



Mailing Address:
1 Baldwin Street
Drawer 33
Montpelier, Vermont 05633-5701

Tel.: (802) 828-2295
Fax: (802) 828-2483

STATE OF VERMONT
JOINT FISCAL COMMITTEE
1 Baldwin Street
Montpelier, Vermont 05633-5701

MEMORANDUM

To: James Reardon, Commissioner of Finance & Management

From: Rebecca Buck, Staff Associate *RB*

Date: January 18, 2008

Subject: Status of Grant Request

No Joint Fiscal Committee member has requested that the following item be held for review:

JFO #2310 – \$500,000 grant from the U.S. Department of Health and Human Services, Administration on Aging to the Department of Disabilities, Aging and Independent Living. This grant will be used to support 2-3 Area Agency on Aging pilot programs to develop comprehensive, consumer directed, flexible nursing home diversion programs.

[JFO received 12/19/07]

In accordance with 32 V.S.A. §5, the requisite 30 days having elapsed since this item was submitted to the Joint Fiscal Committee, the Governor's approval may now be considered final. We ask that you inform the Secretary of Administration and your staff of this action.

cc: Linda Morse
Cynthia LaWare
Joan Senecal

From: "Lyon, Veda" <Veda.Lyon@ahs.state.vt.us>
To: "Rebecca Buck" <rbuck@leg.state.vt.us>
Date: 12/28/2007 5:09 PM
Subject: RE: Questions from Rep. Obuchowski re: JFO #2310

Dear Ms. Buck,

Please forward the following information to Rep. Obuchowski, (and Mr. Klein) re: responses to his questions regarding DAIL's Nursing Home Diversion grant opportunity (funding to be provided by the Administration on Aging). (I did not see a direct e-mail address for him). Many thanks, again, for your assistance.

Dear Rep. Obuchowski,

I've prepared responses to your three questions, posed to DAIL via Ms. Buck earlier this month re: DAIL's request for Legislative approval to proceed with operation of our Nursing Home Diversion grant project, funded by the AoA.

I hope the following information provides sufficient detail, but in the event it does not, please feel free to contact me again.

Regards, and Happy New Year!

1. There is no direct connection between this grant and lack of nursing home beds in specific areas of the State, because Vermont doesn't have a shortage of nursing home beds in any region of the state. There are isolated pockets where supply is tight (for e.g., Orange County), and in some communities there is growing interest in developing more community and home-based services. For example, on the eastern side of Orange County there is strong interest in developing a licensed assisted living residence.

That said, the goal of our NHD grant is to find ways to support Vermont elders to age in place, to maintain their financial stability and independence for as long as possible- hopefully to the end of their lives. If we are successful, there will be fewer people who are forced to spend down to meet LTC Medicaid eligibility and/or end up relying upon nursing homes for their long-term care, and on the LTC Medicaid budget. Secondarily, for those individuals served by the grant who may reach nursing home level of care during the 18-month program, every effort will be made to ensure they receive their long-term care services at home.

2. We have not selected the region(s) where pilot(s) will be located. During development of our grant proposal, we worked with Vermont's five area agencies on aging to develop some of the proposal concepts. At the time, two agencies indicated an interest in participating but were not ready to commit, while three were less certain they would even be interested in participation. Ideally, we hope to have two pilot regions. But, rather than identify region(s) for pilot sites in the grant submission, we decided to issue a Request for Proposals to all five AAAs, if the grant was awarded to VT, and select from the agency(cies) that bid.



3. Regarding selection of pilot sites/agencies, we do not plan to use an analytical or database rationale in selecting pilot sites/regions. We will target the RFP to the State's five area agencies on aging, because grant funding derives from the Administration on Aging, and requires use of a portion of AoA Title III-B and/or E funding, to support grant activities, and to 'transform' how some AAA services are delivered.

We will seek Work Plans and budgets that demonstrate willingness to undertake this conversion of AoA funded programs/activities - in particular, conversion from more traditional forms of 'case management' to a targeted 'options counseling' service, which will be delivered to consumers/recipients served under the NHD grant.

