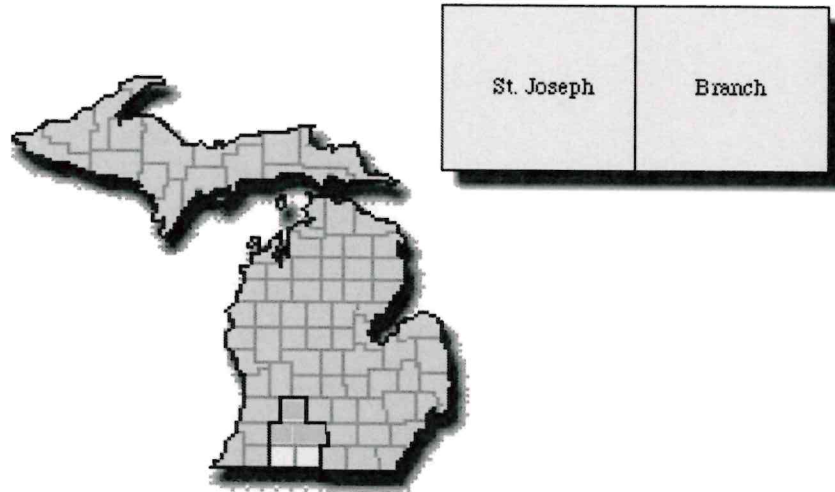


# **FY 2026 ANNUAL IMPLEMENTATION PLAN**

## **BRANCH-ST. JOSEPH AREA AGENCY ON AGING 3-C**



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### **Planning and Service Area**

Branch, St. Joseph

### **Branch-St. Joseph Area Agency on Aging 3-C**

Branch-St. Joseph

Community Health Agency

570 N. Marshall Road

Coldwater, MI 49036

517-278-2538 (phone)

888-615-8009 (toll-free)

517-278-2494 (fax)

Rebecca A. Burns, Health Officer

Laura Sutter, Director

Area Agency on Aging

[www.bhsj.org/aaa](http://www.bhsj.org/aaa)

### **Regional Aging Representative**

**Ashley Ellsworth**

[EllsworthA2@michigan.gov](mailto:EllsworthA2@michigan.gov)

517-294-9680

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**Executive Summary**

**Instructions**

Please include in the Executive Summary a brief description of the following (*\*note - if you need additional space, you may upload a Word document via the Budget and Other Documents tab*):

A. Any substantive changes in priorities, plans, or objectives set by the Area Agency on Aging (AAA) for the use of federal and state funding during FY 2026. If none, indicate, "no" to the question: *"Have there been any substantive changes since the previous year?"*

B. How the AAA educates the public, its partners, and service providers on the Administration for Community Living (ACL) and the ACLS Bureau expectations regarding targeting older adults in the greatest social and/or economic need.

C. Progress made through advocacy efforts to date and focus of advocacy efforts in FY 2026.

D. AAA's successes over the past year, highlights of new services or other topics, as well as any anticipated challenges.

E. Ways in which your agency will support the Veteran population and a description of any partnerships and/or collaborations with Veteran service organizations within your region.

F. Please provide, in the spaces below, information on counties served, Federally Recognized Tribes in your Planning and Service Area (PSA), and accreditations awarded to your AAA.

Please provide demographic data in the chart below for your PSA (using the most currently available data from the American Community Survey (ACS), the Decennial Census Survey, and NAPIS--see chart entitled: *FY 26 AIP Demographic Data* in the Document Library).

Upload the required supplemental document entitled: *Contingency Planning*, addressing a contingency plan for lack of funding or in the event of a government shutdown/continuing resolution, in the Budget and Other Documents section

Have there been substantive changes since the previous year? (If yes, please describe below.)

☐ Yes ☒ No

The Branch-St. Joseph Area Agency on Aging (Region IIIC AAA) mission is to provide a full range of high-quality services, programs and opportunities which promote the independence and dignity of older adults, while supporting those who care for them throughout Branch and St. Joseph Counties. As an autonomous department within the Branch-Hillsdale-St. Joseph Community Health Agency, our agency has held this mission since our designation as an Area Agency on Aging in 1996. We are one of 16 AAAs in the State of Michigan responsible for administering Older Americans Act (OAA) and Older Michiganians Act



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(OMA) funding to address the needs of older adults age 60 and over, and family caregivers living in Branch and St. Joseph Counties.

Our Vision states: We envision inclusive communities filled with enriching activities and opportunities for older adults. Where people who have questions or needs can find assistance and support in a manner that suits their preferences.

Our Values include:

1. We place the people we serve at the center of our operations, honoring their preferences and privacy.
2. We assure efficient use of public and private resources.
3. We develop programs and services using an inclusive process to promote healthy aging and livable communities for all ages.
4. We exhibit strong leadership which responds to changing needs and fosters collaboration and cooperation throughout the communities we serve.
5. We use effective communication to carry out our mission and vision in an open, respectful and unbiased manner.

The two-county planning and service area (PSA) is entirely rural, yet we have a diverse population and a wide continuum of agencies providing supports and services. We also acknowledge diverse and growing community partnerships which continue to develop and thrive. Further, one of our most unique features as an area agency is our organizational structure. We are a division within local public health. The cross-agency collaboration and efficiencies are evident in every aspect of our day -to-day work and proved successful by working alongside a team of public health officials during a pandemic. We continue to thrive as a small but mighty agency.

Our staff of 7 full-time and one part-time employees continue to answer calls in real time. As a core function, we continue person-centered Information and Assistance (I&A), referral and options counseling with families, individuals and professional seeking answers. The No Wrong Door project initiated by MDHHS in fall 2024 has led to a successful regional partnership among our surrounding AAA's (CareWell Services (lead) and Kalamazoo AAA3A) as well as our regional Disability Network partner in southwest Michigan. Collaboration and core functions were the building blocks of our successful grant and we'll endeavor to carry forward a successful project throughout Region IIIC. The NWD project formalizes the provision of options counseling (a component of I&A) and also carries out the State Health Insurance Program (SHIP) at the local level through a new structure.

We will continue to serve vulnerable adults who've been victims of abuse, neglect and/or exploitation through our Victim Assistance Program funded by the Michigan Department of Health and Human Services (MDHHS) Division of Victim Services. Friendly Reassurance calls and Gap Filling services have continued and address unique situations and needs among those individuals who reside alone and without many family supports. Further, the community partnerships that were built as we addressed food insecurity, housing emergencies and service delays during the pandemic have remained intact and further leveraged to support ongoing needs. In collaboration with our public health partners, we continue to educate individuals and our communities about immunizations and support their access to clinics of their choice. Our link with the Community Health Agency clinic division has supported coordinated communication, work with long term care facilities, creating access to services for hard to reach and/or home-bound individuals. These efforts to promote and link individuals to adult immunizations will, forever, be a part of what we do.



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Region IIIC has well-established connections with both County's Office of Veterans Affairs. In Branch County they are co-located in our building which offers the convenience of prompt referral-making and introductions to the aging network. In St. Joseph County, the Veteran's Office is centrally located and, again, convenient for checking in, networking and referral-making when we are close to the county building. AAA staff will be formally trained by the ACLS Bureau and Michigan Veteran's Affairs office in the summer of 2025. This is a welcomed opportunity to learn the dynamics and culture of serving veterans and their families. In FY2026, we will remain a provider for the Battle Creek VA Medical Center under the VA Veteran Directed Home & Community Based Services program which has been a success since 2009 in our PSA. Targeting our resources toward those whom are 60 or greater, in the greatest social and/or economic need, is something we also do every day. Staff time and grant funding are limited, therefore focusing on those who need us the most are at the forefront of our operational goals. At the time of a call or inquiry, we're listening, observing, and responding with respectful questions to understand stated needs. We will continue our efforts to reach those who don't speak English, are of another culture or have been historically under served. Our providers, like us, strive to be open to all individuals seeking information and/or supports and we show this through staff training and the way we offer outreach in our communities. Focusing on certain neighborhoods or attending new community partners' events, for example, are real examples of how we are focusing on our unique regional needs via outreach and education.

The FY 2026 AIP does not outline any significant new priorities, plans or major objectives for the use of Older Americans Act (OAA) or state (Older Michiganians Act) funding during FY 2026. As always, we will continue to work transparently with providers, the ACLS Bureau and our leadership team to address local needs and utilize federal and state funds in an efficient manner. Advocacy efforts are ongoing with our elected officials in the State Legislature and US Congress. We utilize our established relationships with fellow AAAs, Area Agencies on Aging Association of Michigan (4AM), the Michigan Senior Advocates Council and local Advisory Committee members to share our local stories, invite legislators to local events and also participate in home visits when possible. FY 2026 will be a continuation of these efforts, both locally and in Lansing, with legislators and their staff. During FY2025 we spent significant time educating new legislators and re-framing our story as it relates to the effect of pauses in funding and how it affects our administration and ultimately how it affects service provision to older adults. Funding challenges in Region IIIC arose in FY25 as we fully expended ARPA (American Rescue Plan Act) funding early in the fiscal year. This coupled with month-to-month funding awards and pull backs of certain federal sources have hindered service provision and caused disturbances in our network. Waiting lists are affected and continue to grow. Our communication with elected officials will need to continue to share data and paint a picture of the affects of the funding flow.

