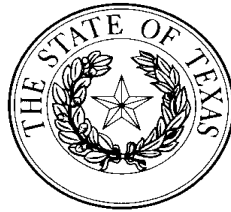


Service Definitions  
for  
Area Agencies on Aging



Texas Health and Human Services  
Commission

Fiscal Year 2021

This document includes services which may be provided through an Area Agency on Aging (AAA). Because resources vary across the state, not every service will be available from every AAA in Texas.

## **TERMINOLOGY**

- Caregiver:** *A person providing informal support who meets eligibility requirements described in the attached chart.*
- Contract:** *A legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal award. The term as used in this part does not include a legal instrument, even if the non-Federal entity considers it a contract, when the substance of the transaction meets the definition of a Federal award or subaward.*
- Contractor:** *An entity that receives a contract as defined in Contract.*
- Delegated Purchase:** *A non-competitive purchase of goods or services, also known as a “spot” purchase. A contract or purchase agreement is not required, but the AAA must comply with its organization’s fiscal policy and procedures for delegated purchases.*
- Direct Service:** *A service funded by HHSC which is supported or provided by a AAA without an intervening agency, instrumentality or other influence.*
- Estimated Audience:** *Estimated number of eligible persons potentially reached through activities directed to audiences using mass media, such as publications, public service announcements, conducting media campaigns and caregiver symposiums.*
- Estimated Persons Count:** *Estimated number of eligible persons in an activity provided at a group event or other similar activity. Documentation supporting audience participation may include an activity log, sign-in sheet or event summary designed by the AAA. Documentation must include an agenda/title of event, date of event and brief description.*
- Non-Direct Service:** *A service funded by HHSC which is provided by a AAA through a subrecipient, purchased through a contractor, or by delegated purchase.*
- Pass-through Entity:** *A non-Federal entity that provides a subaward to a subrecipient to carry out part of a Federal program.*
- Recipient:** *A non-Federal entity that receives a Federal award directly from a Federal awarding agency to carry out an activity under a Federal program. The term recipient does not include subrecipients. See also 2 CFR § 200.69 Non-Federal entity.*  
*A non-state entity that expends state awards received directly from a state awarding agency to carry out a state program.*

**Reimbursement Methodology by AAA:**

*Description of the method of the AAA's reimbursement to subrecipients/contractors.*

**Subaward:**

*An award provided by a pass-through entity to a subrecipient for the subrecipient to carry out part of a Federal award received by the pass-through entity. It does not include payments to a contractor or payments to a person that is a beneficiary of a Federal program. A subaward may be provided through any form of legal agreement, including an agreement that the pass-through entity considers a contract.*

**Subrecipient:**

*A non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include a person that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency.*

**Unduplicated Persons Count:**

*An actual count of eligible people who are receiving or have received a service. When initially served each new person is counted one time, by service, in each fiscal year. A full Client Intake and other appropriate documents are required.*

**Unit of Service:**

*Description of the quantity adopted as a standard of measurement; may include limitations or descriptors of the unit of service.*

# SERVICES

## AREA AGENCY ADMINISTRATION

Includes such responsibilities as being the focal point for aging services, providing advocacy and outreach for older people in their service area, developing and implementing an area plan based on the Older Americans Act (OAA), procurement of OAA services funded with federal and state funds, contract negotiation, reporting, reimbursement, accounting, auditing, monitoring, and quality assurance.

Unit of Service: None.  
Direct Service Waiver Required: Waiver not available.

**ALLOWABLE FUNDS:** Title III-B  
Title III-C1  
Title III-C2  
Title III-E  
State General Revenue

## CARE COORDINATION

Ongoing process to assess the needs of an older person and effectively plan, arrange, coordinate and follow-up on services which most appropriately meet the identified needs as mutually defined by the older person, the access and assistance staff, and where appropriate, a family member(s) or other caregiver(s). A Consumer Needs Evaluation must be conducted for every person receiving Care Coordination.

Unit of Service: One Hour. A unit is defined as the time, which is spent by staff, or qualified designee, engaged in working for an eligible person. A unit does not include travel time, staff training, program publicity, or direct services other than care coordination.

Direct Service Waiver Required: No.

Method of Service Provision: This service may be provided directly or by a subrecipient of the AAA.

Reimbursement Methodology by AAA: Fixed Unit Rate, plus other expenses, or Fixed Unit Rate

**NAPIS:** “Case Management”  
Unduplicated – Client Intake required  
Units – 1 Hour of service

**OAA:** ADL/IADL Consumer Needs Evaluation

**QPR:** Units  
Unduplicated persons count

**LBB:** Key Performance Measure – number of persons & cost/person

**ALLOWABLE FUNDS:** Title III-B  
Disaster Relief as approved by HHSC  
State General Revenue

## **CAREGIVER EDUCATION and TRAINING**

Counseling to caregivers to assist in decision-making and problem-solving related to the caregiver role. Includes providing counseling to persons and support groups; and caregiver training for individual caregivers and families.

<u>Unit of Service:</u>	One Session per eligible person. A session is counted as a contact for each person attending a focus group, support group or training session and for each one-on-one counseling session with an eligible caregiver.
<u>Direct Service Waiver Required:</u>	No.
<u>Method of Service Provision:</u>	This service may be provided directly, by a subrecipient of the AAA, or authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.
<u>Reimbursement Methodology by AAA:</u>	Cost Reimbursement or Fixed Unit Rate per Session.

<b>NAPIS:</b>	<b>“Counseling” and includes Support Groups/Training Unduplicated – Client Intake required Units – 1 Session per person Relationship to care recipient</b>
<b>QPR:</b>	<b>Units Unduplicated Persons Count</b>
<b>ALLOWABLE FUNDS:</b>	<b>Title III-E Title III-E ORC (formerly GOECSC) Title VII – EAP Disaster Relief as approved by HHSC State General Revenue</b>

## **CAREGIVER INFORMATION SERVICES**

The dissemination of accurate, timely and relevant information for informal caregivers, older relative caregivers caring for children 18 years of age and under; and the public through publications, large group presentations, seminars, health fairs and mass media. Developing a resource library and other informational resources for use in the dissemination of caregiver information is a component of this service.

<u>Unit of Service:</u>	One activity. Count only one activity for each event. If provided in a group meeting or an event such as a health fair, each person receives a service; therefore, each eligible person is counted as one contact.
<u>Direct Service Waiver Required:</u>	No.
<u>Method of Service Provision:</u>	This service may be provided directly or by a subrecipient of the AAA.
<u>Reimbursement Methodology by AAA:</u>	Fixed Unit Rate, plus expenses, or Cost Reimbursement

<b>NAPIS:</b>	<b>“Information Services” Estimated Audience Units – One Activity</b>
<b>QPR:</b>	<b>Units Estimated Audience</b>
<b>ALLOWABLE FUNDS:</b>	<b>Title III-E</b>

**Title III-E ORC (formerly GOECSC)  
Title VII – EAP  
Disaster Relief as approved by HHSC  
State General Revenue**

**CAREGIVER RESPITE CARE – IN HOME**

Temporary relief for caregivers including an array of services provided to a dependent older person who needs supervision. Services are provided in the older person’s home environment on a short-term, temporary basis while the primary caregiver is unavailable or needs relief. In addition to supervision, services may include meal preparation, housekeeping, assistance with personal care and social and recreational activities.

The Care Recipient:

- Must be unable to perform a minimum of two activities of daily living identified through the consumer needs evaluation (CNE); or
- Due to a cognitive or other mental impairment, requires substantial supervision because the care recipient behaves in a manner that poses a serious health or safety hazard to themselves or to another person.

<u>Unit of Service:</u>	One Hour.
<u>Direct Service Waiver Required:</u>	Waiver not available.
<u>Method of Service Provision:</u>	This service may only be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.
<u>Reimbursement Methodology by AAA:</u>	Fixed Unit Rate per Hour.

