Chambers)  
Minaret Shopping Center, Second Floor  
Mammoth Lakes, CA***

### **AGENDA**

*For meeting information call (760) 873-3305*

*All members of the public are encouraged to participate in the discussion of any item on the agenda. You will be allowed to speak about each item before the Council takes action on it. Any member of the public may also make comments during the scheduled "Public Comment" period on this agenda concerning any subject related to the ESAAA Advisory Council.*

#### **1. Call to Order**

### **ACTION/DISCUSSION SESSION**

#### **2. Introductions of Advisory Council members and staff**

#### **3. Public Comment**

#### **4. Approval of minutes from April 4, 2018 meeting - ACTION**

Chairperson will: 1) request a motion and a second; 2) ask for discussion; 3) call for the vote.

#### **5. Staff Reports – ACTION**

- A. Keri Oney: ESAAA Services Report for PSA 16 (Inyo and Mono Counties)
- B. Melissa Best Baker: 2018-2019 Budget Allocation Approval - **ACTION**
- C. Marilyn Mann: Senior Legislator Update

#### **6. Suggested 2019 Meeting Dates and Locations for ESAAA Advisory Council:**

**Wednesday, January 23, 2019 – Bishop**  
**Wednesday, April 24, 2019- Bishop**  
**Wednesday, June 26, 2019 – Mammoth Lakes**  
**Wednesday, October 23, 2019 – Mammoth Lakes**

# **Eastern Sierra Area Agency on Aging Advisory Council Meeting**

Sterling Heights Assisted Living, 369 E. Pine Street, Bishop CA 93514

**April 4, 2018**

## **Minutes**

### Advisory Council Members Present:

*Roger Rasche, Rachel Lober, JoAnn Poncho, Karen Hoodman, Inyo County Supervisor Dan Totheroh, Cheryl Isbell via video conference from Walker Senior Center*

### Other Attendees:

*Marilyn Mann, Kerl Oney, Melissa Best-Baker, Paulette Erwin, Kathy Peterson, Mono County Supervisor Fred Stump, Alyson Beaumont, Mono County Supervisor John Peters via video conference from Walker Senior Center.*

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#### **1. Call to Order**

Chairperson Roger Rasche called the meeting to order at 10:09am.

#### **2. Introduction of Advisory Council members and staff**

Each individual announced their name and their role. Quorum was established.

#### **3. Public Comment**

-Chairperson Roger Rasche invited Public Comment. Melissa Best-Baker announced that on Monday night ESAAA received their allocation from CDA for the 18/19 fiscal year. Ms. Best-Baker noted that this allocation has increased by \$37,000 compared to last year.

#### **4. Approval of minutes from February 2018- ACTION**

Roger Rasche asked for approval of the minutes from February 2018. There were no comments or corrections discussed among attendees. Roger Rasche then asked for a motion to approve the minutes. Motion to approve the minutes was made by Inyo County Supervisor Dan Totheroh and seconded by Rachel Lober. Rachel Lober - YES; Roger Rasche - YES; Dan Totheroh - YES; Cheryl Isbell - YES; Joann Pancho - YES; Absent members - Harriet Davis-Stines, Karen Hoodman (absent at time of vote) Phyllis Mikalowsky and Marge Erbeck.

#### **5. Staff Reports**

##### **A. Kerl Oney: Program Report for PSA 16 (Inyo and Mono Counties)**

Kerl Oney provided a verbal report at this meeting and noted that the Grievance and Complaint Policy was accepted by the board and would be submitted to CDA, where it would then be reviewed for approval before it will be put in place throughout Inyo and Mono counties.

Ms. Oney also discussed the corrective action plan that will be submitted to CDA later this week, which reflects the changes to be made after CDA's annual review.

Ms. Oney also informed everyone that Inyo County staff would be attending training for the WISE program this week. Ms. Oney noted that she anticipates offering training to Mono County staff in Walker sometime after the training to help get both counties on track with implementing the same program. Karen Hoodman and Paulette Erwin arrived at 10:19am, during the last portion of Ms. Oney's verbal report.

#### **6. Public Hearing: Annual Update of the Area Plan for PSA 16**

Roger Rasche opened Public Hearing at 10:20am.

Marilyn Mann led the discussion by explaining that holding the Public Hearing at an assisted living facility allows residents, who might not otherwise be able to travel to the meeting to attend with ease.

Ms. Mann then moved forward and began discussing the Title IIIB funds. Ms. Mann explained that these funds are received in a total amount of ~ \$103,000 and are then spread out between Access needs, Homemaker Services and Legal Services. It was agreed upon among the Council Members during the planning process that the following percentages would be utilized as a minimum allotment of the funds- 50% toward Access

(Transportation, Case Management, Information and Assistance, Outreach, Comprehensive Assessment, Health, Mental Health and Public Information), 10% towards Legal Services (Legal Advice, Representation, Assistance to the Ombudsman Program, and Involvement in the Private Bar) and 3% towards Homemaker Services (personal Care, Homemaker, Chore, Adult Day/Health Care, Residential Repairs,/Modifications, Respite Care, Telephone Reassurance and Visiting). These percentages serve as a minimum, thus Inyo and Mono counties are able to allocate more should it be necessary after meeting the minimum allotments. Ms. Mann noted that this is an opportunity for attendees to provide feedback on maintaining these percentages and make considerations for alternate minimum percentage allocations. Mono County Supervisor John Peters asked for clarification on who provides Legal Services. Ms. Mann confirmed that Indian Legal Services is utilized for this purpose. Kathy Peters then inquired about how much of these Legal Services are currently being utilized within Mono County. Ms. Mann noted that primarily the education piece is the main form of legal services being utilized within Inyo County and Mono County. A detailed conversation ensued about providing more information and education on Legal Services within Mono County, especially within the more isolated areas such as Benton and Walker. Kerl Oney noted that she would like to follow up with Kathy Peterson about prioritizing legal service education within Mono County.

Kerl Oney then moved on to discuss the significant rise in need for transportation. Paulette Erwin noted this was most likely due to the lack of specialty physicians in town, which has created a need to travel outside of the area to accommodate medical needs. Karen Hoodman expressed how important this service is to seniors in the community and how she herself has used it in the past to get to medical appointments. Mono County Supervisor Fred Stump noted that based on how high the demand is; we should continue to look for ways to support this need beyond allocated funds. Ms. Mann then noted that we do receive a contribution from local transportation services as a supplement for this program. Mr. Stump then suggested that a presentation to the transportation commission by ESAAA might aid in acquiring additional funding and donations to support this need. The group agreed that this could be a very valuable exercise and continued follow up and planning should be discussed. Ms. Mann then asked the Advisory Council if they would like to sustain the current priority percentages for allocated funds. The group agreed to maintain the percentages in the Area Plan Update.

Ms. Mann then asked if there were any further comments or discussions to follow up on. Mr. Stump expressed his appreciation to Inyo County for allowing Mono County to purchase meals, as the need continues to increase. Ms. Mann noted that this partnership seems to be working well.

Roger Rashe closed the Public Hearing at 10:46am.

#### **7. Advisory Council Vote to approve Area Plan Update-ACTION**

Roger Rashe then asked for a motion to approve the Area Plan Update to the Governing Board. Motion to approve was made by Karen Hoodman and seconded by Inyo County Supervisor Dan Tothoroh. Motion carried with votes as follows: Karen Hoodman – YES; Roger Rasche – YES; Dan Tothoroh – YES; Cheryl Isball – YES; Joann Pancho – YES; and Rachel Lober – YES. Absent members – Harriet Davis-Stines, Phyllis Mikalowsky and Marge Erbeck

#### **8. Suggested 2018 Meeting Dates and Locations for ESAAA Advisory Council**

The suggested meeting dates Wednesday, June 20, 2018- Mammoth; Wednesday, October 10, 2018- Mammoth Lakes were tentatively set.

#### **9. Meeting Adjourned**

Roger Rasche adjourned the meeting at 10:50 a.m.