We remain diligent and committed to serving those greatest in social and/or financial need in a manner that is respectful of their preferences and goals. Working in conjunction with a dynamic array of service providers and community partners at the local level, we intend to maintain high quality and accessible services for all who may seek assistance.

**Planning and Service Area (counties) Served.**

Branch County and St. Joseph County

**Is there a Federally Recognized Tribe within your PSA? (If yes, list below.)**

☐ Yes ☒ No

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Please list any accreditations your AAA has received.

None at this time.

**Demographic Data for PSA**

| Population                                    | Census (most current data available) | AAA Population Served Last Fiscal Year (NAPIS) |
|---|--------------------------------------|--|
| Total Population 60+ (%)                      | 26,700.00                            | 3,686.00                                       |
| <b>Race/Ethnicity 60+ (%)</b>                 |                                      |  |
| a. Black/African American                     | 489.00                               | 35.00  |
| b. Asian                                      | 29.00                                | 4.00   |
| c. White                                      | 25,425.00                            | 3,398.00                                       |
| d. Hispanic/Latino                            | 399.00                               | 25.00  |
| e. Other                                      | 29.00                                | 14.00  |
| Total 60+ Population in Rural areas (%)       | 27,049.00                            | 3,669.00                                       |
| Total 60+ Population at Poverty Level (%)     | 2,355.00                             | 628.00   |
| LGBTQ+ Clients served                         |                                      | 2.00   |
| Total 85+ Population (%)                      | 1,705.00                             | 673.00   |
| Total 60+ Non-English-Speaking Population (%) | 1,120.00                             |  |

Did the AAA upload the required supplemental document addressing a contingency plan for lack of funding or in the event of a government shutdown?

☒ Yes ☐ No



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**County/Local Unit of Government and Tribal Review**

The Michigan Department of Health and Human Services (MDHHS) recognizes the importance of local collaboration including consultation of the complete AIP for each AAA with their county/local unit of government to encourage and foster collaboration between Older Americans Act (OAA) programming and that provided by other non-OAA resources.

MDHHS also has an established relationship of working directly with the Federally Recognized Sovereign Indian Tribes of Michigan (Tribes). As part of this work, MDHHS recognizes the importance of Tribal notification, including consultation of the complete AIP for each AAA within their PSA to encourage and foster collaboration between Title III and Title VI programming as outlined in the OAA.

The AAA must send a notification of the complete AIP to the chairperson of each County Board of Commissioners, and to any Tribes within the Planning and Service Area (PSA) for notification and consultation. Notification can be sent via U.S. Mail or by electronic means, with delivery and signature confirmation, no later than June 20, 2025. For a PSA comprised of a single county or portion of the county, notification of the AIP is to be sent to each local unit of government. AAAs are encouraged to provide a copy of their official press release for public hearing to their county/local unit of government and Tribes within the PSA as well. The AAA may use electronic communication, including e-mail and website-based documents, as an option for local government notification and consultation of the AIP. To employ this option, the AAA must do the following:

- Send a letter through the U.S. Mail, with delivery and signature confirmation, or an email requiring a response confirming receipt to the chief elected official of each appropriate local government advising them of the availability of the final draft AIP on the AAA's website.
- Offer to provide a printed copy of the AIP via U.S. Mail, or an electronic copy via e-mail, if requested.
- Be available to discuss the AIP with local government officials, if requested.
- Request e-mail notification from the local unit of government of their feedback of the AIP or concerns.

**Instructions**

Describe the AAA's efforts, including use of electronic communication, to distribute the AIP to the appropriate county and/or local units of government, and Tribes for notification and consultation, to gain support.

Describe any current and future collaborative efforts with Tribe(s) within your PSA including any anticipated outreach efforts. AAAs, note whether your Policy and Advisory Boards have representation from the Tribe(s) and/or elders within your PSA. If not, describe the AAAs efforts to build and foster relationships with the Tribe(s) to encourage potential representation on these respective boards.

The Branch-St. Joseph Area Agency on Aging FY2026 Annual Implementation Plan final draft will be



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shared with both Branch and St. Joseph County Board of Commissioners once supported by our Advisory Committee and approved by the Branch-Hillsdale-St. Joseph Board of Health. Both Advisory and Board of Health groups have been in discussion about the Plan since February and will be taking formal action at their May meetings. The FY26 AIP Draft was shared on April 15th with the Advisory Committee at their regular meeting. Positive testimony and comments were discussed and shared.

Once the Final Draft of the FY2026 AIP is approved, we will forward the Plan to each County Board of Commissioners via electronic transmission to their respective County Administrators. As in years past, both Boards request an Annual Implementation Plan update at either their working meeting and/or at a regular meeting in June.

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**Public Hearings**

At least one public hearing on the FY 2026 AIP must be held in the PSA. Hearing(s) must be made accessible to all. Persons need not be present at the hearing(s) to provide testimony. E-mail and written testimony must be accepted for at least a 30-day period beginning when the summary of the AIP is made available.

The AAA must post a notice of the public hearing(s) in a manner that can reasonably be expected to inform the public about the hearing(s). Acceptable posting methods include but are not limited to paid notice in at least one newspaper or newsletter with broad circulation throughout the PSA; press releases and public service announcements; and a notice to AAA partners, service provider agencies, older adult organizations, and local units of government. See Operating Standards for AAAs, Section B-2 #3. The public hearing notice should be available at least 30 days in advance of the scheduled hearing. This notice must indicate the availability of a summary of the AIP at least 14 days prior to the hearing, along with information on how to obtain the summary. All components of the AIP should be available for the public hearing(s).

**Instructions**

Complete the chart below regarding your public hearing(s). Include the date, time, number of attendees and the location city and accessibility of each public hearing. Please scan any written testimony (including emails received) as a PDF and upload under the Budget and Other Documents tab.

The AAA should upload a copy of your official notice and/or press release(s) for a public hearing. Please describe the strategy/approach employed to encourage public attendance and testimony on the AIP. Describe all methods used to gain public input and any impacts on the AIP. Describe how the AAA factored the accessibility issues of the service population and others in choosing the format of the meeting.

AAAs are also required to upload document entitled: *Newspaper and Media Outlets Notification List*.

For FY 2026, AAAs please describe how the agency involved the Policy and Advisory Boards with encouraging and promoting participation at the public hearings(s). Did a representative from either the Policy and/or Advisory Board attend the hearing(s).

| Date       | City             | Time     | Barrier Free? | No. of Attendees |
|------------|------------------|----------|---------------|------------------|
| 04/28/2025 | Three Rivers, MI | 10:00 AM | Yes           | 9                |

The Region IIIC AAA utilized multiple methods to encourage public and community partner input on the FY2026 AIP. The Public Hearing was released via formal Press Release on March 27, 2025 to all print and radio news outlets across the two-county PSA. (see list in the document library) Press Releases also go to network television stations who carry national affiliation. Paid advertisements were not sought this year as the pricing is so cost prohibitive. The full Press Release is attached in the "budget and other documents" section of the AIP and complies with Bureau Operating Standards & AIP Instructions. Aging network



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providers, the Board of Health (AAA IIIC Policy Board) and the AAA Advisory Committee were also engaged in and sent notices for the Public Hearings. The FY 2026 AIP Draft (including the budget) was posted on our AAA website along with the Public Hearing listed in the "Upcoming Events" section. Virtual participation in the Public Hearing was also an option. The virtual meeting link was publicized within our Public Notice and posted on our website.

The Public Hearing was hosted at the Three Rivers office of the Community Health Agency at 10:00am on Monday, April 28, 2025. The Hearing began at 10:05am. The Plan was discussed in detail, section by section by the Area Agency on Aging Director. Significant discussion surrounding the federal budget and advocacy efforts took place. A resident and advocate from Branch County shared his perspective and personal experience with his personal advocacy on the budget at both the federal and state levels. Many of his peers on the Michigan Senior Advocates Council are remain both hopeful and concerned with the dissent in Washington DC. The notion of the efficiency of home and community based care was discussed. For decades, the aging network has shared the strong message that home & community based care generally costs approximately \$90/day versus care in a long term care facility/licensed setting being over \$300/day. This message is still true and our efforts need to surround education and sharing our local success stories. Advocates can share their voice at Older Michiganian's Day on May 7th in Lansing or visit the AAA Association of Michigan's website at <https://4ami.org/> to search for legislators and/or develop an advocacy letter.