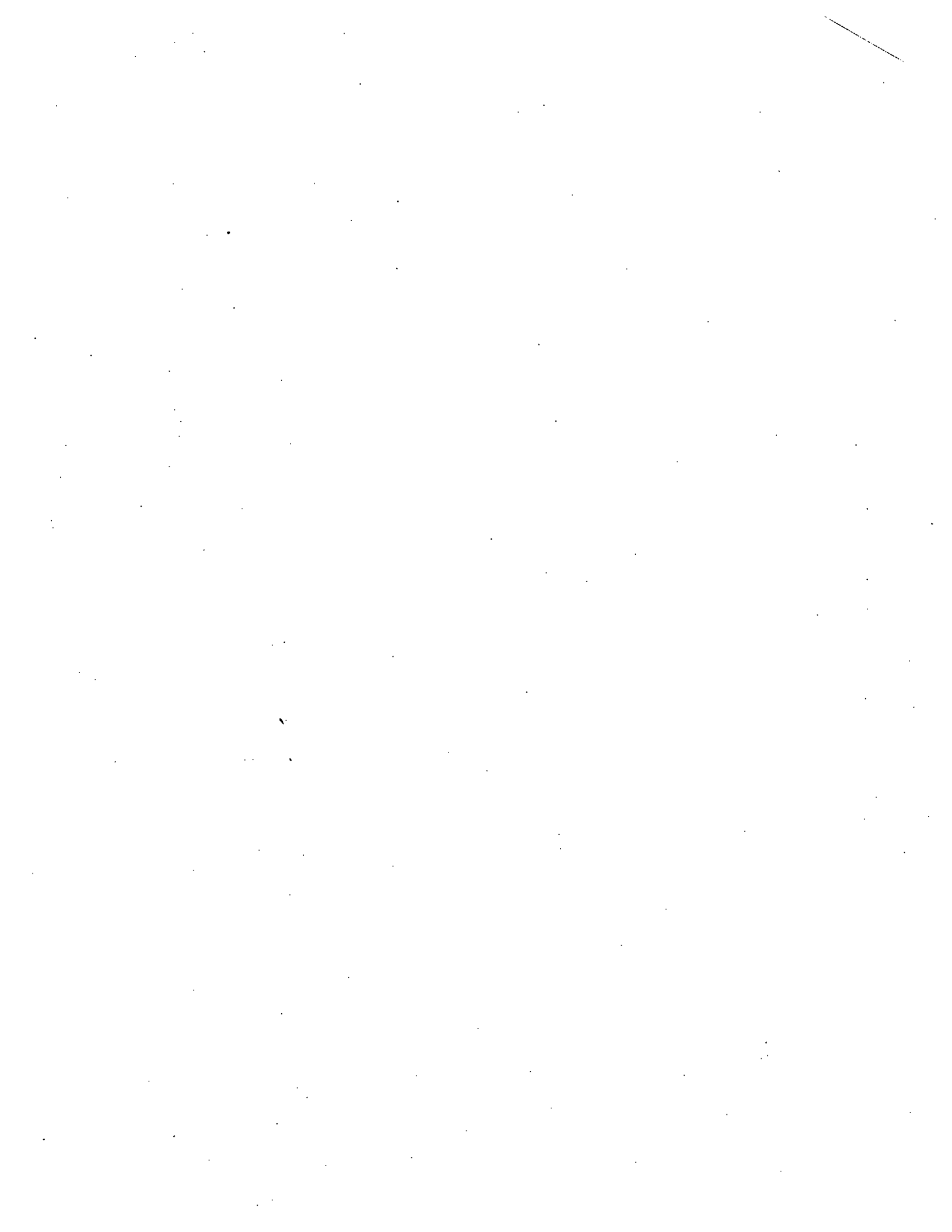
If/when DAIL receives Legislative approval for this project, we will proceed with completion of the RFP and bid solicitation. Some of our likely selection criteria include:

- a. Applicant's demonstrated ability and willingness to dedicate a portion of AoA core funding (Title III-B or E) to options counseling services.
- b. Applicant's submitted Work Plan, which will provide detailed explanation of how it intends to target outreach, education and marketing of the NHD grant to identify, and then deliver services to NHD grant consumer/recipients.
- c. Applicant's track record in delivering supportive services, including respite care and caregiver education/assistance, to individuals w AD/DRD (Alz Disease and Related Dementias) and their caregivers.
- d. Applicant's submitted Budget detail, that identifies how they will meet AoA matching funds requirements, (through in-kind, cash or other) to ensure that DAIL/and its sub grantees meet the required AoA local/state match.
- e. Ideally, geographic distribution would be between at least one southern and one northern region of the state would be desirable, and include an AAA with 1-2 reasonably sized population centers (though not necessarily a SMSA), and an AAA that may have some population centers, but serves a predominantly rural population with many 'remote' pockets of pop. in its catchments area.
- f. Letters of support from community partners (such as home health agencies, hospitals, volunteer organizations comprised of seniors, etc.) attesting to the agency applicant's ability to deliver services under the NHD grant.

Please feel free to give me a call at 241-2628 if you have any additional questions, or send follow up questions to me via email.

Sincerely,

Veda Lyon, Manager, Community Development Unit, DAIL



-----Original Message-----

From: Rebecca Buck [mailto:rbuck@leg.state.vt.us]
Sent: Wednesday, December 26, 2007 1:04 PM
To: Lyon, Veda
Cc: Michael Obuchowski; Steve Klein
Subject: Questions from Rep. Obuchowski re: JFO #2310

Good afternoon Veda. Representative Michael Obuchowski has the following questions regarding JFO #2310 (\$500,000 pilot program grant for AAA nursing home diversion):

- 1) What is the connection between this grant and the lack of nursing home beds in specific areas of the state? In selecting pilot programs, will consideration be given to specific areas of the state with fewer beds?
- 2) Where will be the pilot programs be located?
- 3) What criteria will be used to select the pilot programs? Will you be using an analytical/database reason in your selection of pilot programs? Will geographic/regional balance be a consideration in the pilot selection process?

In responding to Rep. Obuchowski at the above e-mail address, please be sure and cc me on it so I have a copy for our files. Thank you.
--Becky

This email message may contain privileged and/or confidential information. If you are not the intended recipient(s), you are hereby notified that any dissemination, distribution, or copying of this email message is strictly prohibited. If you have received this message in error, please immediately notify the sender and delete this email message from your computer.

CAUTION: The Agency of Human Services cannot ensure the confidentiality or security of email transmissions.



From: Rebecca Buck
To: veda.lyon@ahs.state.vt.us
Subject: Questions from Rep. Obuchowski re: JFO #2310

Good afternoon Veda. Representative Michael Obuchowski has the following questions regarding JFO #2310 (\$500,000 pilot program grant for AAA nursing home diversion):

- 1) What is the connection between this grant and the lack of nursing home beds in specific areas of the state? In selecting pilot programs, will consideration be given to specific areas of the state with fewer beds?
- 2) Where will the pilot programs be located?
- 3) What criteria will be used to select the pilot programs? Will you be using an analytical/database reason in your selection of pilot programs? Will geographic/regional balance be a consideration in the pilot selection process?

In responding to Rep. Obuchowski at the above e-mail address, please be sure and cc me on it so I have a copy for our files. Thank you. --Becky

CC: Klein, Steve; Obuchowski, Michael



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1 Baldwin Street
Drawer 33
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Tel.: (802) 828-2295
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STATE OF VERMONT
JOINT FISCAL COMMITTEE
1 Baldwin Street
Montpelier, Vermont 05633-5701

MEMORANDUM

To: Joint Fiscal Committee Members

From: Rebecca Buck, Staff Associate *R.B.*

Date: December 20, 2007

Subject: Grant Request

Enclosed please find one (1) request which the Joint Fiscal Office recently received from the Administration:

JFO #2310 – \$500,000 grant from the U.S. Department of Health and Human Services, Administration on Aging to the Department of Disabilities, Aging and Independent Living. This grant will be used to support 2-3 Area Agency on Aging pilot programs to develop comprehensive, consumer directed, flexible nursing home diversion programs.