**NAPIS:**

**“Respite Care”  
Unduplicated – Client Intake required  
Units – 1 Hour of service  
Relationship to care recipient**

**OAA:**

**ADL/IADL Consumer Needs Evaluation required**

**QPR:**

**Units  
Unduplicated Persons Count**

**ALLOWABLE FUNDS:**

**Title III-E  
Title III-E ORC (formerly GOECSC)  
Title VII – EAP  
Disaster Relief as approved by HHSC  
State General Revenue**

**CAREGIVER RESPITE CARE – INSTITUTIONAL**

Temporary relief for caregivers including an array of services provided in a congregate or residential setting (e.g., hospital, nursing home, or day activity and health services (DAHS) facility) to a dependent older person who is in need of supervision. Services are offered on a short-term, temporary basis while the primary caregiver is unavailable or needs relief. Where appropriate, services may include meals, social and recreational activities, personal care, monitoring of health status, medical procedures and transportation.

The Care Recipient:

- Must be unable to perform a minimum of two activities of daily living identified through the CNE, or

- Due to a cognitive or other mental impairment, requires substantial supervision because the older person behaves in a manner that poses a serious health or safety hazard to themselves or to another person.

Unit of Service: One Hour.  
Direct Service Waiver Required: Waiver not available.  
Method of Service Provision: This service may only be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.  
Reimbursement Methodology by AAA: Fixed Unit Rate per Hour.

**NAPIS:** “Respite Care”  
**Unduplicated – Client Intake required**  
**Units – 1 Hour of service**  
**Relationship to care recipient**  
**OAA:** **ADL/IADL Consumer Needs Evaluation Required**  
**QPR:** **Units**  
**Unduplicated Persons Count**  
**ALLOWABLE FUNDS:** **Title III-E**  
**Title III-E ORC (formerly GOECSC)**  
**Title VII – EAP**  
**Disaster Relief as approved by HHSC**  
**State General Revenue**

**CAREGIVER RESPITE CARE – NON-RESIDENTIAL**

Temporary relief for caregivers provided by supervised care at senior centers or other non-residential program locations that are not licensed as day activity and health services (DAHS) facilities. Activities include lunch and supervised recreational and social activities for a dependent older person who requires supervision. Services are provided on an intermittent or temporary basis while the primary caregiver is unavailable or needs relief.

The Care Recipient:

- Must be unable to perform a minimum of two activities of daily living identified through the CNE; or
- Due to a cognitive or other mental impairment, requires substantial supervision because the older person behaves in a manner that poses a serious health or safety hazard to themselves or to another person.

Unit of Service: One Hour. A unit is defined as one hour of non-residential respite service provided in a facility.  
Direct Service Waiver Required: Yes.  
Method of Service Provision: This service may be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.  
Reimbursement Methodology by AAA: Fixed Unit Rate per Hour.

**NAPIS:** “Respite Care”  
**Unduplicated – Client Intake required**  
**Units – 1 Hour of service**  
**Relationship to care recipient**  
**OAA:** **ADL/IADL Consumer Needs Evaluation required**

**QPR:**

**Units**

**ALLOWABLE FUNDS:**

**Unduplicated Persons Count**

**Title III-E**

**Title III-E ORC (formerly GOECSC)**

**Title VII – EAP**

**Disaster Relief as approved by HHSC**

**State General Revenue**

**CAREGIVER RESPITE CARE- VOUCHER**

A service provided through the consumer directed services option whereby an individual provider is chosen by the caregiver. Services are provided on an intermittent or temporary basis while the primary caregiver is unavailable or needs temporary relief by providing:

- In-Home – Services are provided in the older person’s home environment on a short-term, temporary basis while the primary caregiver is unavailable or needs relief. In addition to supervision, services may include meal preparation, housekeeping, assistance with personal care, and social and recreational activities.
- Institutional – Temporary relief for caregivers includes an array of services provided in a congregate or residential setting (e.g., hospital, nursing home, or day activity and health services (DAHS) facility) to a dependent older person who is in need of supervision. Services may include, where appropriate, meals, social and recreational activities, personal care, monitoring of health status, medical procedures and transportation.
- Supervised care at senior centers or other non-residential program locations that are not licensed as DAHS facilities. Activities include lunch and supervised recreational and social activities for a dependent older person who requires supervision.

The Care Recipient:

- Must be unable to perform a minimum of two activities of daily living identified through the CNE; or
- Due to a cognitive or other mental impairment, requires substantial supervision because the care recipient behaves in a manner that poses a serious health or safety hazard to themselves or to another person.

Unit of Service:

One Hour. A unit is defined as one hour of in-home, institutional or non-residential respite service provided.

Direct Service Waiver Required:

Waiver not available.

Method of Service Provision:

This service may only be authorized by a care coordinator on behalf of an eligible person.

Reimbursement Methodology by AAA:

Cost Reimbursement.

**NAPIS:**

**“Respite Care”**

**Unduplicated – Client Intake required**

**Units – 1 Hour of Service**

**OAA:**

**ADL/IADL Consumer Needs Evaluation required**

**QPR:**

**Units**

**Unduplicated Persons Count**

**ALLOWABLE FUNDS:**

**Title III-E**

**Title III-E ORC (formerly GOECSC)**

**Title VII-EAP**

**Disaster Relief as approved by HHSC**



**State General Revenue**

**CAREGIVER SUPPORT COORDINATION**

Ongoing process to assess the needs of a caregiver and care recipient and to effectively plan, arrange, coordinate and follow-up on services which most appropriately meet the identified needs as mutually defined by the caregiver, the care recipient, and the access and assistance staff.

- Unit of Service: One Hour. A unit is defined as the time, which is spent by the caregiver specialist, or qualified designee, engaged in working for an eligible caregiver. A unit does not include travel time, staff training, program publicity or direct services other than caregiver support coordination ***and***
- Unit of Service: One Contact. A unit is defined as providing an eligible caregiver with information or linking the caregiver to the services and resources available through a one-on-one contact via face-to-face contact, email contact, written/fax contact or telephone contact. Activities such as records maintenance is not counted as a contact. For Title III-E funds expended for this service, the number of “contacts” must be reported in SAMS.
- Direct Service Waiver Required: No.
- Method of Service Provision: This service may be provided directly or by a subrecipient of the AAA.
- Reimbursement Methodology by AAA: Fixed Unit Rate, plus other expenses or Fixed Unit Rate.

- NAPIS:** “Access Assistance”  
**Estimated Unduplicated Caregivers Relationship to Care Recipient**  
**Units – 1 contact**
- QPR:** **Units**  
**Unduplicated Persons Count – Client Intake required**
- ALLOWABLE FUNDS:** **Title III-E**  
**Title III-E ORC (formerly GOECSC)**  
**Disaster Relief as approved by HHSC**  
**State General Revenue**

**CHORE MAINTENANCE**

Performing household chores which an older person is not able to handle on their own, such as heavy cleaning (e.g., scrubbing floors, washing walls, or washing windows inside and outside), moving heavy furniture, or maintenance such as yard/sidewalk maintenance.

- Unit of Service: One Hour.
- Direct Service Waiver Required: Waiver not available.
- Method of Service Provision: This service may be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor, or through a delegated purchase.

Reimbursement Methodology by AAA: Variable Unit Rate per Hour.