# ESAAA Services Report

## July 1, 2017 through March 31, 2018

### Senior Sites and Days Congregate Meals Provided

|              |                                      |
|--------------|--------------------------------------|
| Big Pine     | Monday-Wednesday                     |
| Bishop       | Monday, Tuesday, Thursday and Friday |
| Independence | Friday                               |
| Lone Pine    | Monday-Thursday                      |
| Tecopa       | Monday-Friday                        |
| Walker       | Monday-Friday                        |

### Services Provided

| Service Area: | Congregate Meals |                  | Home Delivered Meals |                  | Non-Registered<br>(Non-Seniors/One-Time Visitors) |
|---------------|------------------|------------------|----------------------|------------------|---------------------------------------------------|
|               | Number Served    | Units of Service | Number Served        | Units of Service | Units of Service                                  |
| Big Pine      | 18               | 977              | 5                    | 760              | 0                                                 |
| Bishop        | 136              | 6314             | 58                   | 6892             | 266                                               |
| Independence  | 10               | 191              | 12                   | 1776             | 0                                                 |
| Lone Pine     | 96               | 5109             | 57                   | 7418             | 98                                                |
| Tecopa        | 53               | 1474             | 13                   | 1604             | 126                                               |
| Walker        | 82               | 2625             | 71                   | 8938             | 43                                                |
| <b>Total</b>  | <b>395</b>       | <b>16690</b>     | <b>216</b>           | <b>27388</b>     | <b>533</b>                                        |

### Home Delivered Meals Waiting List (Inyo County Only)

-3- as of 6/9/2018

| Service Area: | Assisted Transportation |                  | Respite Homemaker |                  |
|---------------|-------------------------|------------------|-------------------|------------------|
|               | Number Served           | Units of Service | Number Served     | Units of Service |
| Big Pine      | 0                       | 0                | 0                 | 0                |
| Bishop        | 12                      | 142              | 2                 | 90               |
| Independence  | 0                       | 0                | 0                 | 0                |
| Lone Pine     | 5                       | 22               | 0                 | 0                |
| Tecopa        | 1                       | 2                | 0                 | 0                |
| Walker        | 12                      | 150              | 0                 | 0                |
| <b>Total</b>  | <b>30</b>               | <b>316</b>       | <b>2</b>          | <b>90</b>        |

  

| Service Area: | Respite Personal Care |                  | Caregiver Assessment/Counseling |                  |
|---------------|-----------------------|------------------|---------------------------------|------------------|
|               | Number Served         | Units of Service | Number Served                   | Units of Service |
| Big Pine      | 0                     | 0                | 0                               | 0                |
| Bishop        | 3                     | 31               | 0                               | 0                |
| Independence  | 0                     | 0                | 0                               | 0                |
| Lone Pine     | 0                     | 0                | 0                               | 0                |
| Tecopa        | 0                     | 0                | 0                               | 0                |
| Walker        | 0                     | 0                | 0                               | 0                |
| <b>Total</b>  | <b>3</b>              | <b>31</b>        | <b>0</b>                        | <b>0</b>         |

**Non Registered Services**  
(Services Not Tracked to Specific Client)

| Type of Service                                                               | Units of Service Provided |
|-------------------------------------------------------------------------------|---------------------------|
| Transportation (Bus Passes – Distributed out of Lone Pine, Bishop and Walker) | 6260                      |
| Nutrition Education                                                           | 1318                      |
| Information and Assistance                                                    | 621                       |
| Telephone Reassurance (See Below)                                             | 126                       |
| Healthy IDEAS (transitioning to WISE)                                         | Pending                   |

**Long Term Care Ombudsman Services**

| Activities Provided                                    | QTR1<br>Units        | QTR2<br>Units        | QTR3<br>Units        | QTR4<br>Units | YTD<br>Units          |
|--------------------------------------------------------|----------------------|----------------------|----------------------|---------------|-----------------------|
| Skilled Nursing Facility (SNF) Visits*                 |                      |                      |                      |               |                       |
| Residential Care Facilities for Elderly (RCFE) Visits* | SNF – 24<br>RCFE - 4 | SNF – 18<br>RCFE - 5 | SNF – 17<br>RCFE - 4 |               | SNF – 59<br>RCFE - 13 |
| Information and Referral                               | 17                   | 24                   | 21                   |               | 62                    |
| Facility Consultation                                  | 8                    | 22                   | 14                   |               | 44                    |
| Community Education                                    | 3                    | 2                    | 0                    |               | 5                     |
| Facility Staff Training                                | 0                    | 3                    | 0                    |               | 3                     |
| Resident Council Facilitation                          | 5                    | 4                    | 4                    |               | 13                    |
| Ombudsman Training                                     | 1                    | 0                    | 2                    |               | 3                     |
| Witness Advance Directives                             | 3                    | 4                    | 2                    |               | 9                     |
| Complaint Investigation and Resolution at SNF**        | 14                   | 15                   | 19                   |               | 48                    |
| Complaint Investigation and Resolution at RCFE**       | 5                    | 6                    | 5                    |               | 16                    |
| Work with Media                                        | 0                    | 1                    | 0                    |               | 1                     |

\* Non-Complaint Related Visits – State Minimum Requirement is 1 Visit Per Quarter

\*\* Each Investigation averages 3-4 Visits to Facility with First Response Occurring Within Two Days

**Contracted Services**

| Legal Services                                     |                                             |      |                  |
|----------------------------------------------------|---------------------------------------------|------|------------------|
| July 1, 2017<br>through<br>September 30,<br>2017   | Unduplicated Count for Quarter              | 7    | <b>YTD-Units</b> |
|                                                    | Total Cases Closed in Quarter               | 5    |                  |
|                                                    | Total Units of Service for Quarter (1 hour) | 38.2 | 38.2             |
| October 1, 2017<br>through<br>December 31,<br>2017 | Unduplicated Count for Quarter              | 6    |                  |
|                                                    | Total Cases Closed in Quarter               | 12   |                  |
|                                                    | Total Units of Service for Quarter (1 hour) | 45.4 | 83.6             |
| January 1, 2018<br>through<br>March 31, 2018       | Unduplicated Count for Quarter              | 11   |                  |
|                                                    | Total Cases Closed in Quarter               | 6    |                  |
|                                                    | Total Units of Service for Quarter (1 hour) | 84.6 | 168.2            |
| April 1, 2018<br>through<br>June 30, 2018          | Unduplicated Count for Quarter              |      |                  |
|                                                    | Total Cases Closed in Quarter               |      |                  |
|                                                    | Total Units of Service for Quarter (1 hour) |      |                  |

## Types of Activities Offered at Senior Sites

Bingo  
Birthday Recognitions  
Theme Activities (e.g. Valentines, St. Patrick's...)  
Exercise  
AARP Tax Assistance  
Blood Pressure Checks  
Wii Bowling  
Scrabble  
Educational Activities  
Movie Mondays  
Crafts  
Commodities Distribution  
Medi-Cal Managed Care Outreach  
Cal Fresh Outreach  
Computer/Internet Access  
Nutrition Education  
Prevention Activities