[JFO received 12/19/07]

The Joint Fiscal Office has reviewed this submission and determined that all appropriate forms bearing the necessary approvals are in order.

In accordance with the procedures for processing such requests, we ask you to review the enclosed and notify the Joint Fiscal Office (Rebecca Buck at 802/828-5969; rbuck@leg.state.vt.us or Stephen Klein at 802/828-5769; sklein@leg.state.vt.us) if you would like this item held for legislative review. Unless we hear from you to the contrary by January 3 we will assume that you agree to consider as final the Governor's acceptance of this request.

cc: James Reardon, Commissioner
Linda Morse, Administrative Assistant
Cynthia LaWare, Secretary
Joan Senecal, Commissioner

JFO#
2310

STATE OF VERMONT
GRANT ACCEPTANCE FORM

GRANT SUMMARY: Federal Nursing Home Diversion Modernization Grant Program,

FEDERAL CATALOG No.: 93048

GRANTOR / DONOR: Federal Administration on Aging, U.S. Department of Health and Human Services

DATE: November 12, 2007

DEPARTMENT: AHS – Department of Aging and Independent Living

GRANT / DONATION: The grant will provide a federal matching grant (25.24% State; 74.76% FF) of \$500,000 over two years to support pilot programs to enhance funding flexibility for assistance to approximately 200 certain nursing-home-eligible elders.

AMOUNT / VALUE: Fiscal 2008: \$318,320 (total state and FF). Fiscal 2009: \$350,511.

POSITIONS REQUESTED: No new positions – workload will be handled by existing staff. * ✓

GRANT PERIOD: Fiscal 2008 and 2009.

Comments: *MDR* DAIL/AHS advise that the State portion of the expenditures will come from existing budgeted appropriations.

DEPARTMENT OF FINANCE AND MANAGEMENT:
SECRETARY OF ADMINISTRATION
SENT TO JOINT FISCAL OFFICE:

(INITIAL) *SM*
(INITIAL) *RPM*
DATE: 12/17/07



STATE OF VERMONT
REQUEST FOR GRANT ACCEPTANCE
(USE ADDITIONAL SHEETS AS NEEDED)

1. Agency: Agency of Human Services
 2. Department: Department of Disabilities Aging and Independent Living
 3. Program: Division of Disability, Aging and Independent Living - Community Program and Development Unit

4. Legal Title of Grant: Vermont Nursing Home Diversion Modernization Project

5. Federal Catalog No.: 93.048

6. Grantor and Office Address:

Department of Health and Human Services
 11400 Rockville Pike
 Rockwall Building #1, Suite 700
 Rockville, MD 20852

7. Grant Period: From: 09/30/07 3/31/2009

8. Purpose of Grant: (attach additional sheets if needed)

The purpose of the grant is to develop a comprehensive nursing home diversion program, utilizing both grant funds and core AAA Older Americans Act funding (Title III A and E) in partnership with 2-3 Area Agencies on Aging that will be selected via an RFP funded by this grant.

The program will deliver consumer-directed, flexible services and supports to 200 elders who meet nursing home level of care criteria re: need for assistance/services, but who are not eligible for Long Term Care Medicaid. The primary goals of the program are a) to support participating consumers to remain at home/age in place, avoiding NH placement and b) spend down to LTC Medicaid; and c) to re-tool the traditional AAA AoA approach to client services, to a consumer directed, options counseling and flexible choices model of service delivery.

9. Impact on Existing Programs if Grant is not Accepted:

If grant is not accepted DAIL and AAA's will miss the opportunity to deliver current services in a consumer directed and flexible manner, AoA expects us to deliver services in a more consumer-directed and flexible way so one way or the other we need to figure out how to do this, and the grant money will help us to do it.