**NAPIS:**

**“Chore”**

**Unduplicated – Client Intake required  
Units – 1 Hour of service**

**OAA:**

**ADL/IADL Consumer Needs Evaluation required**

**QPR:**

**Units**

**Unduplicated Persons Count**

**ALLOWABLE FUNDS:**

**Title III-B**

**Title III-E**

**Title III-E ORC (formerly GOECSC)**

**Title VII – EAP**

**Disaster Relief as approved by HHSC**

**State General Revenue**

### **CONGREGATE MEAL**

A hot or other appropriate meal served to an eligible older person which meets 33 $\frac{1}{3}$  percent of the dietary reference intakes established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences and complies with the most recent Dietary Guidelines for Americans, published by the Secretary of Agriculture and the Secretary of Health and Human Services, and which is served in a congregate setting. The objective is to reduce food insecurity and promote socialization of older people. There are two types of congregate meals:

- Standard meal - A regular meal from the standard menu that is served to the majority or all of the recipients.
- Therapeutic meal or liquid supplement - A special meal or liquid supplement that has been prescribed by a physician and is planned specifically for the person by a dietitian (e.g., diabetic diet, renal diet, pureed diet, tube feeding). “Liquid supplement” meals are included in the allowable category of therapeutic meals, such as diabetic, renal or heart safe meals. The Administration on Aging defines "liquid supplement" meals as those meals provided through a feeding tube to meet the needs of a person. These meals require a doctor’s prescription and close monitoring.

**Note:** Dietary supplements, such as vitamins or Ensure, can be authorized by a doctor or dietitian/nutritionist or authorized because of a need identified through the nutritional risk assessment. These items do not require a prescription, nor do they necessarily require oversight. As items such as these are not considered meals (stand-alone), they must be purchased under Health Maintenance. If a AAA is providing these services through Health Maintenance as a result of a doctor’s prescription, some monitoring should be conducted, whether through a home health nurse or follow-up nutritional risk and functional assessment (CNE). The circumstance would dictate the follow-up.

Unit of Service:

One Meal.

Direct Service Waiver Required:

Yes.

Method of Service Provision:

This service may be provided by a subrecipient of the AAA or authorized by a care coordinator on behalf of an eligible person for purchase through a contractor. If requirements are met, this service may also be authorized through Data Management.

Reimbursement Methodology by AAA:

Fixed Unit Rate per Meal served.

**NAPIS:**

**“Congregate Meal’  
Unduplicated – Client Intake required  
Requires number of unduplicated at high nutritional risk;  
Nutrition Risk required  
Units – 1 Meal**

**QPR:**

**Units  
Unduplicated Persons Count**

**LBB:  
ALLOWABLE FUNDS:**

**Key Performance Measure – Number of Units & Cost per Unit  
Title III-C1  
Disaster Relief as approved by HHSC  
State General Revenue  
NSIP [NOTE: NSIP to be used for the purchase of food only. No units  
should be applied to NSIP funding.]**

**DATA MANAGEMENT**

Activities directly related to data entry and reporting for non-direct services. Included are activities directly related to direct purchase of service, service authorization and document verification to support the provision, tracking and reporting of congregate meals, home delivered meals and transportation services. Also included is the validation of complete and accurate data in the HHS statewide system and report preparation by AAA Staff in support of the annual State Program Report (SPR) and the quarterly performance report.

Unit of Service:

None.

Direct Service Waiver Required:

No.

Method of Service Provision:

This service may be provided directly or by a subrecipient of the AAA.

Reimbursement Methodology by AAA:

Cost Reimbursement.

**ALLOWABLE FUNDS:**

**Title III-B  
Title III-C1  
Title III-C2  
Title III-E  
Disaster Relief as approved by HHSC  
State General Revenue**

**DAY ACTIVITY AND HEALTH SERVICES**

Services provided in a congregate, non-residential setting to a dependent older person who needs supervision but do not require institutionalization. These services may include any combination of social and recreational activities, health maintenance, transportation, meals, and other supportive services.

Unit of Service:

A half (½) day. Three hours but less than six hours of service provided by the facility shall constitute one unit of service. Six hours or more of service shall constitute two units of service. Time spent for transportation to and from day care, if provided by the facility, is included in calculating the amount of service provided. Less than three hours of service at any one time is not considered to be a unit of service.

Direct Service Waiver Required:

Waiver not available.

Method of Service Provision: This service may only be authorized by a service coordinator on behalf of an eligible person for purchase through a contractor.

Reimbursement Methodology by AAA: Fixed Unit Rate per Half-day.

**NAPIS:** “Adult Day Care / Health”  
Unduplicated – Client Intake required  
Units - 1 Hour of service

**OAA:** ADL/IADL Consumer Needs Evaluation required

**QPR:** Units – A Half-Day  
Unduplicated Persons Count

**ALLOWABLE FUNDS:** Title III-B  
Title VII-EAP  
Disaster Relief as approved by HHSC  
State General Revenue

### **EMERGENCY RESPONSE**

Services for a homebound, frail older person provided to establish an automatic monitoring system which links to emergency medical services when the person’s life or safety is in jeopardy. ERS services include the installation of the individual monitoring unit, key lockbox, training associated with the use of the system, periodic checking to ensure that the unit is functioning properly, equipment maintenance calls, response to an emergency call by a medical professional, para-professional or volunteer, and follow-up with the older person.

Unit of Service: One Month of ERS Service. Report one unit for each month of service if an older person received services at any time during the month. If an installation fee is charged, a separate unit rate may be established for this charge.

Direct Service Waiver Required: Waiver not available.

Method of Service Provision: This service may only be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.

Reimbursement Methodology by AAA: Fixed Unit Rate and Other Expenses.

**QPR:** Units  
Unduplicated Persons Count – Client Intake required

**ALLOWABLE FUNDS:** Title III-B  
Title III-E  
Title VII – EAP  
Disaster Relief as approved by HHSC  
State General Revenue

### **EVIDENCE-BASED INTERVENTION**

Providing an intervention to an older person based upon the principles of evidence-based intervention (EBI) programming.

#### ***Definition of Evidence-Based Programs (as of October 1, 2020)***

- *Demonstrated through evaluation to be effective for improving the health and well-being or reducing disease, disability and/or injury among older adults; and*

- *Proven effective with older adult population, using Experimental or Quasi-Experimental Design; and*
- *Research results published in peer-review journal; and*
- *Fully translated in one or more community site(s); and*
- *Includes developed dissemination products that are available to the public.*

Activities and expenditures directly related to an evidence-based intervention program:

- Procurement of training services or mandatory materials needed to implement specific EBI groups/sessions/classes,
- Training of AAA staff or volunteers to effectively implement specific EBI groups/sessions/classes,
- Publicity related to events to promote specific EBI groups/sessions/classes,
- AAA staff time, travel, and materials needed to conduct specific EBI groups/sessions/classes,
- Procurement or printing/copying of materials mandatory to implement specific EBI groups/sessions/classes, and
- Other expenses which are required to ensure and maintain the fidelity of EBI programs. **Fidelity** is defined as the commitment by the organization to fully implement the program with integrity to its original design and how the delivery of an intervention faithfully follows the outline and content of the program as specified in the program materials (per NCOA website’s “Offering Evidence-Based Programs”).

AAAs may use:

- Title III funds;
- funding from other community resources;
- grants from other federal, state, or community organizations/foundations; or
- any combination of Title III funds, grants or other community resources.

AAAs are encouraged to collaborate with community agencies and organizations to provide these programs. This can include providing financial resources, technical assistance, referrals, and training to staff and partners; locating facilities; organizing schedules for the classes/events; and conducting classes/events.

Unit of Service:

One Contact. Record one contact each time an older person participates in an activity that is a component of an evidence-based intervention program. *See EBI Job Aide for specific data recording requirements.*

Direct Service Waiver Required:

Waiver not available.

Method of Service Provision:

This service may be provided directly, provided by a subrecipient of the AAA, or authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.

Reimbursement Methodology by AAA:

Fixed Unit rate per Contact or Cost Reimbursement.