Report Prepared By:  
Keri Oney  
Inyo County HHS, Aging Services

Exhibit B - Budget Detail, Payment Provisions, and Closeout

AREA PLAN  
Budget Display  
Fiscal Year 2018/19

Eastern Sierra Area Agency on Aging

|                                     | OTO-SN         |                | Inyo           | Mono          | FY 17/18                  | FY 18/19        | FY 17/18                  | FY 18/19        | Net           |
|-------------------------------------|----------------|----------------|----------------|---------------|---------------------------|-----------------|---------------------------|-----------------|---------------|
|                                     | Baseline       | Total          | County         | County        | Inyo Planning Allocations | Inyo Difference | Mono Planning Allocations | Mono Difference | Change        |
| <b>Supportive Services</b>          |                |                |                |               |                           |                 |                           |                 |               |
| Legal                               | 20,000         | 20,000         | 20,000         | -             | 20,000                    | -               | -                         | -               | -             |
| 0.2 I&A                             | 17,502         | 17,502         | 17,502         | -             | 15,487                    | 2,015           | -                         | -               | 2,015         |
| 0.16 Transportation (77/23)         | 13,127         | 13,127         | 10,108         | 3,019         | 9,805                     | 503             | 2,869                     | 150             | 853           |
| 0.6 Assisted Transportation (86/14) | 51,483         | 51,483         | 44,132         | 7,351         | 42,910                    | 1,222           | 6,985                     | 366             | 1,588         |
| 0.05 Telephone Reassurance          | 5,400          | 5,400          | 5,400          | -             | 5,302                     | 98              | -                         | -               | 98            |
| Total Supportive Services           | 107,512        | 107,512        | 97,142         | 10,370        | 93,304                    | 3,838           | 9,854                     | 516             | 4,354         |
| <b>Ombudsman</b>                    |                |                |                |               |                           |                 |                           |                 |               |
| Federal Title IIIB                  | 15,077         | 15,077         | 15,077         | -             | 15,478                    | (401)           | -                         | -               | (401)         |
| Federal Title VII Ombudsman         | 19,275         | 19,275         | 19,275         | -             | 19,276                    | (1)             | -                         | -               | (1)           |
| General Fund IIIB                   | 8,939          | 8,939          | 8,939          | -             | 8,945                     | (6)             | -                         | -               | (6)           |
| Public Health L & C Program         | 3,576          | 3,576          | 3,576          | -             | 3,578                     | (2)             | -                         | -               | (2)           |
| State Health Facilities Citation    | 1,206          | 1,206          | 1,206          | -             | 2,324                     | (1,118)         | -                         | -               | (1,118)       |
| SNF Quality & Accountability        | 16,985         | 16,985         | 16,985         | -             | 16,995                    | (10)            | -                         | -               | (10)          |
| Total Ombudsman                     | 65,058         | 65,058         | 65,058         | -             | 66,596                    | (1,538)         | -                         | -               | (1,538)       |
| <b>Congregate Nutrition (84/16)</b> |                |                |                |               |                           |                 |                           |                 |               |
| Federal Title IIIC1                 | 119,846        | 119,846        | 100,603        | 19,143        | 122,305                   | (21,802)        | 23,298                    | (4,153)         | (26,958)      |
| General Fund C1                     | 82,457         | 82,457         | 69,284         | 13,193        | 44,677                    | 24,587          | 8,510                     | 4,683           | 29,276        |
| NSIP C1                             | 14,618         | 14,618         | 12,279         | 2,338         | 12,860                    | (581)           | 2,449                     | (110)           | (691)         |
| Total Congregate Nuti               | 216,721        | 216,721        | 182,046        | 34,675        | 179,842                   | 2,204           | 34,255                    | 420             | 2,624         |
| <b>Home-Delivered Meals (83/17)</b> |                |                |                |               |                           |                 |                           |                 |               |
| Federal Title IIIC2                 | 93,903         | 93,903         | 77,939         | 15,964        | 80,615                    | 17,324          | 12,415                    | 3,549           | 20,673        |
| General Fund C2                     | 176,263        | 176,263        | 146,298        | 29,965        | 130,264                   | 18,034          | 26,681                    | 3,284           | 19,316        |
| NSIP C2                             | 24,901         | 24,901         | 20,668         | 4,233         | 26,807                    | (6,139)         | 5,491                     | (1,258)         | (7,397)       |
| Total Home Delivered                | 295,067        | 295,067        | 244,908        | 50,161        | 217,686                   | 27,220          | 44,587                    | 5,574           | 32,784        |
| <b>Disease Prevention</b>           |                |                |                |               |                           |                 |                           |                 |               |
| Federal Title IIID                  | 2,723          | 2,723          | 2,723          | -             | 2,669                     | 54              | -                         | -               | 54            |
| Total Disease Prevent               | 2,723          | 2,723          | 2,723          | -             | 2,669                     | 54              | -                         | -               | 54            |
| <b>Family Caregiver</b>             |                |                |                |               |                           |                 |                           |                 |               |
| Federal Title IIIE                  | 18,805         | 18,805         | 18,805         | -             | 19,393                    | (588)           | -                         | -               | (588)         |
| Total Family Caregiva               | 18,805         | 18,805         | 18,805         | -             | 19,393                    | (588)           | -                         | -               | (588)         |
| <b>Elder Abuse</b>                  |                |                |                |               |                           |                 |                           |                 |               |
| Federal Title VII Elder Abuse Pre   | 609            | 609            | 609            | -             | 685                       | (76)            | -                         | -               | (76)          |
| Total Elder Abuse                   | 609            | 609            | 609            | -             | 685                       | (76)            | -                         | -               | (76)          |
| <b>Administration</b>               |                |                |                |               |                           |                 |                           |                 |               |
| Federal Title IIIB                  | 19,081         | 19,081         | 19,081         | -             | 18,553                    | 528             | -                         | -               | 528           |
| Federal Title IIIC1                 | 19,079         | 19,079         | 19,079         | -             | 23,233                    | (4,154)         | -                         | -               | (4,154)       |
| Federal Title IIIC2                 | 14,974         | 14,974         | 14,974         | -             | 11,893                    | 3,281           | -                         | -               | 3,281         |
| Federal Title IIIE                  | 8,262          | 8,262          | 8,262          | -             | 7,767                     | 485             | -                         | -               | 485           |
| General Fund C1                     | 103            | 103            | 103            | -             | 110                       | (7)             | -                         | -               | (7)           |
| General Fund C2                     | 28             | 28             | 28             | -             | 29                        | (1)             | -                         | -               | (1)           |
| Total Administration                | 61,517         | 61,517         | 61,517         | -             | 61,385                    | 132             | -                         | -               | 132           |
| <b>Grand Total - All Funds</b>      | <b>768,012</b> | <b>768,012</b> | <b>672,805</b> | <b>95,207</b> | <b>641,560</b>            | <b>31,245</b>   | <b>66,696</b>             | <b>6,511</b>    | <b>37,758</b> |
| <b>Funding Summary</b>              |                |                |                |               |                           |                 |                           |                 |               |
| Federal Funds                       | 478,455        | 478,455        | 426,406        | 52,049        | 434,638                   | (8,232)         | 53,905                    | (1,456)         | (9,668)       |
| General Fund                        | 267,790        | 267,790        | 224,632        | 43,158        | 184,025                   | 40,607          | 35,191                    | 7,907           | 48,574        |
| Public Health L & C Program         | 3,576          | 3,576          | 3,576          | -             | 3,578                     | (2)             | -                         | -               | (2)           |
| SNF Quality & Accountability        | 16,985         | 16,985         | 16,985         | -             | 16,995                    | (10)            | -                         | -               | (10)          |
| Special Deposit                     | 1,206          | 1,206          | 1,206          | -             | 2,324                     | (1,118)         | -                         | -               | (1,118)       |
|                                     | 768,012        | 768,012        | 672,805        | 95,207        | 641,560                   | 31,247          | 66,696                    | 6,511           | 37,758        |

STATE OF CALIFORNIA  
CALIFORNIA DEPARTMENT OF AGING  
AREA PLAN BUDGET  
COA 122 (REV 03/2018)