10. Budget Information:	(1ST State FY) FY 2008	(2nd State FY) FY 2009	(3rd State FY) FY 2009
EXPENDITURES:			
Personal Services	\$ 73,627	\$ 103,361	\$ -
Operating Expenses	\$ 9,168	\$ 8,222	\$ -
Grants	\$ 209,596	\$ 209,596	\$ -
In Kind	\$ 8,429	\$ 11,833	\$ -
Indirect	\$ 17,500	\$ 17,500	\$ -
TOTAL	\$ 318,320	\$ 350,511	\$ -
REVENUES:			
State Funds:	\$80,344	\$88,487	\$0
Cash (using existing staff and grants)	\$71,915	\$76,654	
In-Kind	\$8,429	\$11,833	\$ -
Federal Funds:	\$ 237,976	\$ 262,024	\$ -
(Direct Costs)			
(Statewide Indirect)			
(Department Indirect)	\$ -	\$0	\$0
Other Funds:			
(Source)			
TOTAL	\$318,320	\$350,511	\$0

Grant will be allocated to these appropriation expenditure accounts:		Appropriation No.	Amounts
	federal	3460010000	81,282
	federal	3460020000	156,694

Over

REC'D NOV 0 2 2007

11. Will grant monies be spent by one or more personal services contracts?

YES NO

If YES, signature of appointing authority here indicates intent to follow current guidelines on bidding.

X Jean K. Senecal 10/23/07

12a. Please list any requested Limited Service positions:

Titles	Number of Positions
TOTAL	

12b. Equipment and space for these positions:

Is presently available in
 Can be obtained with available funds.

13. Signature of Appointing Authority

I certify that no funds have been expended or committed in anticipation of Joint Fiscal Committee approval of this grant.

Jean K. Senecal 10/23/07
(Signature) (Date)

(Title) (Date)

Signature of AHS Secretary

Patrick Plord _____
(Signature) (Date)
Deputy Secretary 12/31/07
(Title) (Date)

14. Action by Governor:

Approved
 Rejected

[Signature] 12/14/07
(Signature) (Date)

15. Secretary of Administration:

request to JFO
 Information to JFO

[Signature] 12/13/07
(Signature) (Date)

16. Action by Joint Fiscal Committee: (Dates)

- Request to be placed on JFC agenda
- Approved (not placed on agenda in 30 days)
- Approved by JFC
- Rejected by JFC
- Approved by Legislature

(Signature) (Date)

1.RECIPIENT

**Department of Health and Human Services
Administration On Aging
Notice of Award (NOA)**

SAI NUMBER:

PMS DOCUMENT NUMBER:
90AM316001

1. AWARDING OFFICE: Administration On Aging		2. ASSISTANCE TYPE: Coop agreement		3. AWARD NO.: 90AM3160/01		4. AMEND. NO.:		
5. TYPE OF AWARD: DEMONSTRATION			6. TYPE OF ACTION: New			7. AWARD AUTHORITY: 42 USC 3031-3037B		
8. BUDGET PERIOD: 09/30/2007 THRU 03/31/2009			9. PROJECT PERIOD: 09/30/2007 THRU 03/31/2009			10. CAT NO.: 93048 ...		
11. RECIPIENT ORGANIZATION: Vermont Dept. of Disabilities, Aging and Independent Li 103 South Main Street Waterbury VT 05671 1601 Camille George, Director, Community Development Unit						12. PROJECT / PROGRAM TITLE: Vermont Nursing Home Diversion Modernization Project		

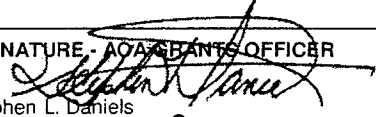
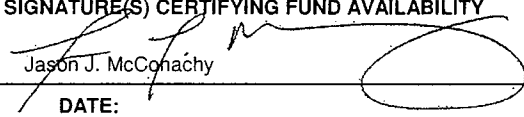