**QPR:**

**Units**

**ALLOWABLE FUNDS:**

**Unduplicated Persons Count – Client Intake required**

**Title III-B**

**Title III-D [NOTE: Title III-D funds may only be expended under this service for the activities and expenditures directly related to specific approved programs. Additionally, caregivers under age 60 may not receive evidence-based services using Title III-D funds]**

**Title III-E [NOTE: An Area Agency on Aging may choose to provide services to caregivers under age 60 using Title III-E funds if eligibility requirements are met]  
Title III-E ORC (formerly GOECSC)  
State General Revenue**

## **HEALTH MAINTENANCE**

Services that include one or more of the following activities:

- Medical treatment by a health professional
- Health education and counseling services for persons or groups about lifestyles and daily activities. Activities may include, but are not limited to:
  - Art and dance –movement therapy
  - Programs in prevention or reduction of the effects of chronic disabling conditions
  - Alcohol and substance abuse
  - Smoking cessation
  - Weight loss and control
  - Stress management
- Home health services including, but not limited to, nursing, physical therapy, speech therapy, or occupational therapy
- Provision of medications, nutritional supplements, glasses, dentures, hearing aids or other devices necessary to promote or maintain the health or safety of the older person. Note: this also includes the provision of dosage alert systems and the purchase of software, technical support, and materials that connects eligible older persons to free or reduced cost prescription medication services.

Unit of Service:

One Contact. Record one contact each time an older person receives a health service as described above.

Direct Service Waiver Required:

Waiver not available.

Method of Service Provision:

This service may be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor, or through a delegated purchase.

Reimbursement Methodology by AAA:

Variable Rate.

**QPR:**

**Units**

**ALLOWABLE FUNDS:**

**Unduplicated Persons Count – Client Intake required**

**Title III-B**

**Title III-E**

**Title III-E ORC (formerly GOECSC)**

**Title VII-EAP**

**Disaster Relief as approved by HHSC**

**State General Revenue**

## **HEALTH SCREENING/MONITORING**

Activities identified as Health Screening/Monitoring are intended to assess the level of health and wellness of a person 60 years of age and older and should ensure the eligible person is made aware of health services available in their community for appropriate follow-up care. Services may be provided in senior centers, nutrition sites, health fairs, or other community settings or in a person's home. Health Screening/Monitoring activities may include, but are not limited to, the following:

- Blood pressure
- Hearing

- Vision
- Dental
- Podiatry
- Nutritional status
- Blood tests
- Urinalysis
- Home injury control safety
- Depression
- Oral Health
- Mental and Behavioral Health
- Falls Prevention

Unit of Service:

One Contact. Record one contact each time an older person receives a separate health screening or monitoring service.

Direct Service Waiver Required:

Waiver not available.

Method of Service Provision:

This service may be provided by a subrecipient of the AAA, authorized by a care coordinator on behalf of an eligible person for purchase through a contractor, or through a delegated purchase.

Reimbursement Methodology by AAA:

Variable Unit Rate.

**QPR:**

**Units**

**ALLOWABLE FUNDS:**

**Estimated Persons Count**

**Title III-B**

**Disaster Relief as approved by HHSC**

**State General Revenue**

## **HICAP ASSISTANCE**

Counseling or representation by a non-lawyer such as a certified Benefits Counselor, where permitted by law, to Medicare beneficiaries, family members, caregivers or others working on behalf of an eligible person. An eligible person is one of the following:

- A Medicare beneficiary;
- A new to Medicare enrollee;
- A dually-eligible Medicare beneficiary;
- A beneficiary who is disabled as determined by Social Security Administration criteria; or
- A person assisting a Medicare beneficiary and the person receives assistance related to a Medicare or State Health Insurance Assistance Program (SHIP) topic or both.

Assistance includes all contacts for the purpose of relaying Medicare and SHIP-related information between a counselor and an eligible person. SHIP Assistance activities include the following:

- Advice/Counseling - A recommendation involving Medicare benefits and related topics made to an eligible person regarding a course of conduct, or how to proceed in a matter, given either on a brief or one-time basis, or on an ongoing basis. May be given by telephone or in person.
- Document Preparation - One-on-one assistance given to an eligible person which helps in the preparation of documents related to Medicare and SHIP-related public entitlements, or health/long term care insurance.

- Representation - Advocacy on behalf of an eligible person in protesting or complaining about a procedure or seeking special considerations by appealing an administrative decision related to Medicare benefits.

Unit of Service:

One Contact. When the AAA receives Administration for Community Living (ACL) HICAP funds, contacts must be reported through the Beneficiary Contact Form (BCF) for allowable ACL services. *The BCF also requires reporting of total time spent with a person per day.*

Direct Service Waiver Required:

No.

Method of Service Provision:

This service may be provided directly, provided by a subrecipient of the AAA, or authorized by a certified benefits counselor on behalf of an eligible person for purchase through a contractor. Client contacts may be conducted over the telephone, in person (on site), in person (at home), via postal mail, e-mail, fax, or web-based one-on-one chat sessions (where technology permits) or video based real time interactions with clients over the web. *Note: Postal mail, email or fax to be selected when this is the only means of contact with the beneficiary.*

**QPR:**

**ALLOWABLE FUNDS:**

**Expenditures**

**HICAP (SHIP Basic)**

**HICAP OUTREACH**

The dissemination of accurate, timely, and relevant information, eligibility criteria, requirements, and procedures to Medicare beneficiaries and other target audiences about Medicare, public entitlements when related to low-income assistance for healthcare affordability, health/long-term care insurance, individual beneficiary rights, and health insurance planning/protection options. Education and outreach initiatives that include the dissemination of information through mass media may be budgeted. Units generated under these activities must be reported using the Group and Media (GAM) form. If a GAM event results in a benefits counselor providing HICAP Assistance to a person, a Beneficiary Contact Form (BCF) must also be completed.

A group outreach activity includes:

- An interactive presentation to the public either in-person or via electronic means, such as video conference, webinar, or teleconference;
- A booth or exhibit at a conference, or other public event, such as a health fair, senior fair, or community event; or
- An enrollment event.

A media outreach activity is one where general program or Medicare information is shared through a type of media which may include:

- Billboard;
- Mass email;
- Social media;
- Website;
- Magazine, newspaper, newsletter, radio, television; or



- Printed information distributed through direct mail or by placement in local offices, libraries, or partner locations.

Unit of Service: One Contact is one outreach activity with the estimated number of attendees recorded. *The GAM form also requires reporting of total time spent on the event.*

Direct Service Waiver Required: No.

Method of Service Provision: This service may be provided directly or by a subrecipient of the AAA.

Reimbursement Methodology by AAA: Cost Reimbursement.

**QPR:** **Expenditures**  
**ALLOWABLE FUNDS:** **HICAP (SHIP Basic)**

### **HOME DELIVERED MEALS**

Hot, cold, frozen, dried, canned, fresh, or supplemental food (with a satisfactory storage life) which provides a minimum of 33⅓ percent of the dietary reference intakes established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences and complies with the most recent Dietary Guidelines for Americans, published by the Secretary of Agriculture and the Secretary of Health and Human Services, and is delivered to an eligible person in their place of residence. The objective is to reduce food insecurity and help the eligible person sustain independent living in a safe and healthful environment. There are two types of home delivered meals:

- Standard meal - A regular meal from the standard menu that is served to the majority or all of the eligible people.
- Therapeutic meal or liquid supplement - A special meal or liquid supplement that has been prescribed by a physician and is planned specifically for the eligible person by a dietitian (e.g., diabetic diet, renal diet, pureed diet, tube feeding). “Liquid supplement” meals are included in the allowable category of therapeutic meals, such as diabetic, renal or heart safe meals. The Administration on Aging defines "liquid supplement" meals as those meals provided through a feeding tube, to meet the needs of a person. These meals require a doctor’s prescription and close monitoring.