TITLE III ADMIN AND TITLE III PROGRAMS COSTS SUMMARY

| BUDGET PERIOD: July 1, 2018 - June 30, 2019 |     |           |        |                 |         |                   |              |              |                  |
|---------------------------------------------|-----|-----------|--------|-----------------|---------|-------------------|--------------|--------------|------------------|
| AAA DIRECT SERVICE                          |     |           |        |                 |         |                   |              |              |                  |
| COST CATEGORIES                             |     |           |        |                 |         |                   |              |              |                  |
|                                             | (a) | Area Plan | (b)    | ORIGINAL        | (c)     | REVISION #        | CONTRACT NO. | AP-1819-16   | DATE: 5/22/18    |
|                                             |     | Admin     |        | III B           |         | III C-1           | III C-2      | III D        | PSA #16          |
|                                             |     |           |        | Supportive Svcs |         | Comprehensive Nur | Home Del Nur | Disease Prev | Family Caregiver |
|                                             |     |           |        |                 |         |                   |              |              | Total            |
|                                             |     |           |        |                 |         |                   |              |              | Title III        |
| 1. Personnel                                | (+) | CASH      | 65,222 | 103,667         | 120,809 | 161,374           | 2,571        | 22,915       | 476,558          |
|                                             |     | IN-KIND   | 5,000  | 0               | 0       | 0                 | 0            | 5,992        | 10,992           |
| 2. Staff Travel                             | (+) | CASH      | 933    | 3,003           | 34      | 34                |              |              | 4,004            |
|                                             |     | IN-KIND   |        |                 |         |                   |              |              | 0                |
| 3. Staff Training                           | (+) | CASH      |        |                 |         |                   |              |              | 0                |
|                                             |     | IN-KIND   |        |                 |         |                   |              |              | 0                |
| 4. Property / Equipment                     | (+) | CASH      | 0      | 0               | 0       | 0                 | 0            | 0            | 0                |
|                                             |     | IN-KIND   |        |                 |         |                   |              |              | 0                |
| 5. Vendor / Consultant                      | (+) | CASH      |        |                 |         |                   |              |              | 0                |
|                                             |     | IN-KIND   |        |                 |         |                   |              |              | 0                |
| 6. Food Costs                               | (+) | CASH      |        |                 | 61,316  | 81,280            |              |              | 142,596          |
|                                             |     | IN-KIND   |        |                 |         |                   |              |              | 0                |
| 7. Other Costs                              | (+) | CASH      | 12,926 | 23,964          | 37,490  | 41,788            | 100          | 583          | 116,851          |
|                                             |     | IN-KIND   |        |                 |         |                   |              |              | 0                |
| 8. Allocated Costs*                         | (+) | CASH      | 235    | 2,776           | 2,153   | 2,876             | 46           | 408          | 8,494            |
|                                             |     | IN-KIND   |        |                 |         |                   |              |              | 0                |
| 9. AREA AGENCY DIRECT COSTS                 | (=) | CASH      | 79,316 | 133,410         | 221,802 | 267,352           | 2,717        | 23,916       | 748,513          |
|                                             |     | IN-KIND   | 5,000  | 0               | 0       | 0                 | 0            | 5,992        | 10,992           |
| 10. Indirect Costs                          | (+) | CASH      | 143    | 227             | 2,373   | 3,093             | 6            | 51           | 5,893            |
|                                             |     | IN-KIND   |        |                 |         |                   |              |              | 0                |
| 11. TOTAL AREA AGENCY COSTS                 | (=) | CASH      | 79,459 | 133,637         | 224,175 | 290,445           | 2,723        | 23,967       | 754,406          |
|                                             |     | IN-KIND   | 5,000  | 0               | 0       | 0                 | 0            | 5,992        | 10,992           |
| 12. Subrecipient Contractor Services        | (+) | CASH      |        | 86,884          | 99,545  | 164,714           | 0            | 0            | 350,143          |
|                                             |     | IN-KIND   |        | 0               | 0       | 0                 | 0            | 0            | 0                |
| 13. TOTAL TITLE III                         | (=) | CASH      | 79,459 | 219,521         | 323,720 | 455,159           | 2,723        | 23,967       | 1,104,549        |
|                                             |     | IN-KIND   | 5,000  | 0               | 0       | 0                 | 0            | 5,992        | 10,992           |
| 14. TOTAL CASH & IN-KIND                    | (=) |           | 84,459 | 219,521         | 323,720 | 455,159           | 2,723        | 29,959       | 1,115,541        |

Payment Method: Reimbursement [X] Advance [ ]

HHS Approved Indirect Cost Rate(s):

AREA PLAN BUDGET APPROVAL

|                              |        |                              |        |
|------------------------------|--------|------------------------------|--------|
| Program Fiscal Team Analyst: | Date:  | Program Fiscal Team Manager: | Date:  |
| <i>[Signature]</i>           | 6/1/18 | <i>[Signature]</i>           | 6/1/18 |

\* Must submit Allocation plan with Area Plan Budget

STATE OF CALIFORNIA  
CALIFORNIA DEPARTMENT OF AGING  
AREA PLAN BUDGET  
CDA 122 (REV 03/2018)



TITLE VII, SPECIAL OMBUDSMAN AND TOTAL COSTS SUMMARY

| BUDGET PERIOD: JULY 1, 2018 - June 30, 2019 |         |                            |                  |                          |        |               |        |           |       |
|---------------------------------------------|---------|----------------------------|------------------|--------------------------|--------|---------------|--------|-----------|-------|
| AAA DIRECT SERVICE                          |         | DO ORIGINAL / 1 REVISION # |                  | CONTRACT NO.: AP-1819-16 |        | DATE: 5/22/18 |        | PSA #16   |       |
| COST CATEGORIES                             |         | (a)                        | (b)              | (c)                      | (d)    | (e)           | (f)    | (g)       | Total |
|                                             |         | Ombudsman                  | Elder Abuse Prev | Title III & VII          | PH L&C | SHE Ctr. Per. | SNFOAF | Area Plan |       |
| 1. Personnel                                | CASH    | 18,688                     | 0                | 495,251                  | 3,576  | 1,134         | 15,067 | 516,028   |       |
|                                             | IN-KIND | 0                          | 0                | 10,992                   | 0      | 0             | 0      | 10,992    |       |
| 2. Staff Travel                             | CASH    |                            |                  | 4,004                    |        |               |        | 4,004     |       |
|                                             | IN-KIND |                            |                  | 0                        |        |               |        | 0         |       |
| 3. Staff Training                           | CASH    |                            |                  | 0                        |        |               |        | 0         |       |
|                                             | IN-KIND |                            |                  | 0                        |        |               |        | 0         |       |
| 4. Property / Equipment                     | CASH    | 0                          | 0                | 0                        | 0      | 0             | 0      | 0         |       |
|                                             | IN-KIND |                            |                  | 0                        |        |               |        | 0         |       |
| 5. Vendor / Consultant Agreements           | CASH    |                            |                  | 0                        |        |               |        | 0         |       |
|                                             | IN-KIND |                            |                  | 0                        |        |               |        | 0         |       |
| 6. Food Costs                               | CASH    |                            |                  | 142,596                  |        |               |        | 142,596   |       |
|                                             | IN-KIND |                            |                  | 0                        |        |               |        | 0         |       |
| 7. Other Costs                              | CASH    | 249                        | 609              | 117,719                  |        | 50            | 525    | 118,254   |       |
|                                             | IN-KIND |                            |                  | 0                        |        |               |        | 0         |       |
| 8. Allocated Costs*                         | CASH    | 333                        |                  | 8,827                    |        | 20            | 350    | 9,197     |       |
|                                             | IN-KIND |                            |                  | 0                        |        |               |        | 0         |       |
| 9. AREA AGENCY DIRECT COSTS                 | CASH    | 19,275                     | 609              | 786,397                  | 3,576  | 1,206         | 16,842 | 790,119   |       |
|                                             | IN-KIND | 0                          | 0                | 10,992                   | 0      | 0             | 0      | 10,992    |       |
| 10. Indirect Costs                          | CASH    |                            |                  | 5,883                    |        | 2             | 43     | 5,938     |       |
|                                             | IN-KIND |                            |                  | 0                        |        |               |        | 0         |       |
| 11. TOTAL AREA AGENCY COSTS                 | CASH    | 19,275                     | 609              | 774,290                  | 3,576  | 1,206         | 18,985 | 796,057   |       |
|                                             | IN-KIND | 0                          | 0                | 10,992                   | 0      | 0             | 0      | 10,992    |       |
| 12. Subrecipient Contractor Services        | CASH    |                            |                  | 350,143                  |        |               |        | 350,143   |       |
|                                             | IN-KIND |                            |                  | 0                        |        |               |        | 0         |       |
| 13. TOTAL AREA PLAN                         | CASH    | 19,275                     | 609              | 1,124,433                | 3,576  | 1,206         | 16,985 | 1,146,200 |       |
|                                             | IN-KIND | 0                          | 0                | 10,992                   | 0      | 0             | 0      | 10,992    |       |
| 14. TOTAL CASH & IN-KIND                    |         | 19,275                     | 609              | 1,135,425                | 3,576  | 1,206         | 16,985 | 1,157,192 |       |

\* - Must submit allocation plan with Area Plan Budget

STATE OF CALIFORNIA  
CALIFORNIA DEPARTMENT OF AGING  
**AREA PLAN BUDGET**  
CDA 122 (REV 03/2018)