The group also discussed the loss of the adult day program in Sturgis/St. Joseph County in the winter of 2024. We are looking at developing other alternate ways of offering short term and/or overnight respite for families. The group discussion included support for those creative methods of service provision to support caregivers/families.

Testimony in support of the FY2026 Annual Implementation Plan was received on May 1, 2025 from St. Joseph County Commissioner (and AAA IIIC Advisory Committee member) Rick Shaffer. His testimony is uploaded in the "budget & other documents" tab as well as shared here:

Testimony: 2026 Annual Implementation Plan  
Branch - St. Joseph  
Area Agency on Aging; 3-C

As a St Joseph County Commissioner that serves on the Area Agency on Aging 3C Advisory Committee, it is a pleasure to serve and learn monthly, through reporting, of the wide variety of support services available to seniors in our communities. As a Health Care Provider in my community, I am well aware of many cases where there has been intervention by this Agency where the support that as been provided has been invaluable and perhaps the result may have been an avoidance of Emergency Room and/or the need for more intense senior housing ( i e : Senior Apartment, Adult Foster Care, Skilled Nursing Facilities )

I am confident that as this historical and futuristic Implementation Plan for 2023-2026 is reviewed, it provides for a "firm foundation " for a wide variety of services that will be of great value to all of our communities within it' s jurisdiction.

Rick Shaffer RN



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**Regional Service Definitions**

If the AAA is proposing to fund a new (not previously approved in this multi-year planning cycle) regional service that is not included in the Operating Standards for Service Programs, provide rationale as to why activities cannot be funded under an existing service definition, and information about the proposed service in this section.

**Instructions**

Enter the new regional service name, fund source(s), unit of service, and minimum standards.

**Service Name/Definition**

Rationale (Explain why activities cannot be funded under an existing service definition.)

| Service Category                   | Fund Source            |                 | Unit of Service |
|------------------------------------|------------------------|-----------------|-----------------|
| Access                             | Title III PartB        | Title III PartD |                 |
| In-Home                            | Title III PartE        | Title VII       |                 |
| Community                          | State Alternative Care | State Access    |                 |
| Nutrition                          | State In-home          | State Respite   |                 |
| Caregivers of Older Adults         | Other                  |                 |                 |
| Older Relative (Kinship) Caregiver |                        |                 |                 |

**Minimum Standards**

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**Access Services**

Access services may be provided to older adults directly through the AAA without a direct service provision request. These services include Care Management; Care Transition Coordination & Support; Caregiver Case Management; Caregiver Information and Assistance; Caregiver Options Counseling; Case Coordination and Support; Disaster Advocacy and Outreach Programs; Information and Assistance; Options Counseling; Outreach (with specific attention to underserved populations); and Transportation. If the AAA is planning to provide any of these access services directly during FY 2026, complete this section.

**Instructions**

Select from the list of access services those services the AAA plans to provide directly during FY 2026, and provide the information requested.

**Care Management**

|                                 |             |                               |             |
|---------------------------------|-------------|-------------------------------|-------------|
| <u>Starting Date</u>            | 10/01/2025  | <u>Ending Date</u>            | 09/30/2026  |
| <u>Total of Federal Dollars</u> | \$36,000.00 | <u>Total of State Dollars</u> | \$92,404.00 |

Geographic area to be served

Branch & St. Joseph Counties

**Specify the planned goals and activities that will be undertaken to provide the service.**

Goal #1: Implement more flexible service options in order to provide a more self-directed care model.

**Activities:**

- ~ Care Consultants will further refine and improve the intake process to assure targeting of appropriate participants to each level of care outlined in the "Access and Service Coordination Continuum"
- ~ Seek additional service providers (Purchase of Service vendors) to serve participants in Region IIIC AAA
- ~ Communicate continued need for additional flexibility and additional staff from existing service providers to be able to accommodate participants' person-centered support plan/care plan
- ~ Care consultants will discuss with participants adult immunizations (including COVID-19 immunization/boosters, flu, pneumonia and shingles) for themselves, their family members and/or caregivers

Goal #2: Continue staff education and skill building including staff collaboration to better serve victims of elder abuse, neglect and exploitation

**Activities:**

- ~ Care Consultants will continue to screen/assess participants/victims for current or past abuse, neglect and/or exploitation
- ~ Care Consultants will seek training and education sessions relevant to the prevention of abuse, neglect and/or exploitation

Goal #3: Minimize wait times for individuals seeking access/care management services

**Activities:**

- ~ Continue implementation of the tiered approach to Access Services (Care Management funded)
- ~ Care Consultants will complete a thorough intake and referral making process
- ~ Care Consultants will continue to monitor the Waiting List for access services weekly

**Information and Assistance**



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|                                 |             |                               |            |
|---------------------------------|-------------|-------------------------------|------------|
| <u>Starting Date</u>            | 10/01/2025  | <u>Ending Date</u>            | 09/30/2026 |
| <u>Total of Federal Dollars</u> | \$36,000.00 | <u>Total of State Dollars</u> |            |

Geographic area to be served

Branch and St. Joseph Counties

**Specify the planned goals and activities that will be undertaken to provide the service.**

Goal #1: Provision of comprehensive, unbiased Information and Assistance (I&A)/referral

Activities:

- ~ Continue to provide referrals according to the ACLS Bureau and national Alliance for Information and Referral Systems (AIRS) standards
- ~ Continue to update files and maintain data entry into the State of Michigan Aging Information System - Aging and Disability Resource Center Information Center (ADRCIS) database
- ~ Staff shall complete surveys with (10% as per I&A standard) callers each quarter to assure high quality I&A services
- ~ Staff shall support education efforts among callers regarding adult immunizations, including vaccination, testing, support and access, as requested

Goal #2: Continue ongoing outreach and education activities among local and regional aging/disability network partners and among general community audiences

Activities:

- ~ Staff shall continue participation in community-based taskforces, workgroups, committee-type partnership meetings to uphold information sharing and resource collaboration
- ~ Staff shall continue to share recent and relevant information/resources to all community and aging network partners
- ~ Staff shall continue to attend and participate in outreach events and seasonal community-based activities throughout the planning and service area

Goal #3: Continue to maintain accurate data and submit accurate data/ program reporting related to ACLS Bureau Standards and reporting requirements, for inclusion in the statewide resource database and National Aging Program Information Systems (NAPIS) reporting tool

Activities:

- ~ Staff shall continue to develop and monitor the ADRCIS resource database for accurate data entries
- ~ Staff shall continue to seek updated information through contact with programs, service agencies, and organizations for inclusion in the database
- ~ Staff shall continue to complete accurate data entry into the database according to the ACLS Bureau standards

Goal #4: Continue to use and promote a person-centered approach

Activities:

- ~ Staff shall continue to use the person-centered approach in all interactions with callers, families, caregivers, participants and community partners
- ~ Staff shall continue to be able to explain the person-centered philosophy, providing education where opportunities arise



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**Direct Service Request**

This section applies only if the AAA is submitting a new request to provide in-home, community, nutrition, caregiver, or kinship caregiver service(s) directly that was not previously approved in this multi-year planning cycle.

It is expected that in-home, community, nutrition, caregiver, and kinship caregiver services will be provided under contracts with community-based service providers, but when appropriate, AAAs can request to provide these services directly. Direct service provision requests must be approved by the Commission on Services to the Aging (CSA). Direct service provision is defined as “providing a service directly to a senior, such as preparing meals, doing chore services, or working with seniors in an adult day setting.” Direct service provision by the AAA may be appropriate when, in the judgment of the ACLS Bureau: A) provision is necessary to ensure an adequate supply; B) the service is directly related to the AAA’s administrative functions; or C) a service can be provided by the AAA more economically than any available contractor, and with comparable quality.

**Instructions**

Select the service from the list and enter the information requested pertaining to basis, justification, and public hearing discussion for any new Direct Service Request for FY 2026. Specify in the appropriate text box for each service the planned goals and activities that will be undertaken to provide the service.

Please skip this section if the AAA is not submitting a new request to provide an in-home, community, nutrition, caregiver, or kinship caregiver service directly during FY 2026.

Total of Federal Dollars

Total of State Dollars

Geographic Area Served

Planned goals, objectives, and activities that will be undertaken to provide the service in the appropriate text box for each service category.

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).

(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.

(B) Such services are directly related to the Area Agency’s administrative functions.

(C) Such services can be provided more economically and with comparable quality by the Area Agency.

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Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.

Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).



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**Regional Direct Service Request**

This section applies only if the AAA is submitting a new request to provide a regional service directly that was not previously approved in the multi-year planning cycle.

It is expected that regionally defined services will be provided under contract with community-based service providers, but when appropriate, AAAs may request to provide regional services directly upon approval by the CSA. The basis for requesting direct provision of a regional service by the AAA would be if, in the judgment of the ACLS Bureau: A) provision is necessary to assure an adequate supply; B) the service is directly related to the AAA's administrative functions; or C) a service can be provided by the AAA more economically than any available contractor, and with comparable quality.