**Note:** Dietary supplements, such as vitamins or Ensure, can be authorized by a doctor or dietitian/nutritionist or authorized because of a need identified through the nutritional risk assessment. These items do not require a prescription, nor do they necessarily require oversight. These items are not considered meals (stand-alone) and must be purchased under Health Maintenance. If a AAA is providing these services through Health Maintenance as a result of a doctor’s prescription, some monitoring should be conducted, either through a home health nurse or follow-up nutritional risk and functional assessment (Consumer Needs Evaluation). The circumstance would dictate the follow-up.

Unit of Service: One Meal.

Direct Service Waiver Required: Yes.

Method of Service Provision: This service may be provided by a subrecipient of the AAA or authorized by a care coordinator on behalf of an eligible person for purchase through a contractor. If requirements are met, this service may also be authorized through Data Management.

Reimbursement Methodology by AAA: Fixed Unit Rate per Meal Served.

**NAPIS:** “Home-Delivered Meal”  
Requires number of unduplicated at high nutritional risk;  
Nutrition Risk Assessment required  
Unduplicated – Client Intake required  
Units – 1 Meal

**OAA:** ADL/IADL Consumer Needs Evaluation required with score 20  
or greater, regardless of age

**QPR:** Units  
Unduplicated Persons Count

**LBB:** Key Performance Measure – Number of Units & Cost per Unit

**ALLOWABLE FUNDS:** Title III-C2  
Title III-E  
Disaster Relief as approved by HHSC  
State General Revenue  
NSIP [NOTE: NSIP to be used for the purchase of food only. No units  
should be applied to NSIP funding.]

### **HOMEMAKER**

A service provided by trained and supervised homemakers involving the performance of housekeeping and home management, meal preparation, or escort tasks and shopping assistance provided to an older person who requires assistance with these activities in their place of residence. The objective is to help the recipient sustain independent living in a safe and healthful home environment.

Unit of Service: One Hour.  
Direct Service Waiver Required: Waiver not available.  
Method of Service Provision: This service may only be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.

Reimbursement Methodology by AAA: Fixed Unit Rate per Hour.

**NAPIS:** “Homemaker”  
Unduplicated – Client Intake required  
Units – 1 Hour

**OAA:** ADL/IADL Consumer Needs Evaluation required

**QPR:** Units  
Unduplicated Persons Count

**LBB:** Key Performance Measure – Number of Persons & Cost/Person

**ALLOWABLE FUNDS:** Title III-B  
Title VII-EAP  
Disaster Relief as approved by HHSC  
State General Revenue

### **HOMEMAKER - VOUCHER**

A service provided through the consumer directed services option whereby an individual provider is chosen by the older person. Service activities include the performance of housekeeping/home management, meal preparation, escort tasks, and shopping assistance, provided to an older person who requires assistance with these activities in their place of residence. The objective is to help the older person sustain independent living in a safe and healthful home environment.

Unit of Service: One Hour.  
Direct Service Waiver Required: Waiver not available.  
Method of Service Provision: This service may only be authorized by a care coordinator on behalf of an eligible person.  
Reimbursement Methodology by AAA: Cost Reimbursement.

**NAPIS:** “Homemaker”  
**Unduplicated – Client Intake required**  
**Units – 1 Hour**

**OAA:** **ADL/IADL Consumer Needs Evaluation required**  
**QPR:** **Units**  
**Unduplicated Persons Count**

**ALLOWABLE FUNDS:** **Title III-B**  
**Title VII-EAP**  
**Disaster Relief as approved by HHSC**  
**State General Revenue**

**INCOME SUPPORT**

Assistance in the form of a payment to a third party provider for services or goods that support the basic needs of the person, on behalf of an older person or their caregiver.

Unit of Service: One Contact. The definition of the contact is a single payment to a provider on behalf of the older person or their caregiver.  
Direct Service Waiver Required: Waiver not available.  
Method of Service Provision: This service may only be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor or through a delegated purchase.  
Reimbursement Methodology by AAA: Variable Rate.

**QPR:** **Units**

**ALLOWABLE FUNDS:** **Unduplicated Persons Count – Client Intake required**  
**Title III-B**  
**Title III-E**  
**Title III-E ORC (formerly GOECSC)**  
**Disaster Relief as approved by HHSC**  
**Housing Bond**  
**State General Revenue**

**INFORMATION, REFERRAL AND ASSISTANCE**

Consists of activities such as assessing the needs of the inquirer, evaluating appropriate resources, assessing appropriate response modes, indicating organizations capable of meeting those needs, providing enough information about each organization to help inquirers make an informed choice, helping inquirers for whom services are unavailable by locating alternative resources and, when necessary, actively participating in linking the inquirer to needed services, and following up on referrals to ensure the service was provided.

Unit of Service: One Contact. Count one contact for every communication with or on the behalf of an eligible person, regardless of the type of contact (initial, follow-up, accessing services) ***and*** Count only the initial inquiry during a reporting month from an older person, caregiver or a person calling on behalf of an older person or caregiver.

Estimated Persons Count:

Direct Service Waiver Required: No.

Method of Service Provision: This service may be provided directly or by a subrecipient of the AAA.

Reimbursement Methodology by AAA: Fixed Unit Rate or Cost Reimbursement

**NAPIS:** “Information and Assistance”  
**Units – 1 Contact**  
**If funded by Title III-E, must have “Estimated Unduplicated Caregivers”**  
**If funded by Title III-E ORC must have “Estimated Undup. Older Relative Caregivers”**

**QPR:** **Units**  
**Estimated Persons Count (Initial Inquiry)**

**ALLOWABLE FUNDS:** **Title III-B**  
**Title III-E**  
**Title III-E ORC (formerly GOECSC)**  
**Title VII-EAP**  
**Disaster Relief as approved by HHSC**  
**State General Revenue**

**INSTRUCTION AND TRAINING**

Provide experience or knowledge to people or professionals working with an older person to acquire skills in a formal, informal, or in individual or group settings.

Unit of Service: One Contact. Each person in a training session receives a service; therefore, each eligible person is counted as one contact.

Direct Service Waiver Required: No.

Method of Service Provision: This service may be provided directly, provided by a subrecipient of the AAA, or authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.

Reimbursement Methodology by AAA: Cost Reimbursement.

**QPR:** **Units**  
**Estimated Persons Count**

**ALLOWABLE FUNDS:** **Title III-B**  
**Title VII-EAP**  
**State General Revenue**

**LEGAL ASSISTANCE – 60 years and older**

Advice or representation by an attorney, including assistance by a paralegal or law student under the supervision of an attorney, or counseling or representation by a non-lawyer such as a Certified Benefits

Counselor, where permitted by law, to an older person, or their caregiver with economic and social needs. Legal assistance activities include the following:

- Advice/Counseling - A recommendation made to an older person regarding a course of conduct, or how to proceed in a matter, given either on a brief or one-time basis, or on an ongoing basis. May be given by telephone or in person.
- Document Preparation - Personal assistance given to an older person which helps with the preparation of necessary documents relating to public entitlements, health care/long term care, individual rights, planning/protection options, and housing and consumer needs.
- Representation - Advocacy on behalf of an older person in protesting or complaining about a procedure, or seeking special considerations by appealing an administrative decision, or representation by an attorney of an older person or class of older people in either the state or federal court systems.

Services identified as “Legal Assistance Services” are: Benefits Counseling, Representative Payee, and Guardianship.

Unit of Service: One Hour. Record units (hours) of service for *all* people who are 60 or older in the eligible person’s case narrative, regardless of funding source. A unit does not include travel time, staff training, program publicity, or direct services other than legal assistance.

Direct Service Waiver Required: No.  
Method of Service Provision: This service may be provided directly, provided by a subrecipient of the AAA, or authorized by a certified benefits counselor on behalf of an eligible person for purchase through a contractor.

Reimbursement Methodology by AAA: Fixed Unit Rate per Hour.