13. COUNTY:		14. CONGR. DIST:		15. PRINCIPAL INVESTIGATOR OR PROGRAM DIRECTOR: Veda Lyon , Community Development Manager			
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16. APPROVED BUDGET:				17. AWARD COMPUTATION:					
Personnel.....	\$	35,583		A. NON-FEDERAL SHARE.....	\$	168,831	25.24 %		
Fringe Benefits.....	\$	13,567		B. FEDERAL SHARE.....	\$	500,000	74.76 %		
Travel.....	\$	1,500		18. FEDERAL SHARE COMPUTATION:					
Equipment.....	\$	0		A. TOTAL FEDERAL SHARE.....	\$		500,000		
Supplies.....	\$	3,996		B. UNOBLIGATED BALANCE FEDERAL SHARE.....	\$				
Contractual.....	\$	397,208		C. FED. SHARE AWARDED THIS BUDGET PERIOD.	\$		500,000		
Facilities/Construction.....	\$	0		19. AMOUNT AWARDED THIS ACTION:					
Other.....	\$	161,715		\$ 500,000					
Direct Costs.....	\$	613,569		20. FEDERAL \$ AWARDED THIS PROJECT PERIOD:					
Indirect Costs.....	\$	35,000		\$ 500,000					
At % of \$				21. AUTHORIZED TREATMENT OF PROGRAM INCOME:					
In Kind Contributions.....	\$	20,262		ADDITIONAL COSTS					
Total Approved Budget.....	\$	668,831		22. APPLICANT EIN:		23. PAYEE EIN:		24. OBJECT CLASS:	
				1-036000264-D2		1-036000264-D2		41.45	

25. FINANCIAL INFORMATION:						DUNS: 809376155	
ORGN	DOCUMENT NO.	APPROPRIATION	CAN NO.	NEW AMT.	UNOBLIG.	NONFED %	
AoA	90AM316001	75-7-0142	2007 2995105	\$216,000			
AoA	90AM316001	75-7-0142	2007 2994310	\$284,000			

26. REMARKS: (Continued on separate sheets)

Paid by DHHS Payment Management System (PMS), see attached for payment information.
 This award is subject to the requirements of the HHS Grants Policy Statement (HHS GPS) that are applicable to you based on your recipient type and the purpose of this award.
 This includes requirements in Parts I and II (available at <http://www.hhs.gov/grantsnet/adminis/gpd/index.htm>) of the HHS GPS.
 Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 74 or 92, directly apply to this award apart from any coverage in the HHS GPS.
 This grant is subject to the requirements set forth in 45 CFR part 74 (for non-profit organizations and educational institutions) or 45 CFR Part 92 (for state, local, and federally recognized tribal governments).

27. SIGNATURE - AOA GRANTS OFFICER		DATE:	28. SIGNATURE(S) CERTIFYING FUND AVAILABILITY	
		09/26/2007		
Stephen L. Daniels			09/26/2007	
29. SIGNATURE AND TITLE - PROGRAM OFFICIAL(S)			DATE:	
			09/26/2007	
Edwin L. Walker, Deputy Asst Sec For Policy and Programs				

1. RECIPIENT
**DEPARTMENT OF HEALTH AND HUMAN SERVICES
 ADMINISTRATION ON AGING
 FINANCIAL ASSISTANCE AWARD**

SAI NUMBER:
 PMS DOCUMENT NUMBER:
 90AM316001

1. AWARDING OFFICE: Administration On Aging	2. ASSISTANCE TYPE: Coop agreement	3. AWARD NO.: 90AM3160/01	4. AMEND. NO.
5. TYPE OF AWARD: DEMONSTRATION	6. TYPE OF ACTION: New	7. AWARD AUTHORITY: 42 USC 3031-3037B	
8. BUDGET PERIOD: 09/30/2007 THRU 03/31/2009	9. PROJECT PERIOD: 09/30/2007 THRU 03/31/2009		10. CAT NO.: 93048
11. RECIPIENT ORGANIZATION: Vermont Dept. of Disabilities, Aging and Independent Li			

26. REMARKS: (Continued from previous page)

Initial expenditure of funds by the grantee constitutes acceptance of this award.
 No future support is anticipated.
 There are special conditions attached to this award.
 In-kind contributions: The value of donated services, donated supplies, and/or donated use of public space is not reimbursable either as a direct or indirect cost. A copy of the AoA Sensitization Notifications has also been included.