**Instructions**

AAAs that have a new request to provide a regional service directly must complete this tab for each service. Enter the regional service name in the box and click "Add." The regional service name will appear in the dialog box on the left after the screen refreshes. Select the link for the newly added regional service and enter the information requested pertaining to basis, justification, and public hearing discussion for any new regional service request for FY 2026. Also specify in the appropriate text box for each service the planned goals and activities that will be undertaken to provide the service.

Total of Federal Dollars

Total of State Dollars

Geographic Area Served

Planned goals and activities that will be undertaken to provide the service in the appropriate text box for each service category.

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).

- (A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.
- (B) Such services are directly related to the Area Agency's administrative functions.
- (C) Such services can be provided more economically and with comparable quality by the Area Agency.



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Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.

Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).

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**Program Development Objectives**

Please provide information for any new goals and objectives that are proposed by the AAA during FY 2026.

For FY 2026, this is also where you will provide updates to the current Approved MYP Objectives.

**Instructions**

The AAA may enter a new goal in the appropriate text box. It is acceptable, *though not required*, if some of the AAA's goals correspond to the ACLS Bureau's state plan goals. There is an entry box to identify which, if any, state plan goal(s) correlate with the entered goal. See the Document Library for Michigan's State Plan on Aging for FY 2024 – FY 2026.

A narrative for each goal should be entered in the appropriate text box. Enter objectives related to each program development goal in the appropriate text box.

Complete the information in the text boxes for the timeline, planned activities and expected outcomes for each objective (see Document Library for additional instructions on completing this section).

\*Please work with your Regional Aging Representative on updating current MYP objectives.

**Area Agency on Aging Goal**

**A. Work to develop a viable community partner to develop an adult day program for individuals and families in Branch County.**

State Goal Match: 3, 4

**Narrative**

We've been giving our community partners some additional time to recoup from the pandemic as previously reported. We have approached them in FY2025 (December 2024, March 2025) and will again before the end of the fiscal year to discuss development of a Branch County Adult Day program. We will also add St. Joseph County key leaders to the discussion due to the loss of our St. Joseph County Adult Day Program at the end of December 2024. They chose to terminate their contract due to diversifying other business opportunities for their organization, Thurston Woods Village. We will continue to network and cultivate relationships as well as look to develop purchase of service type arrangements in the interim.

**Objectives**

1.

Timeline: to

**Activities**



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Expected Outcome

**B. Provide advocacy, information, and training to support the rights of older/vulnerable adults to live free from abuse, neglect and/or exploitation.**

State Goal Match: 4

Narrative

FY2025 has definitely been a very busy year for our team in responding to victims of abuse, neglect and exploitation. As of the end of the second quarter, we've served 40 individuals and also worked with multiple new community partners through our Interdisciplinary Team efforts in each county. Our team has been working diligently to provide victim-centered advocacy, support, resources and safety planning to assure victims stated goals are achieved. Each county's Interdisciplinary Team is meeting monthly, discussing complex cases and working to address community-specific issues related to the prevention of abuse, neglect and exploitation. Ongoing communication and collaboration with local community partners, including law enforcement and other first responders, has been a strongly held priority for our agency. Additional community partners include the Coach Eby Center, Hope United (a faith-community collaborative), Restored Hope Furniture Ministry, Keystone Place, Integrated Services, and multiple food pantries. In 2026 our efforts will process and further develop these relationships as well as revising the "St. Joseph County Vulnerable Adult Protocol" to address new laws/mandates and practices.

Objectives

1.  
Timeline:                      to

Activities

Expected Outcome

**C. Improve the Accessibility of Services to Michigan's Communities and People of Color, Immigrants and LGBTQ+ individuals.**

State Goal Match: 1

Narrative

As with all internal and external efforts to improve accessibility of our services to all community members living in or visiting our planning & service area, AAA staff and our network partners will continue our efforts with broad outreach and a continued focus on training & self-awareness to assure all who seek services and supports are able to find them.

Objectives

1.  
Timeline:                      to

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Activities

Expected Outcome



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**Planned Service Array**

Complete the FY 2026 AIP Planned Service Array form for your PSA. Indicate the appropriate placement for each ACLS Bureau service category and regional service definition. Unless noted otherwise, services are understood to be available PSA-wide.

| Category                  | Services  |
|---------------------------|---|
| Provided by Area Agency   | <p><b>Access</b></p> <ul style="list-style-type: none"> <li>• Care Management</li> <li>• Information and Assistance</li> </ul> <p><b>Caregivers of Older Adults Services</b></p> <ul style="list-style-type: none"> <li>• Caregiver Information and Assistance</li> </ul>   |
| Contracted by Area Agency | <p><b>Access</b></p> <ul style="list-style-type: none"> <li>• Case Coordination and Support</li> <li>• Transportation</li> </ul> <p><b>In-Home</b></p> <ul style="list-style-type: none"> <li>• Assistive Devices &amp; Technologies</li> <li>• Chore</li> <li>• Friendly Reassurance</li> <li>• Homemaking</li> <li>• Medication Management</li> <li>• Personal Care</li> </ul> <p><b>Community</b></p> <ul style="list-style-type: none"> <li>• Disease Prevention/Health Promotion</li> <li>• Home Repair *</li> <li>• Legal Assistance</li> </ul> <p><b>Nutrition Services</b></p> <ul style="list-style-type: none"> <li>• Congregate Meals</li> <li>• Home Delivered Meals</li> </ul> <p><b>Caregivers of Older Adults Services</b></p> <ul style="list-style-type: none"> <li>• Caregiver Education</li> <li>• Caregiver Support Groups</li> <li>• Caregiver Training</li> <li>• Respite Care</li> </ul> <p><b>Regional Services</b></p> |

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|                         |  |
|-------------------------|--|
|                         | <b>Regional Services</b> <ul style="list-style-type: none"> <li>• Gap Filling: Services that eliminate a threat to independence, health or safety that requires immediate attention when other resources are unavailable.</li> </ul>   |
| Local Millage Funded    | <b>Access</b> <ul style="list-style-type: none"> <li>• Case Coordination and Support</li> <li>• Transportation</li> </ul> <b>In-Home</b> <ul style="list-style-type: none"> <li>• Chore</li> <li>• Friendly Reassurance</li> <li>• Homemaking</li> <li>• Personal Care</li> </ul> <b>Community</b> <ul style="list-style-type: none"> <li>• Disease Prevention/Health Promotion</li> <li>• Home Repair *</li> </ul> <b>Nutrition Services</b> <ul style="list-style-type: none"> <li>• Congregate Meals</li> <li>• Home Delivered Meals</li> </ul> <b>Caregivers of Older Adults Services</b> <ul style="list-style-type: none"> <li>• Caregiver Education</li> <li>• Caregiver Support Groups</li> <li>• Caregiver Training</li> <li>• Respite Care</li> </ul> <b>Regional Services</b> <ul style="list-style-type: none"> <li>• Gap Filling: Services that eliminate a threat to independence, health or safety that requires immediate attention when other resources are unavailable.</li> </ul> |
| Funded by Other Sources | <b>Access</b> <ul style="list-style-type: none"> <li>• Options Counseling</li> </ul>   |

\* Not PSA-wide



EVIDENCE-BASED PROGRAMS PLANNED FOR FY 2026

Funded Under Disease Prevention Health Promotion Service Definition

Provide the information requested below for Evidence-Based Programs (EBDP) to be funded under Title III-D.