**NAPIS:** “Legal Assistance”  
**Units – 1 Hour**  
**QPR:** Units  
**Unduplicated Persons Count – Client Intake required**  
**LBB:** Non-Key Performance Measure  
**ALLOWABLE FUNDS:** Title III-B  
 Title III-E  
 Title III-E ORC (formerly GOECSC)  
 Title VII-EAP  
 Disaster Relief as approved by HHSC  
 State General Revenue

**LEGAL AWARENESS**

The dissemination of accurate, timely, and relevant information, eligibility criteria, requirements, and procedures to an older person about public entitlements, health/long-term care services, individual rights, planning/protection options, and housing and consumer needs.

Unit of Service: One Contact. If provided in a group meeting or an event such as a health fair, each person receives a service; therefore, each eligible person is counted as one contact.

Direct Service Waiver Required: No.

Method of Service Provision: This service may be provided directly or by a subrecipient of the AAA.  
Reimbursement Methodology by AAA: Cost Reimbursement.

**QPR:**

**Units**

**ALLOWABLE FUNDS:**

**Estimated Persons Count**

**Title III-B**

**Title VII-EAP**

**Disaster Relief as approved by HHSC**

**State General Revenue**

### **MENTAL HEALTH SERVICES**

Assessment by a mental health professional to determine a need for mental health service(s) (diagnosis/screening) or the provision of services to support and improve the emotional well-being of a person. Mental health services shall be provided to a person who has mental health, emotional or socialization needs. The person may require support services, treatment and additional referrals to address these needs. Such support services may include education, prevention, screening, referral and intervention.

Unit of Service: One Contact.  
Direct Service Waiver Required: Waiver not available.  
Method of Service Provision: This service may only be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.  
Reimbursement Methodology by AAA: Variable.

**QPR:**

**Units**

**ALLOWABLE FUNDS:**

**Unduplicated Persons Count – Client Intake required**

**Title III-B**

**Title III-E**

**Title III-E ORC (formerly GOECSC)**

**Disaster Relief as approved by HHSC**

**State General Revenue**

### **MIPPA OUTREACH & ASSISTANCE**

The dissemination of accurate, timely, and relevant information, eligibility criteria, requirements, and procedures to current or prospective Medicare beneficiaries and their caregivers specifically regarding Medicare Savings Programs (MSP), Low-Income Subsidy (LIS) and Medicare Preventive Benefits. Contacts generated under these activities must be reported using a Beneficiary Contact Form (BCF) or the Group and Media (GAM) form. A BCF is entered when a person receives application assistance and the completed application is submitted in the same contact.

Unit of Service: One Contact. This is provided to one person through application assistance and submission, resulting in a BCF or a group of people receiving general education and awareness, resulting in a GAM. If provided in a group meeting or an event such as a health fair, each eligible person receives a service; therefore, each person is counted as one contact.

Direct Service Waiver Required: No.  
Method of Service Provision: This service may be provided directly or by a subrecipient of the AAA.

Reimbursement Methodology by AAA: Cost Reimbursement.

**QPR:**

**ALLOWABLE FUNDS:**

**Expenditures**

**MIPPA Priority 2 (AAA)**

### **NUTRITION CONSULTATION**

Providing information or services related to nutrition by a licensed dietitian or other qualified person to a AAA or nutrition provider. Such services do not include the AAA responsibilities for monitoring.

Unit of Service:

None.

Direct Service Waiver Required:

Waiver not available.

Method of Service Provision:

Service must be provided to the AAA or AAA nutrition provider.

Reimbursement Methodology by AAA:

Cost Reimbursement.

**ALLOWABLE FUNDS:**

**Title III-C1**

**Title III-C2**

**State General Revenue**

### **NUTRITION COUNSELING**

Providing personalized advice or guidance about options and methods for improving nutritional status performed one-on-one by a registered dietitian to an older person at nutritional risk due to health or nutritional history, dietary intake, medications, or chronic illness.

Unit of Service:

One Session per person. One session is counted for each session provided to an eligible person.

Direct Service Waiver Required:

Waiver not available.

Method of Service Provision:

This service may be provided by a subrecipient of the AAA or authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.

Reimbursement Methodology by AAA:

Fixed Unit Rate per Session.

**NAPIS:**

**“Nutrition Counseling”**

**Requires number of unduplicated at high nutritional risk;**

**Nutrition Risk Assessment required**

**Unduplicated – Client Intake required**

**Units – 1 Session per person**

**QPR:**

**Units**

**Unduplicated Persons Count**

**ALLOWABLE FUNDS:**

**Title III-C1**

**Title III-C2**

**State General Revenue**

### **NUTRITION EDUCATION**

The provision of information to an older person to promote nutritional well-being and to delay the onset of adverse health conditions resulting from poor nutritional health or sedentary behavior.

Unit of Service: One Session per person. A session is counted for each eligible person attending a nutrition education session which may be conducted in a group or one-on-one.

Direct Service Waiver Required: No.

Method of Service Provision: This service may be provided directly, provided by a subrecipient of the AAA, or authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.

Reimbursement Methodology by AAA: Fixed Unit Rate per Session.

**NAPIS:** “Nutrition Education”  
**Units – 1 Session per person**

**QPR:** **Units**  
**Estimated Persons Count**

**ALLOWABLE FUNDS:** **Title III-C1**  
**Title III-C2**  
**State General Revenue**

**OMBUDSMAN**

Services to protect the health, safety, welfare, and rights of residents of nursing facilities and assisted living facilities, including identifying, investigating, and resolving complaints that are made by, or on behalf of, residents. Further detail is provided in the Older Americans Act, Section 712.

Unit of Service: None.

Direct Service Waiver Required: No.

Method of Service Provision: This service may be provided directly or by subrecipient of the AAA.

Reimbursement Methodology by AAA: Cost Reimbursement.

**LBB:** **Key Performance Measure – Number of active Certified Ombudsman**

**ALLOWABLE FUNDS:** **Title III-B**  
**Title VII-EAP**  
**Title VII-OM**  
**Disaster Relief as approved by HHSC**  
**State General Revenue**  
**OMB ALF**

**PARTICIPANT ASSESSMENT – ACCESS & ASSISTANCE**

Activities directly related to the initial assessment and required reassessment of an older person for supportive services provided directly by a AAA.

Unit of Service: One Contact. One complete assessment or one complete re-assessment is one contact.



Direct Service Waiver Required:  
Method of Service Provision:

Waiver not available.  
This service may be provided by a subrecipient of the AAA or authorized by a care coordinator or caregiver support coordinator on behalf of an eligible person for purchase through a contractor.

Reimbursement Methodology by AAA:

Fixed Unit Rate, plus Other Expenses or  
Fixed Unit Rate per Contact

**QPR:**

**Units**

**ALLOWABLE FUNDS:**

**Unduplicated Persons Count – Client Intake required**

**Title III-B**

**Title III-E**

**Title III-E ORC (formerly GOECSC)**

**Disaster Relief as approved by HHSC**

**State General Revenue**

### **PARTICIPANT ASSESSMENT – NUTRITION SERVICES**

Activities directly related to the initial assessment and required reassessment of a person for congregate and home-delivered meals.

Unit of Service:

One Contact. One complete assessment or one complete re-assessment is one contact.

Direct Service Waiver Required:

Waiver not available.

Method of Service Provision:

This service may be provided by a subrecipient of the AAA or authorized by a care coordinator on behalf of an eligible person for purchase through a contractor. If requirements are met, this service may also be authorized through Data Management.

Reimbursement Methodology by AAA:

Fixed Unit Rate per Contact

**QPR:**

**Units**

**Unduplicated Persons Count – Client Intake required**

**ALLOWABLE FUNDS:**

**Title III-C1**

**Title III-C2**

**Title III-E (Home Delivered Meals only)**

**Disaster Relief as approved by HHSC**

**State General Revenue**

### **PERSONAL ASSISTANCE**

Assisting an older person who has difficulty performing a minimum of two activities of daily living as identified in the assessment process, with tasks a person would typically perform if they were able. This covers assistance in all activities of daily living.