Page 3 of 15

**TITLE III, TITLE VII, AND SPECIAL OMBUDSMAN FUNDING SUMMARY**

| BUDGET PERIOD: July 1, 2018 - June 30, 2019 |  |                 |                       |                            |                       |                       |                        |           |           |                 |     |     |  |  |  |
|---------------------------------------------|--|-----------------|-----------------------|----------------------------|-----------------------|-----------------------|------------------------|-----------|-----------|-----------------|-----|-----|--|--|--|
| SECTION A                                   |  | (a)             | (b)                   | (c)                        | (d)                   | (e)                   | (f)                    | (g)       | (h)       | (i)             | (j) | (k) |  |  |  |
| FUNDING SOURCES                             |  | Area Plan Admin | III B Supportive Svcs | III C-1 Congressional Nutr | III C-2 Home Del Nutr | III D Disease Prev    | III E Family Caregiver | PSA #16   |           |                 |     |     |  |  |  |
| 1. Program Income                           |  | CASH            |                       | 1,850                      | 23,210                | 29,140                | 0                      | 0         | 54,000    | Total Title III |     |     |  |  |  |
| 2. NSIP                                     |  | CASH            |                       |                            | 14,618                | 24,901                |                        |           | 36,519    |                 |     |     |  |  |  |
| 3. Intentionally Blank                      |  | CASH            |                       |                            |                       |                       |                        |           | 0         |                 |     |     |  |  |  |
| 4. Non-Matching Contributions               |  | CASH            |                       | 0                          | 0                     | 0                     | 0                      | 0         | 0         |                 |     |     |  |  |  |
| 5. State Funds                              |  | CASH            | 131                   | 8,939                      | 82,457                | 176,283               | 0                      | 0         | 267,790   |                 |     |     |  |  |  |
| 6. Matching Contributions                   |  | CASH            | 17,942                | 86,343                     | 83,789                | 130,952               | 0                      | 5,162     | 324,188   |                 |     |     |  |  |  |
| 7. Federal Funding                          |  | IN-KIND         | 5,000                 | 0                          | 0                     | 0                     | 0                      | 5,992     | 10,992    |                 |     |     |  |  |  |
| 8. TOTAL TITLE III FUNDING                  |  | CASH            | 61,386                | 122,589                    | 119,646               | 93,903                | 2,723                  | 18,805    | 419,052   |                 |     |     |  |  |  |
|                                             |  | CASH            | 79,459                | 219,521                    | 323,720               | 455,159               | 2,723                  | 23,967    | 1,104,549 |                 |     |     |  |  |  |
|                                             |  | IN-KIND         | 5,000                 | 0                          | 0                     | 0                     | 0                      | 5,992     | 10,992    |                 |     |     |  |  |  |
| 9. TOTAL CASH & IN-KIND                     |  |                 | 84,459                | 219,521                    | 323,720               | 455,159               | 2,723                  | 29,959    | 1,115,541 |                 |     |     |  |  |  |
| SECTION B                                   |  | (h)             | (i)                   | (j)                        | (k)                   | (l)                   | (m)                    | (n)       |           |                 |     |     |  |  |  |
| FUNDING SOURCES                             |  | Ombudsman       | Elder Abuse Prev      | Total Title III & VII      | Ombudsman PH L&C      | Ombudsman SHF Ck Pen. | Ombudsman SNFOAF       | Area Plan |           |                 |     |     |  |  |  |
| 10. Program Income                          |  | CASH            |                       | 54,000                     |                       |                       |                        | 54,000    |           |                 |     |     |  |  |  |
| 11. NSIP                                    |  | CASH            |                       | 36,519                     |                       |                       |                        | 36,519    |           |                 |     |     |  |  |  |
| 12. Intentionally Blank                     |  | CASH            |                       | 0                          |                       |                       |                        | 0         |           |                 |     |     |  |  |  |
| 13. Non-Matching Contributions              |  | CASH            |                       | 0                          |                       |                       |                        | 0         |           |                 |     |     |  |  |  |
| 14. State Funds                             |  | CASH            |                       | 267,790                    | 3,576                 | 1,206                 | 16,965                 | 289,557   |           |                 |     |     |  |  |  |
| 15. Matching Contributions                  |  | CASH            |                       | 324,188                    |                       |                       |                        | 324,188   |           |                 |     |     |  |  |  |
| 16. Federal Funding                         |  | IN-KIND         |                       | 10,992                     |                       |                       |                        | 10,992    |           |                 |     |     |  |  |  |
|                                             |  | CASH            | 19,275                | 609                        | 438,936               |                       |                        | 438,936   |           |                 |     |     |  |  |  |
| 17. TOTAL AREA PLAN FUNDING                 |  | CASH            | 19,275                | 609                        | 1,124,433             | 3,576                 | 1,206                  | 16,965    | 1,146,200 |                 |     |     |  |  |  |
|                                             |  | IN-KIND         | 0                     | 0                          | 10,992                | 0                     | 0                      | 0         | 10,992    |                 |     |     |  |  |  |
| 18. TOTAL CASH & IN-KIND                    |  |                 | 19,275                | 609                        | 1,135,425             | 3,576                 | 1,206                  | 16,965    | 1,157,192 |                 |     |     |  |  |  |



**MATCHING CONTRIBUTIONS & ADEQUATE PROPORTION COMPLIANCE**

| BUDGET PERIOD: July 1, 2016 - June 30, 2017 ORIGINAL   REVISION # |        |         |        |                          | CONTRACT NO.: AP-1815-16                                                                                     |         |        |  |  | DATE: 5/22/18 |  |  |  |  | PSA #16 |  |  |  |  |
|-------------------------------------------------------------------|--------|---------|--------|--------------------------|--------------------------------------------------------------------------------------------------------------|---------|--------|--|--|---------------|--|--|--|--|---------|--|--|--|--|
| SECTION A<br>AREA PLAN ADMINISTRATION MATCHING CONTRIBUTIONS      |        |         |        |                          | SECTION B<br>(may include Public Admin Match from Section A)<br>LOCAL PUBLIC AGENCIES MATCHING CONTRIBUTIONS |         |        |  |  |               |  |  |  |  |         |  |  |  |  |
| Source                                                            | Cash   | In-Kind | Total  | Source                   | Cash                                                                                                         | In-Kind | Total  |  |  |               |  |  |  |  |         |  |  |  |  |
| Inyo County General Fund                                          | 9222   | 5000    | 14222  | Inyo County General Fund | 55500                                                                                                        | 5000    | 60500  |  |  |               |  |  |  |  |         |  |  |  |  |
| Inyo LTC                                                          | 8720   |         | 8720   | Inyo LTC                 | 41199                                                                                                        |         | 41199  |  |  |               |  |  |  |  |         |  |  |  |  |
|                                                                   |        |         |        | Mono County Funds        | 220936                                                                                                       |         | 220936 |  |  |               |  |  |  |  |         |  |  |  |  |
|                                                                   |        |         |        |                          |                                                                                                              |         | 0      |  |  |               |  |  |  |  |         |  |  |  |  |
|                                                                   |        |         |        |                          |                                                                                                              |         | 0      |  |  |               |  |  |  |  |         |  |  |  |  |
|                                                                   |        |         |        |                          |                                                                                                              |         | 0      |  |  |               |  |  |  |  |         |  |  |  |  |
|                                                                   |        |         |        |                          |                                                                                                              |         | 0      |  |  |               |  |  |  |  |         |  |  |  |  |
| TOTAL                                                             | 117942 | 5000    | 122942 | TOTAL                    | 317635                                                                                                       | 5000    | 322635 |  |  |               |  |  |  |  |         |  |  |  |  |

| SECTION C<br>MINIMUM MATCHING REQUIREMENTS COMPLIANCE     |                     |                                |                          |                        |
|-----------------------------------------------------------|---------------------|--------------------------------|--------------------------|------------------------|
| ITEM                                                      | (a) Area Plan Admin | (b) Title III B & III C pooled | (c) Title III E Programs | (d) Total Min Matching |
| 1. Costs to be Matched                                    | 84,328              | 622,145                        | 29,959                   | 736,432                |
| 2. Required Matching Percentages                          | 25%                 | 10.53%                         | 25%                      |                        |
| 3. Minimum Required Match                                 | 21,082              | 66,512                         | 7,480                    | 94,084                 |
| 4. Match Budgeted (from Page 3)                           | 22,942              | 301,084                        | 11,164                   | 335,190                |
| 5. Required Local Public Agencies Matching = Line 3 x 25% |                     |                                |                          | 23,521                 |
| <<< Compare to Section B Total                            |                     |                                |                          |                        |