Title III-D funds can only be used on health promotion programs that meet the highest-level criteria as determined by the Administration for Community Living (ACL) Administration on Aging (AoA). Please see the "List of Approved EBDP Programs for Title III-D Funds" in the Document Library. Only programs from this list will be approved beginning in FY 2026. If funding has been allocated as a single amount for all Title III-D programs for a provider, enter on first line under "Funding Amount for This Service".

| Program Name                                 | Provider Name   | Anticipated No. of Participants                      | Funding Amount for Service                      |
|--|---|--|---|
| <i>Example</i>                               | <i>Example: List each provider offering programs on a single line as shown below.</i>                                     | <i>Example: Total participants for all providers</i> | <i>Example: Funding total for all providers</i> |
| Arthritis Exercise Program                   | 1) Forest City Senior League Program<br>2) Grove Township Senior Services<br>3) Friendly Avenue Services                  | 80   | \$14,000  |
| Arthritis Foundation Exercise Program (AFEP) | St. Joseph County Commission on Aging (classes held at both Three Rivers Enrichment Center and Sturgis Enrichment Center) | 150  | \$2,500   |
| Stay Active and Independent for Life (SAIL)  | St. Joseph County Commission on Aging (classes held at both Three Rivers Enrichment Center and Sturgis Enrichment Center) | 150  | \$2,500   |
| Arthritis Foundation Aquatic Program         | Branch County Commission on Aging   | 80   | \$3,631   |
|  |   |  |   |
|  |   |  |   |
|  |   |  |   |

**Planned FY2026 Caregiver Programs:** Complete the chart below. Include all caregiver programs within the PSA. This includes, but is not limited to: Respite, Respite Vouchers, Education/Outreach, Training, Support Groups, PTC, Savvy, DCS, Truatta, Regionally Specific Programs, etc. If you have any questions, please reach out to Lacey Charboneau at [charboneaul2@michigan.gov](mailto:charboneaul2@michigan.gov)

| <b>Name/Type of Program</b>                          | <b>State/Federal (OAA) Funds Used? (yes/no)</b> | <b>Description of Program</b>  | <b>Agency Comments (optional)</b>  |
|--|---|--|--|
| Alzheimer's Association Support Group                | Yes   | The Alzheimer's Association and St. Joseph County COA co-lead a support group for any caregiver/loved one needing support. Meetings are held in Three Rivers @ an accessible community center on the 1st Tuesday of each month.  | All caregiver programs are open to and advertised/promoted to all caregiver types, including kinship/grandparents raising grandchildren. |
| Branch County Caregiver/Kinship Family Support Group | Yes   | Branch COA collaborates with the Branch ISD and local domestic violence/sexual assault organization to support kinship/caregiver families through an evening support group once per month at a local church. They provide speakers and support, as well as a meal and childcare. | "  |
| In Home Respite Care                                 | Yes   | Both county Commission on Aging organizations provide donation-based respite care to support family caregivers in their home.  | "  |
| Caregiver Education                                  | Yes   | Branch County has developed and published various educational resource guides for caregivers.  | "  |
| Caregiver Education/ Training                        | Yes   | Both County Commission on Aging organizations arrange for special speakers and presenters throughout the year. All programs open to all caregivers.  | "  |



# FY 2026 AREA PLAN BUDGET

AAA: Branch-St. Joseph Area Agency on Aging  
PSA: 3C

Date: 4/14/2025 Rev No: original  
Budget Period: 10/1/2025 to 9/30/2026

## Area Plan Budget Overview

| Area Plan Budget Summary | Federal/State Award | Other             | Program Income    | Cash Match        | In-Kind Match    | Grand Total         |
|--------------------------|---------------------|-------------------|-------------------|-------------------|------------------|---------------------|
| Administration           | \$ 60,357           | \$ 96,800         | \$ -              | \$ 35,902         | \$ 25,000        | \$ 218,059          |
| Program Development      | \$ 22,523           | \$ -              | \$ -              | \$ -              | \$ 2,503         | \$ 25,026           |
| AAA RD/Nutritionist      | \$ 950              | \$ -              | \$ -              | \$ -              | \$ 106           | \$ 1,056            |
| Services                 | \$ 1,023,102        | \$ 60,000         | \$ 233,000        | \$ 294,397        | \$ 18,087        | \$ 1,628,586        |
| <b>Total</b>             | <b>\$ 1,106,932</b> | <b>\$ 156,800</b> | <b>\$ 233,000</b> | <b>\$ 330,299</b> | <b>\$ 45,696</b> | <b>\$ 1,872,727</b> |

## Administration Budget

| Administration Revenue                  | Federal / State / Other Administration | Local Cash Match | Local In-Kind Match | Grand Total       |
|---|--|------------------|---------------------|-------------------|
| Federal                                 | \$ 48,377                              | \$ 35,902        | \$ 25,000           | \$ 109,279        |
| Title III Administration                | \$ 48,377                              | \$ 35,902        | \$ 25,000           | \$ 109,279        |
| State                                   | \$ 11,980                              |                  |                     | \$ 11,980         |
| State Administration                    | \$ 8,481                               |                  |                     | \$ 8,481          |
| State Merit Award (MATF) Administration | \$ 3,115                               |                  |                     | \$ 3,115          |
| State Caregiver Support Administration  | \$ 384                                 |                  |                     | \$ 384            |
| Other                                   | \$ 96,800                              |                  |                     | \$ 96,800         |
| Other Administration                    | \$ 96,800                              |                  |                     | \$ 96,800         |
| <b>Grand Total</b>                      | <b>\$ 157,157</b>                      | <b>\$ 35,902</b> | <b>\$ 25,000</b>    | <b>\$ 218,059</b> |

| Administration Expenditures | Amount            | FTEs |
|-----------------------------|-------------------|------|
| Salaries/Wages              | \$ 178,400        | 5.00 |
| Fringe Benefits             | \$ 35,600         |      |
| Office Operations           | \$ 4,059          |      |
| <b>Total</b>                | <b>\$ 218,059</b> |      |

## Services Budget

| Fund Sources                                    | Access Services   | In-Home Services  | Community Services | Nutrition Services | Caregivers of Older Adults Services | Older Relative (Kinship) Caregiver Services | Grand Total         |
|---|-------------------|-------------------|--------------------|--------------------|-------------------------------------|---|---------------------|
| <b>Federal</b>                                  | <b>\$ 60,395</b>  | <b>\$ 35,200</b>  | <b>\$ 38,131</b>   | <b>\$ 289,783</b>  | <b>\$ 52,180</b>                    | <b>\$ 500</b>                               | <b>\$ 476,189</b>   |
| Title III-B Supportive Services                 | \$ 60,395         | \$ 35,200         | \$ 29,500          | \$ -               | \$ -                                | \$ -  | \$ 125,095          |
| Title III-C1 Congregate Meals                   | \$ -              | \$ -              | \$ -               | \$ 95,188          | \$ -                                | \$ -  | \$ 95,188           |
| Title III-C2 Home-Delivered Meals               | \$ -              | \$ -              | \$ -               | \$ 130,325         | \$ -                                | \$ -  | \$ 130,325          |
| Title III-D Preventive Health                   | \$ -              | \$ -              | \$ 8,631           | \$ -               | \$ -                                | \$ -  | \$ 8,631            |
| Title III-E National Family Caregiver Support   | \$ -              | \$ -              | \$ -               | \$ -               | \$ 52,180                           | \$ 500                                      | \$ 52,680           |
| Title VII-A Ombudsman                           | \$ -              | \$ -              | \$ -               | \$ -               | \$ -                                | \$ -  | \$ -                |
| Title VII EAP Elder Abuse Prevention            | \$ -              | \$ -              | \$ -               | \$ -               | \$ -                                | \$ -  | \$ -                |
| Nutrition Services Incentive Program (NSIP)     | \$ -              | \$ -              | \$ -               | \$ 64,270          | \$ -                                | \$ -  | \$ 64,270           |
| <b>State</b>                                    | <b>\$ 100,212</b> | <b>\$ 216,520</b> | <b>\$ -</b>        | <b>\$ 127,688</b>  | <b>\$ 102,493</b>                   | <b>\$ -</b>                                 | <b>\$ 546,913</b>   |
| State Access Services                           | \$ 7,808          | \$ -              | \$ -               | \$ -               | \$ -                                | \$ -  | \$ 7,808            |
| State In-Home Services                          | \$ -              | \$ 119,000        | \$ -               | \$ -               | \$ 20,207                           | \$ -  | \$ 139,207          |
| State In-Home Services (Direct Care Worker Pay) | \$ -              | \$ 67,000         | \$ -               | \$ -               | \$ 1,582                            | \$ -  | \$ 68,582           |
| State Congregate Meals                          | \$ -              | \$ -              | \$ -               | \$ 2,523           | \$ -                                | \$ -  | \$ 2,523            |
| State Home Delivered Meals                      | \$ -              | \$ -              | \$ -               | \$ 125,165         | \$ -                                | \$ -  | \$ 125,165          |
| State Alternative Care                          | \$ -              | \$ 30,520         | \$ -               | \$ -               | \$ -                                | \$ -  | \$ 30,520           |
| State Aging Network Services                    | \$ 12,176         | \$ -              | \$ -               | \$ -               | \$ -                                | \$ -  | \$ 12,176           |
| State Caregiver Support                         | \$ -              | \$ -              | \$ -               | \$ -               | \$ 3,887                            | \$ -  | \$ 3,887            |
| State Respite Care                              | \$ -              | \$ -              | \$ -               | \$ -               | \$ 45,316                           | \$ -  | \$ 45,316           |
| State Merit Award (MATF)                        | \$ -              | \$ -              | \$ -               | \$ -               | \$ 31,501                           | \$ -  | \$ 31,501           |
| State Nursing Home Ombudsman                    | \$ -              | \$ -              | \$ -               | \$ -               | \$ -                                | \$ -  | \$ -                |
| Michigan State Ombudsman                        | \$ -              | \$ -              | \$ -               | \$ -               | \$ -                                | \$ -  | \$ -                |
| State Care Management                           | \$ 80,228         | \$ -              | \$ -               | \$ -               | \$ -                                | \$ -  | \$ 80,228           |
| <b>Medicaid</b>                                 | <b>\$ 60,000</b>  | <b>\$ -</b>       | <b>\$ -</b>        | <b>\$ -</b>        | <b>\$ -</b>                         | <b>\$ -</b>                                 | <b>\$ 60,000</b>    |
| Targeted Case Management                        | \$ 60,000         | \$ -              | \$ -               | \$ -               | \$ -                                | \$ -  | \$ 60,000           |
| <b>Program Income</b>                           | <b>\$ 12,000</b>  | <b>\$ 33,000</b>  | <b>\$ 1,500</b>    | <b>\$ 175,000</b>  | <b>\$ 11,500</b>                    | <b>\$ -</b>                                 | <b>\$ 233,000</b>   |
| Program Income                                  | \$ 12,000         | \$ 33,000         | \$ 1,500           | \$ 175,000         | \$ 11,500                           | \$ -  | \$ 233,000          |
| <b>Local</b>                                    | <b>\$ 70,902</b>  | <b>\$ 91,732</b>  | <b>\$ 27,050</b>   | <b>\$ 105,000</b>  | <b>\$ 17,800</b>                    | <b>\$ -</b>                                 | <b>\$ 312,484</b>   |
| Cash Match                                      | \$ 60,902         | \$ 88,300         | \$ 26,450          | \$ 105,000         | \$ 13,745                           | \$ -  | \$ 294,397          |
| In-Kind Match                                   | \$ 10,000         | \$ 3,432          | \$ 600             | \$ -               | \$ 4,055                            | \$ -  | \$ 18,087           |
| <b>Grand Total</b>                              | <b>\$ 303,509</b> | <b>\$ 376,452</b> | <b>\$ 66,681</b>   | <b>\$ 697,471</b>  | <b>\$ 183,973</b>                   | <b>\$ 500</b>                               | <b>\$ 1,628,586</b> |