Unit of Service: One Hour. Does not include travel time, unless it is directly related to the older person’s care plan.

Direct Service Waiver Required: Waiver not available.

Method of Service Provision: This service may only be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.

Reimbursement Methodology by AAA: Fixed Unit Rate per Hour.

**NAPIS:** “Personal Care”  
**Unduplicated – Client Intake required**  
**Units – 1 Hour**

**OAA:** **ADL/IADL Consumer Needs Evaluation required**

**QPR:** **Units**  
**Unduplicated Persons Count**

**LBB:** **Non-Key Performance Measure**

**ALLOWABLE FUNDS:** **Title III-B**  
**Title VII-EAP**  
**Disaster Relief as approved by HHSC**  
**State General Revenue**

**PHYSICAL FITNESS**

Physical activities that sustain or improve physical and mental health. This may include exercise to increase endurance (e.g., cardiovascular and muscular), strength, flexibility, balance, or coordination/agility.

Unit of Service: One Contact. Each eligible person in a physical fitness session receives a service; therefore, each person is counted as one contact.

Direct Service Waiver Required: Yes.

Method of Service Provision: This service may be provided by a subrecipient of the AAA.

Reimbursement Methodology by AAA: Cost Reimbursement.

**QPR:** **Units**  
**Estimated Persons Count**

**ALLOWABLE FUNDS:** **Title III-B**  
**Title III-E**  
**Title III-E ORC (formerly GOECSC)**  
**State General Revenue**

**RECREATION**

Activities, such as sports, performing arts, games, and crafts, where an older person participates as a spectator or performer, and which are facilitated by a provider.

Unit of Service: One Contact. Each person in a recreation activity receives a service; therefore, each eligible person is counted as one contact.

Direct Service Waiver Required: Yes.

Method of Service Provision: This service may be provided by a subrecipient of the AAA.

Reimbursement Methodology by AAA: Cost Reimbursement.

**QPR:**

**ALLOWABLE FUNDS:**

**Units**

**Estimated Persons Count**

**Title III-B**

**Title III-E**

**Title III-E ORC (formerly GOECSC)**

**State General Revenue**

**RESIDENTIAL REPAIR**

Services consist of repairs or modifications of dwellings occupied by older persons that are essential for the health and safety of the occupant(s).

Unit of Service:

One unduplicated dwelling unit occupied by an older person. May include all the services committed to repairing/modifying one unit in one program year, not to exceed a total of \$5,000.

Note: Caregivers may serve more than one care recipient, resulting in more units of service than the number of unduplicated persons.

Direct Service Waiver Required:

Waiver not available.

Method of Service Provision:

This service may be authorized by a care coordinator on behalf of an eligible person for purchase through a contractor. *Exception:* Appliances ***only*** may be purchased via delegated purchase, with a threshold of \$3,000. Any purchase over this amount requires written approval.

Reimbursement Methodology by AAA:

Variable Rate.

**QPR:**

**LBB:**

**ALLOWABLE FUNDS:**

**Units**

**Unduplicated Persons Count – Client Intake required**

**Non-Key Performance Measure**

**Title III-B**

**Title III-E**

**Title III-E ORC (formerly GOECSC)**

**Title VII-EAP**

**Disaster Relief as approved by HHSC**

**Housing Bond**

**State General Revenue**

**SENIOR CENTER OPERATIONS**

The operation of community facilities where older people meet together to pursue mutual interests, receive services and take part in activities which will enhance their quality of life, support their independence, and encourage their continued involvement in and with the community.

Unit of Service:

None.

Direct Service Waiver Required:

Waiver not available.

Method of Service Provision:

This service may be provided by a subrecipient of the AAA.

Reimbursement Methodology by AAA:

Cost Reimbursement.

**ALLOWABLE FUNDS:**

**Title III-B**

**Disaster Relief as approved by HHSC**

**State General Revenue**

## **SOCIAL REASSURANCE**

Providing regular contact and companionship with an older person by means of telephone calls, texting, skyping, video chatting or Facebook Messenger; or initiating necessary actions in the event the older person cannot be reached by telephone calls, texting, skyping, video chatting or Facebook Messenger.

<u>Unit of Service:</u>	One Contact.
<u>Direct Service Waiver Required:</u>	Yes.
<u>Method of Service Provision:</u>	This service may be provided by a subrecipient of the AAA or authorized by a care coordinator on behalf of an eligible person for purchase through a contractor.
<u>Reimbursement Methodology by AAA:</u>	Cost Reimbursement or Fixed Unit Rate per Contact.

### **QPR:**

### **Units**

**Unduplicated Persons Count – Client Intake required**

### **ALLOWABLE FUNDS:**

**Title III-B**

**Title III-E**

**Title III-E ORC (formerly GOECSC)**

**Title VII-EAP**

**Disaster Relief as approved by HHSC**

**State General Revenue**

## **SPECIAL INITIATIVE**

Awarded activities or services enabling the AAA to enhance capacity, identify partnerships, identify target populations, or identify needed services for an older person and their informal caregiver.

Note: This service definition is for use by AAA only when instructed by HHSC.

<u>Unit of Service:</u>	N/A
<u>Direct Service Waiver Required:</u>	Waiver not available.
<u>Method of Service Provision:</u>	This service may be provided as approved by HHSC.
<u>Reimbursement Methodology by AAA:</u>	Cost Reimbursement.

### **NAPIS:**

**N/A; supportive service**

### **QPR:**

**No Units; No Unduplicated Persons Count**

### **ALLOWABLE FUNDS:**

**As identified in notification of funds available**

## **TRANSPORTATION**

Taking an older person from one location to another but does not include any other activity. There are two types of transportation services:

- Demand/Response - Transportation designed to carry an older person from specific origin to specific destination upon request. An older person requests the transportation service in advance of their need, usually twenty-four to forty-eight hours prior to the trip.
- Fixed Route - Transportation service that operates in a predetermined route that has permanent transit stops, which are clearly marked with route numbers and departure schedules. The fixed-route does not vary and the provider strives to reach each transit stop at the scheduled time. The older person does not reserve a ride as in a demand-response system; the person simply goes to the designated location and at the designated time to gain access to the transit system.

<u>Unit of Service:</u>	One, One-way Trip
<u>Direct Service Waiver Required:</u>	Yes.
<u>Method of Service Provision:</u>	This service may be provided by a subrecipient of the AAA or authorized by a care coordinator on behalf of an eligible person for purchase through a contractor. If requirements are met, this service may also be authorized through Data Management.
<u>Reimbursement Methodology by AAA:</u>	Fixed Unit Rate per One-Way Trip.
<b>NAPIS:</b>	<b>“Transportation”</b>
<b>QPR:</b>	<b>Units – One, One-way Trip</b>
<b>LBB:</b>	<b>Units</b>
<b>ALLOWABLE FUNDS:</b>	<b>Unduplicated Persons Count – Client Intake required</b>
	<b>Key Performance Measure – Number of Units</b>
	<b>Limited to Transportation Demand/Response Only</b>
	<b>Title III-B</b>
	<b>Title III-E</b>
	<b>Title III-E ORC (formerly GOECSC)</b>
	<b>Disaster Relief as approved by HHSC</b>
	<b>State General Revenue</b>

### **TRANSPORTATION - VOUCHER**

A service which allows an eligible person to choose an individual or commercial private or non-profit transportation provider. The rate and transportation schedule are negotiated with the provider by the eligible person. Service activity includes taking an eligible person from one location to another, but does not include any other activity.