| SECTION D<br>ADEQUATE PROPORTION CALCULATION |               |                            |                                        |  |
|----------------------------------------------|---------------|----------------------------|----------------------------------------|--|
| Priority Services<br>(Do not include OTO)    | Federal Share |                            |                                        |  |
| 5. Information & Assistance                  | 17,502        |                            |                                        |  |
| 8. Case Management                           | 0             |                            |                                        |  |
| 7. Assisted Transportation                   | 51,483        |                            |                                        |  |
| 8. Transportation                            | 13,127        |                            |                                        |  |
| 8. Outreach                                  | 0             |                            |                                        |  |
| 10. Comprehensive Assess.                    | 0             |                            |                                        |  |
| 11. Health                                   | 0             |                            |                                        |  |
| 12. Mental Health                            | 0             |                            |                                        |  |
| 13. Public Information                       | 0             |                            |                                        |  |
| 14. Total Access                             | 82,112        | 76.4%                      | 50.0                                   |  |
| 15. Personal Care                            | 0             |                            |                                        |  |
| 16. Homemaker                                | 0             |                            |                                        |  |
| 17. Chore                                    | 0             |                            |                                        |  |
| 18. Visiting                                 | 0             |                            |                                        |  |
| 19. Respite Care                             | 0             |                            |                                        |  |
| 20. Alzheimer's Day Care                     | 0             |                            |                                        |  |
| 21. Residential Repairs/Mod.                 | 0             |                            |                                        |  |
| 22. Adult Day/Health Care                    | 0             |                            |                                        |  |
| 23. Telephone Reassurance                    | 5,400         | Auto-calculated % of Base* | AAA Approved Percentage from Area Plan |  |
| 24. Total In-Home                            | 5,400         | 5.0%                       | 5.0                                    |  |
| 25. Legal Assistance                         | 20,000        | 18.6%                      | 10.0                                   |  |

| SECTION E<br>ADEQUATE PROPORTION CALCULATION FOR PRIORITY SERVICES    |  |  |  |     |         |
|-----------------------------------------------------------------------|--|--|--|-----|---------|
| BUDGETED BASELINE FUNDS                                               |  |  |  |     |         |
| 1. Total Supportive Services Federal Share                            |  |  |  |     |         |
|                                                                       |  |  |  | (+) | 122,588 |
| 2. Less III B Ombudsman Federal Share                                 |  |  |  |     |         |
|                                                                       |  |  |  | (-) | 15,077  |
| 3. Less III B One-Time-Only                                           |  |  |  |     |         |
|                                                                       |  |  |  | (-) | 0       |
| 4. Equals III B Supportive Services Base Allocation                   |  |  |  |     |         |
|                                                                       |  |  |  | (=) | 107,512 |
| * Total Priority Service Federal Share Divided by III B Base (line 4) |  |  |  |     |         |
| As Approved in the Area Plan                                          |  |  |  |     |         |

| SECTION F<br>OMBUDSMAN MAINTENANCE OF EFFORT CASH FUNDING COMPLIANCE |                  |                |                    |                 |
|----------------------------------------------------------------------|------------------|----------------|--------------------|-----------------|
| Title III B OMBI                                                     |                  |                |                    |                 |
| 15,077                                                               | State III B OMBI | Title VII OMBI | State Special OMBI | Total OMBI Cash |
| 8,939                                                                |                  | 19,275         | 21,767             | 65,058          |

TRANSFER REQUESTS

BUDGET PERIOD: July 1, 2018 - June 30, 2019 ORIGINAL REVISION # CONTRACT NO.: AP-1819-16 DATE: 5/22/18 PSA #16

3 Month Federal Baseline Funding Transfer Requests

| 3 MONTH TRANSFER OF FUNDS REQUEST<br>Transfers Allowed in Original Budget only<br>Federal Funds | Current 3 Month<br>Budget Display<br>Allocations | Must Not Zero<br>Increase<br>Decrease | New 3 Month<br>Budget Display<br>Allocations | JUSTIFICATIONS<br>Provide justification for YTD Transfers of 3 Month Baseline exceeding:<br>30% between IIB & IIC or 40% between IIC-1 & IIC-2<br>Justification: |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------|---------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| III B Admin                                                                                     |                                                  |                                       | 0                                            |                                                                                                                                                                  |
| III C-1 Admin                                                                                   |                                                  |                                       | 0                                            |                                                                                                                                                                  |
| III C-2 Admin                                                                                   |                                                  |                                       | 0                                            |                                                                                                                                                                  |
| III B Ombudsman                                                                                 |                                                  |                                       | 0                                            |                                                                                                                                                                  |
| III B Program                                                                                   |                                                  |                                       | 0                                            |                                                                                                                                                                  |
| III C-1 Program                                                                                 |                                                  |                                       | 0                                            |                                                                                                                                                                  |
| III C-2 Program                                                                                 |                                                  |                                       | 0                                            |                                                                                                                                                                  |
| III E Admin                                                                                     |                                                  |                                       | 0                                            |                                                                                                                                                                  |
| III E Program                                                                                   |                                                  |                                       | 0                                            |                                                                                                                                                                  |
| NSIP C-1 Congr Program                                                                          |                                                  |                                       | 0                                            |                                                                                                                                                                  |
| NSIP C-2 Home Del Program                                                                       |                                                  |                                       | 0                                            |                                                                                                                                                                  |

9 Month Federal Baseline Funding Transfer Requests

| 9 MONTH TRANSFER OF FUNDS REQUEST<br>Do Not Include OTO<br>Federal Funds | Current 9 Month<br>Budget Display<br>Baseline Alloc. | Must Not Zero<br>Increase<br>Decrease | New 9 Month<br>Budget Display<br>Baseline Alloc. | JUSTIFICATIONS<br>Provide justification for YTD Transfers of 9 Month Baseline exceeding:<br>30% between IIB & IIC or 40% between IIC-1 & IIC-2<br>Justification: |
|--------------------------------------------------------------------------|------------------------------------------------------|---------------------------------------|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| III B Admin                                                              |                                                      |                                       | 0                                                |                                                                                                                                                                  |
| III C-1 Admin                                                            |                                                      |                                       | 0                                                |                                                                                                                                                                  |
| III C-2 Admin                                                            |                                                      |                                       | 0                                                |                                                                                                                                                                  |
| III B Ombudsman                                                          |                                                      |                                       | 0                                                |                                                                                                                                                                  |
| III B Program                                                            |                                                      |                                       | 0                                                |                                                                                                                                                                  |
| III C-1 Program                                                          |                                                      |                                       | 0                                                |                                                                                                                                                                  |
| III C-2 Program                                                          |                                                      |                                       | 0                                                |                                                                                                                                                                  |
| III E Admin                                                              |                                                      |                                       | 0                                                |                                                                                                                                                                  |
| III E Program                                                            |                                                      |                                       | 0                                                |                                                                                                                                                                  |
| NSIP C-1 Congr Program                                                   |                                                      |                                       | 0                                                |                                                                                                                                                                  |
| NSIP C-2 Home Del Program                                                |                                                      |                                       | 0                                                |                                                                                                                                                                  |

12 Month Allocated State Funding Transfers

| 12 MONTH TRANSFER OF FUNDS REQUEST<br>Current 12 Month<br>Budget Display<br>Allocations | Must Not Zero<br>Increase<br>Decrease | New 12 Month<br>Budget Display<br>Allocations | JUSTIFICATIONS<br>Provide justification for YTD Transfers of 9 Month Baseline exceeding:<br>30% between IIB & IIC or 40% between IIC-1 & IIC-2<br>Justification: |
|-----------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| State B Ombudsman                                                                       |                                       | 0                                             |                                                                                                                                                                  |
| State C-1 Admin                                                                         |                                       | 0                                             |                                                                                                                                                                  |
| State C-1 Program                                                                       |                                       | 0                                             |                                                                                                                                                                  |
| State C-2 Admin                                                                         |                                       | 0                                             |                                                                                                                                                                  |
| State C-2 Program                                                                       |                                       | 0                                             |                                                                                                                                                                  |