# FY 2026 AREA PLAN BUDGET

Branch-St. Joseph Area Agency on Aging  
3C

Date: 4/14/2025  
Budget Period: 10/1/2025

Rev No: original  
to 9/30/2026

## Expenditures by Service & Fund Category

|  | 29.24%     | 33.58%     | 3.68%     | 14.31%         | 19.19%     | 100.00%      |
|--|------------|------------|-----------|----------------|------------|--------------|
| Services   | Federal    | State      | Medicaid  | Program Income | Local      | Grand Total  |
| <b>Access Services</b>                             | \$ 60,395  | \$ 100,212 | \$ 60,000 | \$ 12,000      | \$ 70,902  | \$ 303,509   |
| <b>Access Services</b>                             | \$ 60,395  | \$ 100,212 | \$ 60,000 | \$ 12,000      | \$ 70,902  | \$ 303,509   |
| Care Management                                    | \$ 36,000  | \$ 92,404  | \$ 60,000 | \$ -           | \$ 40,902  | \$ 229,306   |
| Case Coordination & Support                        | \$ 7,000   | \$ 7,808   | \$ -      | \$ -           | \$ 15,000  | \$ 29,808    |
| Transportation                                     | \$ 17,395  | \$ -       | \$ -      | \$ 12,000      | \$ 15,000  | \$ 44,395    |
| <b>In-Home Services</b>                            | \$ 35,200  | \$ 216,520 | \$ -      | \$ 33,000      | \$ 91,732  | \$ 376,452   |
| <b>In-Home Services</b>                            | \$ 35,200  | \$ 216,520 | \$ -      | \$ 33,000      | \$ 91,732  | \$ 376,452   |
| Assistive Devices & Technologies                   | \$ -       | \$ 15,000  | \$ -      | \$ -           | \$ 1,666   | \$ 16,666    |
| Chore Services                                     | \$ 8,000   | \$ -       | \$ -      | \$ 500         | \$ 2,500   | \$ 11,000    |
| Friendly Reassurance                               | \$ 8,000   | \$ -       | \$ -      | \$ -           | \$ 900     | \$ 8,900     |
| Homemaker  | \$ 10,200  | \$ 119,020 | \$ -      | \$ 16,500      | \$ 40,000  | \$ 185,720   |
| Medication Management                              | \$ 5,000   | \$ 10,000  | \$ -      | \$ -           | \$ 1,666   | \$ 16,666    |
| Personal Care                                      | \$ 4,000   | \$ 72,500  | \$ -      | \$ 16,000      | \$ 45,000  | \$ 137,500   |
| <b>Community Services</b>                          | \$ 38,131  | \$ -       | \$ -      | \$ 1,500       | \$ 27,050  | \$ 66,681    |
| <b>Community Regional Services</b>                 | \$ 10,500  | \$ -       | \$ -      | \$ -           | \$ 1,250   | \$ 11,750    |
| Community Living Program Services (RSD)            | \$ 5,000   | \$ -       | \$ -      | \$ -           | \$ 600     | \$ 5,600     |
| Gap Filling/Special Needs(RSD)                     | \$ 5,500   | \$ -       | \$ -      | \$ -           | \$ 650     | \$ 6,150     |
| <b>Community Services</b>                          | \$ 27,631  | \$ -       | \$ -      | \$ 1,500       | \$ 25,800  | \$ 54,931    |
| Disease Prevention/Health Promotion                | \$ 8,631   | \$ -       | \$ -      | \$ 500         | \$ 2,500   | \$ 11,631    |
| Home Repair  | \$ 5,000   | \$ -       | \$ -      | \$ 500         | \$ 3,500   | \$ 9,000     |
| Legal Assistance                                   | \$ 12,000  | \$ -       | \$ -      | \$ 500         | \$ 1,800   | \$ 14,300    |
| Ombudsman  | \$ 2,000   | \$ -       | \$ -      | \$ -           | \$ 18,000  | \$ 20,000    |
| <b>Nutrition Services</b>                          | \$ 289,783 | \$ 127,688 | \$ -      | \$ 175,000     | \$ 105,000 | \$ 697,471   |
| <b>Nutrition Services</b>                          | \$ 289,783 | \$ 127,688 | \$ -      | \$ 175,000     | \$ 105,000 | \$ 697,471   |
| Congregate Meals                                   | \$ 106,188 | \$ 2,523   | \$ -      | \$ 55,000      | \$ 15,000  | \$ 178,711   |
| Home-Delivered Meals                               | \$ 183,595 | \$ 125,165 | \$ -      | \$ 120,000     | \$ 90,000  | \$ 518,760   |
| <b>Caregivers of Older Adults Services</b>         | \$ 52,180  | \$ 102,493 | \$ -      | \$ 11,500      | \$ 17,800  | \$ 183,973   |
| <b>Access Assistance</b>                           | \$ 36,000  | \$ -       | \$ -      | \$ -           | \$ 4,000   | \$ 40,000    |
| Caregiver Information and Assistance               | \$ 36,000  | \$ -       | \$ -      | \$ -           | \$ 4,000   | \$ 40,000    |
| <b>Counseling/Support Groups/Training</b>          | \$ 8,180   | \$ -       | \$ -      | \$ 500         | \$ 1,055   | \$ 9,735     |
| Caregiver Support Groups                           | \$ 7,680   | \$ -       | \$ -      | \$ 500         | \$ 1,000   | \$ 9,180     |
| Caregiver Training                                 | \$ 500     | \$ -       | \$ -      | \$ -           | \$ 55      | \$ 555       |
| <b>Information Services</b>                        | \$ 8,000   | \$ -       | \$ -      | \$ 500         | \$ 10,000  | \$ 18,500    |
| Caregiver Education (use for Caregiver Outreach)   | \$ 8,000   | \$ -       | \$ -      | \$ 500         | \$ 10,000  | \$ 18,500    |
| <b>Respite Services</b>                            | \$ -       | \$ 87,105  | \$ -      | \$ 500         | \$ 2,245   | \$ 89,850    |
| Adult Day Services                                 | \$ -       | \$ 47,000  | \$ -      | \$ 500         | \$ -       | \$ 47,500    |
| Respite Care – In-Home Respite                     | \$ -       | \$ 40,105  | \$ -      | \$ -           | \$ 2,245   | \$ 42,350    |
| <b>Supplemental Services</b>                       | \$ -       | \$ 15,388  | \$ -      | \$ 10,000      | \$ 500     | \$ 25,888    |
| Caregiver Supplemental - Transportation            | \$ -       | \$ 15,388  | \$ -      | \$ 10,000      | \$ 500     | \$ 25,888    |
| <b>Older Relative (Kinship) Caregiver Services</b> | \$ 500     | \$ -       | \$ -      | \$ -           | \$ -       | \$ 500       |
| <b>Counseling/Support Groups/Training</b>          | \$ 500     | \$ -       | \$ -      | \$ -           | \$ -       | \$ 500       |
| Kinship Caregiver Support Groups                   | \$ 500     | \$ -       | \$ -      | \$ -           | \$ -       | \$ 500       |
| <b>Grand Total</b>                                 | \$ 476,189 | \$ 546,913 | \$ 60,000 | \$ 233,000     | \$ 312,484 | \$ 1,628,586 |