<u>Unit of Service:</u>	One, One-way Trip.
<u>Direct Service Waiver Required:</u>	Waiver not available.
<u>Method of Service Provision:</u>	This service may only be authorized by a care coordinator on behalf of an eligible person.
<u>Reimbursement Methodology by AAA:</u>	Cost Reimbursement.
<b>NAPIS:</b>	<b>“Self-Directed Care”</b>
<b>QPR:</b>	<b>Units – One, One-way Trip</b>
<b>LBB:</b>	<b>Units</b>
<b>ALLOWABLE FUNDS:</b>	<b>Unduplicated Persons Count – Client Intake required</b>
	<b>Title III-B</b>
	<b>Title III-E</b>
	<b>Title III-E ORC (formerly GOECSC)</b>
	<b>Disaster Relief as approved by HHSC</b>
	<b>State General Revenue</b>

### **VISITING**

Meeting with an older person to provide regular contact and companionship and to initiate appropriate action should the older person not respond.

Unit of Service:

One Contact

Direct Service Waiver Required:

Yes.

Method of Service Provision:

This service may be provided by a subrecipient of the AAA.

Reimbursement Methodology by AAA:

Cost Reimbursement.

**QPR:**

**Units**

**ALLOWABLE FUNDS:**

**Unduplicated Persons Count – Client Intake required**

**Title III-B**

**Title III-E**

**Title III-E ORC (formerly GOECSC)**

**Title VII-EAP**

**Disaster Relief as approved by HHSC**

**State General Revenue**

### Caregiver Eligibility per OAA as Amended 2016

If Caregiver is:	and Recipient is:			With:	Are they eligible?
	Age 0 - 18	Age 19 - 59	60 +		
Age 18+			X	<p>No special needs</p> <p>(for Respite Services - must have a deficit of 2 activities of daily living.)</p> <p>Priority - Greatest social need and economic need w/attention to low-income older persons</p>	Yes
Age 18+		X		No special needs	No
Age 18+	X	X	X	People w/ Alzheimer's disease & related disorders w/ neurological & organic brain dysfunction	Yes
Age 55 + (Older Relative Caregiver)	X	X (w/disability)		<p>Lives with, is the informal provider of in-home and community care to, and is the primary caregiver for a child or a person with a disability.</p> <p>1. In the case of a caregiver for a child— is the grandparent, step-grandparent, or other relative (other than the parent) by blood, marriage, or adoption, of the child <u>and</u> is primary caregiver because biological or adoptive parents are unable or unwilling <u>and</u> has legal custody or guardianship or is raising informally.</p> <p>2. In the case of a caregiver for a person with a disability- is the parent, grandparent, or other relative by blood, marriage, or adoption, of the person with a disability.</p> <p>Priority- Recipient age 19-59 w/ severe disabilities</p>	Yes
Age 60+	X	X		No special needs	No

**HEALTH PROMOTION and DISEASE PREVENTION**

In accordance with reporting requirements for Title III and VII, Health Promotion and Disease Prevention services include health screenings and assessments; organized physical fitness activities; evidence-based health promotion programs; medication management; home injury control services; and information, education, and prevention strategies for chronic disease and other health conditions that would reduce the length or quality of life of the person 60 or older. See AAA-PI 309 and definition of each service for further details.

SERVICE	ALLOWABLE ACTIVITIES	UNIT OF SERVICE	QPR	ALLOWABLE FUNDS
Evidence-Based Intervention	<p><b>Definition of Evidence-Based Programs (as of October 1, 2016)</b></p> <p><b>Programs:</b></p> <ul style="list-style-type: none"> <li>• Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability and/or injury among older adults; and</li> <li>• Proven effective with older adult population, using Experimental or Quasi-Experimental Design; and</li> <li>• Research results published in peer-review journal; and</li> <li>• Fully translated in one or more community site(s); and</li> <li>• Includes developed dissemination products that are available to the public.</li> </ul>	One Contact. Record one contact each time an older person participates in an activity that is a component of an evidence-based intervention program.	<p><b>-Units</b></p> <p><b>-Unduplicated Persons Count – Client Intake required</b></p>	<p><b>[NOTE: Title III-D funds may only be expended under this service]</b></p> <p><b>Title III-B</b></p> <p><b>Title III-D</b></p> <p><b>Title III-E</b></p> <p><b>Title III-E ORC (formerly GOECSC)</b></p> <p><b>State General Revenue</b></p>
Health Maintenance	<p>Services that include one or more of the following activities:</p> <ul style="list-style-type: none"> <li>- Medical treatment by a health professional</li> <li>- Health education and counseling services for persons or groups about lifestyles and daily activities. Activities may include, but are not limited to: <ul style="list-style-type: none"> <li>• Art and dance –movement therapy</li> <li>• Programs in prevention or reduction of the effects of chronic disabling conditions</li> <li>• Alcohol and substance abuse</li> <li>• Smoking cessation</li> <li>• Weight loss and control</li> <li>• Stress management</li> </ul> </li> <li>- Home health services including, but not limited to, nursing, physical therapy, speech therapy or occupational therapy</li> <li>- Provision of medications, nutritional supplements, glasses, dentures, hearing aids or other devices necessary to promote or maintain the health or safety of the older person. Note: this also includes the provision of dosage alert systems and the purchase of</li> </ul>	One Contact. Record one contact each time an older person receives a health maintenance service.	<p><b>-Units</b></p> <p><b>-Unduplicated Persons Count – Client Intake required</b></p>	<p><b>Title III-B</b></p> <p><b>Title III-E</b></p> <p><b>Title III-E ORC (formerly GOECSC)</b></p> <p><b>Title VII-EAP</b></p> <p><b>Disaster Relief as approved by HHSC</b></p> <p><b>State General Revenue</b></p>



	software, technical support, and materials that connects eligible older persons to free or reduced cost prescription medication services.			
Health Screening/Monitoring	<p>Activities are intended to assess the level of health and wellness of persons 60 years of age and older and should ensure recipients are made aware of health services available to them in their community for appropriate follow-up care. Services may be provided in senior centers, nutrition sites, health fairs, or other community settings or in a person's home. Health Screening/Monitoring activities may include, but are not limited to, the following:</p> <ul style="list-style-type: none"> <li>• Blood pressure</li> <li>• Hearing</li> <li>• Vision</li> <li>• Dental</li> <li>• Podiatry</li> <li>• Nutritional status</li> <li>• Blood tests</li> <li>• Urinalysis</li> <li>• Home injury control safety</li> <li>• Depression</li> <li>• Oral Health</li> <li>• Mental and Behavioral Health</li> <li>• Falls Prevention</li> </ul>	One Contact. Record one contact each time an older person receives a separate health screening or monitoring service.	-Units -Estimated Persons Count	Title III-B Disaster Relief as approved by HHSC State General Revenue
Mental Health Services	Assessment by a mental health professional to determine a need for mental health service(s) (diagnosis/screening) or the provision of services to support and improve the emotional well-being of a person. Mental health services shall be provided to persons who have mental, emotional or socialization needs. Persons may require support, treatment and additional referrals to address needs. Such support services may include education, prevention, screening, referral and intervention.	One Contact.	Units Unduplicated Persons Count – Client Intake required	Title III-B Title III-E Title III-E ORC (formerly GOECSC) Disaster Relief as approved by HHSC State General Revenue
Physical Fitness	Physical activities that sustain or improve physical and mental health. This may include exercise to increase endurance (e.g., cardiovascular and muscular), strength, flexibility, balance, or coordination/agility.	One Contact. Each person in a physical fitness session receives a service; therefore, each eligible person is counted as one contact.	-Units -Estimated Persons Count	Title III-B Title III-E Title III-E ORC (formerly GOECSC) State General Revenue
Recreation	Activities, such as sports, performing arts, games, and crafts, where an older person participates as a spectator or performer, and which are facilitated by a provider.	One Contact. Each person in a recreation activity receives a service; therefore, each eligible person is counted as one contact.	-Units -Estimated Persons Count	Title III-B Title III-E Title III-E ORC (formerly GOECSC) State General Revenue