**ASING**

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**SCHEDULE OF IN-KIND PERSONNEL COSTS ADMIN, TITLE III, TITLE VII, AND SPECIAL OMBUDSMAN DIRECT PROGRAM SERVICES**

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**SCHEDULE OF DIRECT (III B) SUPPORTIVE SERVICES, OMBUDSMAN AND OTHER SERVICES**

| SERVICE CATEGORIES                           | BUDGET PERIOD: July 1, 2018 - June 30, 2019 |                    | [X] ORIGINAL [ ] REVISION #    |             | CONTRACT NO.: AP-1819-16 |                 | DATE: 5/22/18              |             | PSA #16 |                   |
|----------------------------------------------|---------------------------------------------|--------------------|--------------------------------|-------------|--------------------------|-----------------|----------------------------|-------------|---------|-------------------|
|                                              | (a) Total Budgeted Costs                    | (b) Program Income | (c) Non-Matching Contributions |             |                          | (e) State Funds | (f) Matching Contributions |             |         | (n) Federal Share |
|                                              |                                             |                    | (c) Cash                       | (d) In-Kind | (d) In-Kind              |                 | (f) Cash                   | (g) In-Kind |         |                   |
| Supportive Services:                         |                                             |                    |                                |             |                          |                 |                            |             |         |                   |
| Personal Care (In-Home)*                     |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Homemaker (In-Home)*                         |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Chore (In-Home)*                             |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Adult Day/Health Care (In-Home)*             |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Case Management (Access)*                    |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Assisted Transportation (Access)*            | 53,132                                      |                    |                                |             |                          |                 | 9,000                      |             |         | 44,132            |
| Transportation (Access)*                     | 33,587                                      |                    |                                |             |                          |                 | 23,479                     |             |         | 10,108            |
| Legal Assistance*                            |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Information & Assistance (Access)*           | 17,502                                      |                    |                                |             |                          |                 |                            |             |         | 17,502            |
| Outreach (Access)*                           |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| <b>Ombudsman</b>                             | <b>24,016</b>                               |                    |                                |             |                          | <b>8939</b>     |                            |             |         | <b>15,077</b>     |
| <b>Other Support Services:</b>               |                                             |                    |                                |             |                          |                 |                            |             |         |                   |
| Program Development                          |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Coordination                                 |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| CARS Data Reporting                          |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Alzheimer's Day Care (In-Home)*              |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Comprehensive Assessment (Access)*           |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Health (Access)*                             |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Mental Health (Access)*                      |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Public Information (Access)*                 |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Residential Repairs/Modifications (In-Home)* |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Respite Care (In-Home)*                      |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Telephone Reassurance (In-Home)*             | 5,400                                       |                    |                                |             |                          |                 |                            |             |         | 5,400             |
| Visiting (In-Home)*                          |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Cash/Material Aid                            |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Community Education                          |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Disaster Preparedness Materials              |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Employment                                   |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Housing                                      |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Interpretation/Translation                   |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Mobility Management                          |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Peer Counseling                              |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Personal Affairs Assistance                  |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Personal/Home Security                       |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Registry                                     |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Senior Center Activities                     |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Emergency Preparedness                       |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Senior Center Staffing                       |                                             |                    |                                |             |                          |                 |                            |             |         | 0                 |
| Total IIS Other Support Services             | 5,400                                       | 0                  | 0                              | 0           | 0                        | 0               | 0                          | 0           | 0       | 5,400             |
| Total Direct III B                           | 133,637                                     | 0                  | 0                              | 0           | 0                        | 8,939           | 32,479                     | 0           | 0       | 92,219            |
| Derivates Priority Services                  |                                             |                    |                                |             |                          |                 |                            |             |         |                   |



**SCHEDULE OF SUBRECIPIENT CONTRACTED (III B) SUPPORTIVE SERVICES, OMBUDSMAN AND OTHER SERVICES**

| BUDGET PERIOD: July 1, 2018 - June 30, 2019  |                          | ORIGINAL   REVISION # |                            | CONTRACT NO.: AP-1819-16 |                 | DATE: 5/22/18          |             | PSA #16           |   |
|----------------------------------------------|--------------------------|-----------------------|----------------------------|--------------------------|-----------------|------------------------|-------------|-------------------|---|
| SERVICE CATEGORIES                           | (a) Total Budgeted Costs | (b) Program Income    | Non-Matching Contributions |                          | (e) State Funds | Matching Contributions |             | (f) Federal Share |   |
|                                              |                          |                       | (c) Cash                   | (d) In-Kind              |                 | (f) Cash               | (g) In-Kind |                   |   |
| Supportive Services:                         |                          |                       |                            |                          |                 |                        |             |                   |   |
| Personal Care (In-Home)*                     |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Homemaker (In-Home)*                         |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Chore (In-Home)*                             |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Adult Day/Health Care (In-Home)*             |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Case Management (Access)*                    |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Assisted Transportation (Access)*            | 38,915                   | 500                   |                            |                          |                 | 31,064                 |             | 7,351             | 0 |
| Transportation (Access)*                     | 14,228                   | 1,150                 |                            |                          |                 | 10,059                 |             | 3,019             | 0 |
| Legal Assistance*                            | 20,000                   |                       |                            |                          |                 |                        |             | 20,000            | 0 |
| Information & Assistance (Access)*           | 12,741                   |                       |                            |                          |                 | 12,741                 |             |                   | 0 |
| Outreach (Access)*                           |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Ombudsman                                    |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Other Support Services:                      |                          |                       |                            |                          |                 |                        |             |                   |   |
| Alzheimer's Day Care (In-Home)*              |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Comprehensive Assessment (Access)*           |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Health (Access)*                             |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Mental Health (Access)*                      |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Public Information (Access)*                 |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Residential Repairs/Modifications (In-Home)* |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Respite Care (In-Home)*                      |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Telephone Reassurance (In-Home)*             |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Visiting (In-Home)*                          |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Cash/Material Aid                            |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Community Education                          |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Disaster Preparedness Materials              |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Employment                                   |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Housing                                      |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Interpreter/Translation                      |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Mobility Management                          |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Peer Counseling                              |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Personal Affairs Assistance                  |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Personal/Home Security                       |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Registry                                     |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Senior Center Activities                     |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Emergency Preparedness                       |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Senior Center Staffing                       |                          |                       |                            |                          |                 |                        |             |                   | 0 |
| Total Contracted IIIB Other Supp Svcs        | 0                        | 0                     | 0                          | 0                        | 0               | 0                      | 0           | 0                 | 0 |
| Total Contracted IIIB                        | 85,864                   | 1,850                 | 0                          | 0                        | 0               | 53,864                 | 0           | 30,370            | 0 |
| Total Direct IIIB (from Page 9)              | 133,637                  | 0                     | 0                          | 0                        | 0               | 8,939                  | 32,479      | 92,219            | 0 |
| Total III B                                  | 219,521                  | 1,850                 | 0                          | 0                        | 0               | 8,939                  | 86,343      | 122,589           | 0 |
| *Denotes Priority Services                   |                          |                       |                            |                          |                 |                        |             |                   |   |

Denotes Priority Services

STATE OF CALIFORNIA  
CALIFORNIA DEPARTMENT OF AGING  
AREA PLAN BUDGET  
CDA 122 (REV 03/2018)