FY 2026 AREA PLAN BUDGET

Branch-St. Joseph Area Agency on Aging  
3C

Date: 4/14/2025  
Budget Period: 10/1/2025

Rev No: original  
to 9/30/2026

Access Services Expenditures by Fund Source

| Service                     | Title III-B<br>Supportive<br>Services | State Access<br>Services | State Aging<br>Network Services | State Care<br>Management | Targeted Case<br>Management | Program Income | Cash Match | In-Kind Match | Grand Total |
|-----------------------------|---------------------------------------|--------------------------|---------------------------------|--------------------------|-----------------------------|----------------|------------|---------------|-------------|
| Access Services             | \$ 60,395                             | \$ 7,808                 | \$ 12,176                       | \$ 80,228                | \$ 60,000                   | \$ 12,000      | \$ 60,902  | \$ 10,000     | \$ 303,509  |
| Care Management             | \$ 36,000                             | -                        | \$ 12,176                       | \$ 80,228                | \$ 60,000                   | -              | \$ 30,902  | \$ 10,000     | \$ 229,306  |
| Care Coordination & Support | \$ 7,000                              | \$ 7,808                 | -                               | -                        | -                           | -              | \$ 15,000  | -             | \$ 29,808   |
| Transportation              | \$ 17,395                             | -                        | -                               | -                        | -                           | \$ 12,000      | \$ 15,000  | -             | \$ 44,395   |
| Grand Total                 | \$ 60,395                             | \$ 7,808                 | \$ 12,176                       | \$ 80,228                | \$ 60,000                   | \$ 12,000      | \$ 60,902  | \$ 10,000     | \$ 303,509  |

In-Home Services Expenditures by Fund Source

| Row Labels                       | Title III-B<br>Supportive<br>Services | State In-Home<br>Services | State In-Home<br>Services (Direct<br>Care Worker Pay) | State Alternative<br>Care | Program Income | Cash Match | In-Kind Match | Grand Total |
|----------------------------------|---------------------------------------|---------------------------|---|---------------------------|----------------|------------|---------------|-------------|
| In-Home Services                 | \$ 35,200                             | \$ 119,000                | \$ 67,000   | \$ 30,520                 | \$ 33,000      | \$ 88,300  | \$ 3,432      | \$ 376,452  |
| Assistive Devices & Technologies | \$ -                                  | \$ 15,000                 | \$ -  | \$ -                      | \$ -           | \$ -       | \$ 1,666      | \$ 16,666   |
| Chore Services                   | \$ 8,000                              | \$ -                      | \$ -  | \$ -                      | \$ 500         | \$ 2,500   | \$ -          | \$ 11,000   |
| Friendly Reassurance             | \$ 8,000                              | \$ -                      | \$ -  | \$ -                      | \$ -           | \$ 800     | \$ 100        | \$ 8,900    |
| Homemaker                        | \$ 10,200                             | \$ 53,500                 | \$ 40,000   | \$ 25,520                 | \$ 16,500      | \$ 40,000  | \$ -          | \$ 185,720  |
| Medication Management            | \$ 5,000                              | \$ 10,000                 | \$ -  | \$ -                      | \$ -           | \$ -       | \$ 1,666      | \$ 16,666   |
| Personal Care                    | \$ 4,000                              | \$ 40,500                 | \$ 27,000   | \$ 5,000                  | \$ 16,000      | \$ 45,000  | \$ -          | \$ 137,500  |
| Grand Total                      | \$ 35,200                             | \$ 119,000                | \$ 67,000   | \$ 30,520                 | \$ 33,000      | \$ 88,300  | \$ 3,432      | \$ 376,452  |

Community Services Expenditures by Fund Source

| Sum of Amount                           | Column Labels | Title III-B<br>Supportive<br>Services | Title III-D<br>Preventive Health | Program Income | Cash Match | In-Kind Match | Grand Total |
|---|---------------|---------------------------------------|----------------------------------|----------------|------------|---------------|-------------|
| Row Labels                              |               | \$ 10,500                             | \$ -                             | \$ -           | \$ 650     | \$ 600        | \$ 11,750   |
| Community Regional Services             |               | \$ 5,000                              | \$ -                             | \$ -           | \$ -       | \$ 600        | \$ 5,600    |
| Community Living Program Services (RSD) |               | \$ 5,500                              | \$ -                             | \$ -           | \$ 650     | \$ -          | \$ 6,150    |
| Gap Filling/Special Needs(RSD)          |               | \$ 19,000                             | \$ 8,631                         | \$ 1,500       | \$ 25,800  | \$ -          | \$ 54,931   |
| Community Services                      |               | \$ -                                  | \$ 8,631                         | \$ 500         | \$ 2,500   | \$ -          | \$ 11,631   |
| Disease Prevention/Health Promotion     |               | \$ 5,000                              | \$ -                             | \$ 500         | \$ 3,500   | \$ -          | \$ 9,000    |
| Home Repair                             |               | \$ 12,000                             | \$ -                             | \$ -           | \$ 1,800   | \$ -          | \$ 14,300   |
| Legal Assistance                        |               | \$ 2,000                              | \$ -                             | \$ -           | \$ 18,000  | \$ -          | \$ 20,000   |
| Ombudsman                               |               | \$ 29,500                             | \$ 8,631                         | \$ 1,500       | \$ 26,450  | \$ 600        | \$ 66,681   |
| Grand Total                             |               | \$ 29,500                             | \$ 8,631                         | \$ 1,500       | \$ 26,450  | \$ 600        | \$ 66,681   |

**Nutrition Services Expenditures by Fund Source**

| Row Labels                | Title III-C1<br>Congregate Meals | Title III-C2 Home-<br>Delivered Meals | Nutrition Services<br>Incentive Program<br>(NSIP) | State Congregate<br>Meals | State Home<br>Delivered Meals | Program Income    | Cash Match        | Grand Total       |
|---------------------------|----------------------------------|---------------------------------------|---|---------------------------|-------------------------------|-------------------|-------------------|-------------------|
| <b>Nutrition Services</b> | <b>\$ 95,188</b>                 | <b>\$ 130,325</b>                     | <b>\$ 64,270</b>                                  | <b>\$ 2,523</b>           | <b>\$ 125,165</b>             | <b>\$ 175,000</b> | <b>\$ 105,000</b> | <b>\$ 697,471</b> |
| Congregate Meals          | \$ 95,188                        | -                                     | \$ 11,000   | \$ 2,523                  | -                             | \$ 55,000         | \$ 15,000         | \$ 178,711        |
| Home-Delivered Meals      | -                                | \$ 130,325                            | \$ 53,270   | -                         | \$ 125,165                    | \$ 120,000        | \$ 90,000         | \$ 518,760        |
| <b>Grand Total</b>        | <b>\$ 95,188</b>                 | <b>\$ 130,325</b>                     | <b>\$ 64,270</b>                                  | <b>\$ 2,523</b>           | <b>\$ 125,165</b>             | <b>\$ 175,000</b> | <b>\$ 105,000</b> | <b>\$ 697,471</b> |