SCHEDULE OF (III C-1 & III C-2) NUTRITION AND (III D) DISEASE PREVENTION & HEALTH PROMOTION PROGRAMS

| BUDGET PERIOD: July 1, 2018 - June 30, 2019                    |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
|----------------------------------------------------------------|--------------------------|--------------------|----------|-------------------------|----------------------------|-------------|-----------------|------------------------|-------------|-------------------|-------------------|---------|--|--|--|--|--|--|
| ORIGINAL / REVISION #                                          |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| CONTRACT NO.: AP-1819-16                                       |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| DATE: 5/22/18                                                  |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| SERVICE CATEGORIES                                             | (a) Total Budgeted Costs | (b) Program Income | (c) NSIP | (c) Intentionally Blank | Non-Matching Contributions |             |                 | Matching Contributions |             |                   | (1) Federal Share | PSA #16 |  |  |  |  |  |  |
|                                                                |                          |                    |          |                         | (e) Cash                   | (f) In-Kind | (g) State Funds | (h) Cash               | (i) In-Kind | (j) Federal Share |                   |         |  |  |  |  |  |  |
| <b>III C-1 Congregate Programs</b>                             |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| <b>Direct III C-1</b>                                          |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| Congregate Meals                                               | 222,165                  | 15,000             | 12,279   |                         |                            |             | 69,264          | 27,129                 |             |                   | 96,433            |         |  |  |  |  |  |  |
| Nutrition Counseling                                           |                          |                    |          |                         |                            |             |                 |                        |             |                   | 0                 |         |  |  |  |  |  |  |
| Nutrition Education                                            | 2,020                    |                    |          |                         |                            |             |                 |                        |             |                   | 2,020             |         |  |  |  |  |  |  |
| Total Direct III C-1                                           | 224,175                  | 15,000             | 12,279   |                         | 0                          | 0           | 69,264          | 27,129                 | 0           |                   | 100,503           |         |  |  |  |  |  |  |
| <b>Subrecipient Contracted III C-1 Services</b>                |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| Congregate Meals                                               | 99,545                   | 8,210              | 2,339    |                         |                            |             | 13,193          | 56,660                 |             |                   | 19,143            |         |  |  |  |  |  |  |
| Nutrition Counseling                                           |                          |                    |          |                         |                            |             |                 |                        |             |                   | 0                 |         |  |  |  |  |  |  |
| Nutrition Education                                            | 99,545                   | 8,210              | 2,339    |                         | 0                          | 0           | 13,193          | 56,660                 | 0           |                   | 19,143            |         |  |  |  |  |  |  |
| Total III C-1                                                  | 323,720                  | 23,210             | 14,618   |                         | 0                          | 0           | 82,457          | 83,799                 | 0           |                   | 119,646           |         |  |  |  |  |  |  |
| <b>III C-2 Home Delivered Programs</b>                         |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| <b>Direct III C-2</b>                                          |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| Home-Delivered Meals                                           | 287,522                  | 25,000             | 20,668   |                         |                            |             | 143,375         | 20,540                 |             |                   | 77,939            |         |  |  |  |  |  |  |
| Nutrition Counseling                                           | 903                      |                    |          |                         |                            |             | 903             |                        |             |                   | 0                 |         |  |  |  |  |  |  |
| Nutrition Education                                            | 2,020                    |                    |          |                         |                            |             | 2,020           |                        |             |                   | 0                 |         |  |  |  |  |  |  |
| Total Direct III C-2                                           | 290,445                  | 25,000             | 20,668   |                         | 0                          | 0           | 146,298         | 20,540                 | 0           |                   | 77,939            |         |  |  |  |  |  |  |
| <b>Subrecipient Contracted III C-2 Services</b>                |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| Home-Delivered Meals                                           | 162,414                  | 4,140              | 4,233    |                         |                            |             | 27,665          | 110,412                |             |                   | 15,964            |         |  |  |  |  |  |  |
| Nutrition Counseling                                           | 1,150                    |                    |          |                         |                            |             | 1,150           |                        |             |                   | 0                 |         |  |  |  |  |  |  |
| Nutrition Education                                            | 1,150                    |                    |          |                         |                            |             | 1,150           |                        |             |                   | 0                 |         |  |  |  |  |  |  |
| Total Contracted III C-2                                       | 164,714                  | 4,140              | 4,233    |                         | 0                          | 0           | 29,965          | 110,412                | 0           |                   | 15,964            |         |  |  |  |  |  |  |
| Total III C-2                                                  | 455,159                  | 29,140             | 24,901   |                         | 0                          | 0           | 176,263         | 130,952                | 0           |                   | 93,903            |         |  |  |  |  |  |  |
| <b>III D Disease Prevention &amp; Health Promotion Program</b> |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| <b>Direct III D</b>                                            |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| Disease Prev & Health Promotion                                | 2,723                    |                    |          |                         |                            |             |                 |                        |             |                   | 2,723             |         |  |  |  |  |  |  |
| <b>Subrecipient Contracted III D Services</b>                  |                          |                    |          |                         |                            |             |                 |                        |             |                   |                   |         |  |  |  |  |  |  |
| Disease Prev & Health Promotion                                |                          |                    |          |                         |                            |             |                 |                        |             |                   | 0                 |         |  |  |  |  |  |  |
| Total III D                                                    | 2,723                    | 0                  |          |                         | 0                          | 0           |                 |                        | 0           |                   | 2,723             |         |  |  |  |  |  |  |



**SCHEDULE OF FAMILY CAREGIVER SUPPORT PROGRAM SERVICES (III E)**

| BUDGET PERIOD: July 1, 2018 - June 30, 2019    |                          |                    |                            | ORIGINAL <input checked="" type="checkbox"/> REVISION # |                 |                        |             | CONTRACT NO.: AP-1819-18 |             | DATE: 5/22/18     |        | PSA #18 |  |
|------------------------------------------------|--------------------------|--------------------|----------------------------|---------------------------------------------------------|-----------------|------------------------|-------------|--------------------------|-------------|-------------------|--------|---------|--|
| CATEGORIES                                     | (a) Total Budgeted Costs | (b) Program Income | Non-Matching Contributions |                                                         | (e) State Funds | Matching Contributions |             | (f) Cash                 | (g) In-Kind | (h) Federal Share |        |         |  |
|                                                |                          |                    | (c) Cash                   | (d) In-Kind                                             |                 | (f) Cash               | (g) In-Kind |                          |             |                   |        |         |  |
| Direct III E Family Caregivers                 |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   |        |         |  |
| Information Services                           |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Access Assistance                              |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Support Services                               | 18,805                   |                    |                            |                                                         |                 |                        |             |                          |             |                   | 18,805 |         |  |
| Respite Care                                   | 11,154                   |                    |                            |                                                         |                 | 5,162                  | 5,992       |                          |             |                   | 0      |         |  |
| Supplemental Services                          |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Total Direct III E Family Caregivers           | 29,959                   | 0                  | 0                          | 0                                                       | 0               | 5,162                  | 5,992       |                          |             |                   | 18,805 |         |  |
| Direct III E Grandparents                      |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   |        |         |  |
| Information Services                           |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Access Assistance                              |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Support Services                               |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Respite Care                                   |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Supplemental Services                          |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Total Direct III E Grandparents                | 0                        | 0                  | 0                          | 0                                                       | 0               | 0                      | 0           |                          |             |                   | 0      |         |  |
| Total Direct III E                             | 29,959                   | 0                  | 0                          | 0                                                       | 0               | 5,162                  | 5,992       |                          |             |                   | 18,805 |         |  |
| Subrecipient Contracted III E Family Caregiver |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   |        |         |  |
| Information Services                           |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Access Assistance                              |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Support Services                               |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Respite Care                                   |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Supplemental Services                          |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Total Contracted III E Family Caregivers       | 0                        | 0                  | 0                          | 0                                                       | 0               | 0                      | 0           |                          |             |                   | 0      |         |  |
| Subrecipient Contracted III E Grandparents     |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   |        |         |  |
| Information Services                           |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Access Assistance                              |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Support Services                               |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Respite Care                                   |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Supplemental Services                          |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   | 0      |         |  |
| Total Contracted III E Grandparents            | 0                        | 0                  | 0                          | 0                                                       | 0               | 0                      | 0           |                          |             |                   | 0      |         |  |
| Total III E                                    |                          |                    |                            |                                                         |                 |                        |             |                          |             |                   |        |         |  |
|                                                | 29,959                   | 0                  | 0                          | 0                                                       | 0               | 5,162                  | 5,992       |                          |             |                   | 18,805 |         |  |

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\* Home & Comm-Based Projects and Innovative Pilot Projects Require Prior Approval  
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