**Caregivers of Older Adults Services Expenditures by Fund Source**

| Row Labels                                       | Title III-E National<br>Family Caregiver<br>Support | State In-Home<br>Services | State In-Home<br>Services (Direct<br>Care Worker Pay) | State Caregiver<br>Support | State Respite Care | State Meant Award<br>(MATR) | Program Income   | Cash Match       | In-Kind Match   | Grand Total       |
|--|---|---------------------------|---|----------------------------|--------------------|-----------------------------|------------------|------------------|-----------------|-------------------|
| <b>Access Assistance</b>                         | <b>\$ 36,000</b>                                    | <b>\$ -</b>               | <b>\$ -</b>   | <b>\$ -</b>                | <b>\$ -</b>        | <b>\$ -</b>                 | <b>\$ -</b>      | <b>\$ -</b>      | <b>\$ 4,000</b> | <b>\$ 40,000</b>  |
| Caregiver Information and Assistance             | \$ 36,000   | -                         | -   | -                          | -                  | -                           | -                | -                | \$ 4,000        | \$ 40,000         |
| <b>Counseling/Support Groups/Training</b>        | <b>\$ 8,180</b>                                     | <b>\$ -</b>               | <b>\$ -</b>   | <b>\$ -</b>                | <b>\$ -</b>        | <b>\$ -</b>                 | <b>\$ 500</b>    | <b>\$ 1,000</b>  | <b>\$ -</b>     | <b>\$ 9,180</b>   |
| Counseling/Support Groups/Training               | \$ 8,180  | -                         | -   | -                          | -                  | -                           | \$ 500           | \$ 1,000         | -               | \$ 9,180          |
| Caregiver Support Groups                         | \$ 7,680  | -                         | -   | -                          | -                  | -                           | -                | -                | -               | -                 |
| Caregiver Training                               | \$ 500  | -                         | -   | -                          | -                  | -                           | -                | -                | \$ 55           | \$ 555            |
| <b>Information Services</b>                      | <b>\$ 8,000</b>                                     | <b>\$ -</b>               | <b>\$ -</b>   | <b>\$ -</b>                | <b>\$ -</b>        | <b>\$ -</b>                 | <b>\$ 500</b>    | <b>\$ 10,000</b> | <b>\$ -</b>     | <b>\$ 18,500</b>  |
| Information Services                             | \$ 8,000  | -                         | -   | -                          | -                  | -                           | \$ 500           | \$ 10,000        | -               | \$ 18,500         |
| Caregiver Education (use for Caregiver Outreach) | \$ 8,000  | -                         | -   | -                          | -                  | -                           | -                | -                | -               | -                 |
| <b>Respite Services</b>                          | <b>\$ -</b>   | <b>\$ 20,207</b>          | <b>\$ 1,582</b>                                       | <b>\$ -</b>                | <b>\$ 45,316</b>   | <b>\$ 20,000</b>            | <b>\$ 500</b>    | <b>\$ 2,245</b>  | <b>\$ -</b>     | <b>\$ 89,850</b>  |
| Respite Services                                 | -   | \$ 20,207                 | \$ 1,582  | -                          | \$ 45,316          | \$ 20,000                   | \$ 500           | \$ 2,245         | -               | \$ 89,850         |
| Adult Day Services                               | \$ -  | -                         | -   | -                          | \$ 27,000          | \$ 20,000                   | -                | -                | -               | \$ 47,500         |
| Respite Care - In-Home Respite                   | \$ -  | \$ 20,207                 | \$ 1,582  | -                          | \$ 18,316          | -                           | \$ 500           | \$ 2,245         | -               | \$ 42,350         |
| <b>Supplemental Services</b>                     | <b>\$ -</b>   | <b>\$ -</b>               | <b>\$ -</b>   | <b>\$ 3,887</b>            | <b>\$ -</b>        | <b>\$ 11,501</b>            | <b>\$ 10,000</b> | <b>\$ 500</b>    | <b>\$ -</b>     | <b>\$ 25,888</b>  |
| Supplemental Services                            | -   | -                         | -   | \$ 3,887                   | -                  | \$ 11,501                   | \$ 10,000        | \$ 500           | -               | \$ 25,888         |
| Caregiver Supplemental - Transportation          | \$ -  | -                         | -   | \$ 3,887                   | -                  | \$ 11,501                   | \$ 10,000        | \$ 500           | -               | \$ 25,888         |
| <b>Grand Total</b>                               | <b>\$ 52,180</b>                                    | <b>\$ 20,207</b>          | <b>\$ 1,582</b>                                       | <b>\$ 3,887</b>            | <b>\$ 45,316</b>   | <b>\$ 31,501</b>            | <b>\$ 11,500</b> | <b>\$ 13,745</b> | <b>\$ 4,055</b> | <b>\$ 183,973</b> |

**Older Relative (Kinship) Caregiver Services Expenditures by Fund Source**

| Row Labels                                | Title III-E National<br>Family Caregiver<br>Support | Grand Total   |
|---|---|---------------|
| <b>Counseling/Support Groups/Training</b> | <b>\$ 500</b>                                       | <b>\$ 500</b> |
| Kinship Caregiver Support Groups          | \$ 500  | \$ 500        |
| <b>Grand Total</b>                        | <b>\$ 500</b>                                       | <b>\$ 500</b> |



# FY 2026 AREA PLAN BUDGET

Branch-St. Joseph Area Agency on Aging  
3C

Date: 4/14/2025  
Budget Period: 10/1/2025

Rev No: original  
to 9/30/2026

## Method of Service Provision

|  | 9.57%           | 71.91%              | 18.52%             | 100.00%      |
|--|-----------------|---------------------|--------------------|--------------|
| Services   | Direct Services | Contracted Services | Purchased Services | Grand Total  |
| <b>Access Services</b>                           | \$ 109,306      | \$ 74,203           | \$ 120,000         | \$ 303,509   |
| <b>Access Services</b>                           | \$ 109,306      | \$ 74,203           | \$ 120,000         | \$ 303,509   |
| Care Management                                  | \$ 109,306      | \$ -                | \$ 120,000         | \$ 229,306   |
| Case Coordination & Support                      | \$ -            | \$ 29,808           | \$ -               | \$ 29,808    |
| Transportation                                   | \$ -            | \$ 44,395           | \$ -               | \$ 44,395    |
| <b>In-Home Services</b>                          | \$ 4,000        | \$ 196,400          | \$ 176,052         | \$ 376,452   |
| <b>In-Home Services</b>                          | \$ 4,000        | \$ 196,400          | \$ 176,052         | \$ 376,452   |
| Assistive Devices & Technologies                 | \$ -            | \$ -                | \$ 16,666          | \$ 16,666    |
| Chore Services                                   | \$ -            | \$ 11,000           | \$ -               | \$ 11,000    |
| Friendly Reassurance                             | \$ 4,000        | \$ 4,900            | \$ -               | \$ 8,900     |
| Homemaker  | \$ -            | \$ 108,000          | \$ 77,720          | \$ 185,720   |
| Medication Management                            | \$ -            | \$ -                | \$ 16,666          | \$ 16,666    |
| Personal Care                                    | \$ -            | \$ 72,500           | \$ 65,000          | \$ 137,500   |
| <b>Community Services</b>                        | \$ 2,500        | \$ 58,581           | \$ 5,600           | \$ 66,681    |
| <b>Community Regional Services</b>               | \$ 2,500        | \$ 3,650            | \$ 5,600           | \$ 11,750    |
| Community Living Program Services (RSD)          | \$ -            | \$ -                | \$ 5,600           | \$ 5,600     |
| Gap Filling/Special Needs(RSD)                   | \$ 2,500        | \$ 3,650            | \$ -               | \$ 6,150     |
| <b>Community Services</b>                        | \$ -            | \$ 54,931           | \$ -               | \$ 54,931    |
| Disease Prevention/Health Promotion              | \$ -            | \$ 11,631           | \$ -               | \$ 11,631    |
| Home Repair                                      | \$ -            | \$ 9,000            | \$ -               | \$ 9,000     |
| Legal Assistance                                 | \$ -            | \$ 14,300           | \$ -               | \$ 14,300    |
| Ombudsman  | \$ -            | \$ 20,000           | \$ -               | \$ 20,000    |
| <b>Nutrition Services</b>                        | \$ -            | \$ 697,471          | \$ -               | \$ 697,471   |
| <b>Nutrition Services</b>                        | \$ -            | \$ 697,471          | \$ -               | \$ 697,471   |
| Congregate Meals                                 | \$ -            | \$ 178,711          | \$ -               | \$ 178,711   |
| Home-Delivered Meals                             | \$ -            | \$ 518,760          | \$ -               | \$ 518,760   |
| <b>Caregivers of Older Adults Services</b>       | \$ 40,000       | \$ 144,473          | \$ -               | \$ 184,473   |
| <b>Access Assistance</b>                         | \$ 40,000       | \$ -                | \$ -               | \$ 40,000    |
| Caregiver Information and Assistance             | \$ 40,000       | \$ -                | \$ -               | \$ 40,000    |
| <b>Counseling/Support Groups/Training</b>        | \$ -            | \$ 10,235           | \$ -               | \$ 10,235    |
| Caregiver Support Groups                         | \$ -            | \$ 9,680            | \$ -               | \$ 9,680     |
| Caregiver Training                               | \$ -            | \$ 555              | \$ -               | \$ 555       |
| <b>Information Services</b>                      | \$ -            | \$ 18,500           | \$ -               | \$ 18,500    |
| Caregiver Education (use for Caregiver Outreach) | \$ -            | \$ 18,500           | \$ -               | \$ 18,500    |
| <b>Respite Services</b>                          | \$ -            | \$ 89,850           | \$ -               | \$ 89,850    |
| Adult Day Services                               | \$ -            | \$ 47,500           | \$ -               | \$ 47,500    |
| Respite Care – In-Home Respite                   | \$ -            | \$ 42,350           | \$ -               | \$ 42,350    |
| <b>Supplemental Services</b>                     | \$ -            | \$ 25,888           | \$ -               | \$ 25,888    |
| Caregiver Supplemental - Transportation          | \$ -            | \$ 25,888           | \$ -               | \$ 25,888    |
| <b>Grand Total</b>                               | \$ 155,806      | \$ 1,171,128        | \$ 301,652         | \$ 1,628,586 |