RESTRICTION & AVAILABLE FUNDS

This award, \$500,000 in federal funds is issued subject to the following special conditions:
 1. Up \$50,000 may be expended by the grantee for administrative purposes in order to fulfill the requirements listed below.
 2. No federal funds may be expended exceeding the \$50,000 described above. The balance of the federal funds, \$450,000 are hereby restricted and may not be drawn down from the Payment Management System until the grantee has received written approval via a revised Notice of Award from the Administration on Aging (AoA).

REQUIREMENTS

This award is issued with the following requirements:
 1. Office of Grants Management (OGM) - Submission of all documentation as requested from Alexis Lynady's e-mail dated 9/19/2007.
 2. Program Office - By October 5, 2007, you will receive details of the Programmatic requirements.

BUDGET PERIOD - FUNDS

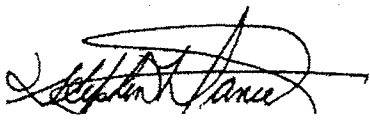
Funds provided in the award are available only during this budget period and rebudgeting of funds is not allowed without the prior written approval of AoA.

COOPERATIVE AGREEMENT

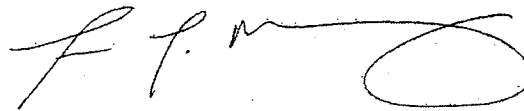
This award is issued as a cooperative agreement, a financial assistance mechanism in which substantial AoA programmatic involvement is anticipated. This award is subject to the awardee and collaborative requirements and responsibilities set forth in Cooperative Agreement attached to the e-mail transmission that included this NoA and are hereby incorporated by reference as special terms and conditions of this award.

STAFF CONTACTS:

Grants Management Specialist: Alexis Lynady at 202-357-3465, E-mail: Alexis.Lynady@aoa.hhs.gov
 Program Official: Greg Case at 202-357-3442, E-mail: Greg.Case@aoa.hhs.gov



09/26/2007



09/26/2007



09/26/2007

Commissioner's Office
103 South Main Street
Waterbury VT 05671-1601
Voice 241-2401/TTY 241-3557
Fax (802) 241-2325

TO: Matt Riven, Budget Analyst
FROM: Joan K. Senecal, Commissioner
DATE: December 5, 2007
RE: Questions about Administration on Aging Nursing Home Diversion Grant

Please accept this memo as the Department's response to your questions regarding the Administration on Aging (AoA) Nursing Home Diversion Grant. We do not anticipate the project will create on-going State funding needs. It is a demonstration grant with a focus on helping the State Unit on Aging (DAIL) and the State's five Area Agencies on Aging consider, plan for and test how to use their existing AoA funding resources in new ways, to create a more flexible consumer-directed service delivery system that uses options counseling as a key system component.

We anticipate two project outcomes that will not require additional State funding at grant's end: *

1. Transformation of the AAA case management system to an options counseling system of service delivery. The project will support a systems change within the AAA network, transforming the role of the case manager to that of options counselor. At the end of the project at least two AAAs will employ staff who are trained to carry out the role/functions of options counselors (a role quite different from that of case manager). Since all five AAAs will participate in the Options Counseling training modules we believe the impact of this system change will extend to all five AAAs. Transformation of the AAA core service delivery from a traditional case management model, to a system that provides qualified options counselors, will occur over time, (during and after the project period), and will be sustained post-project by federal AoA resources.
2. Development of a consumer directed model of service delivery: Project funding will provide participating consumers/recipients (and family caregivers) with enduring knowledge and skills (that can be translated to future consumers of AAA service), without reliance upon State funds post project. A key project goal is development of at least one model of consumer directed care, to be supported by qualified AAA options counselor staff (with possible expansion post project to other provider networks).

The project's consumer beneficiaries will gain skills in: consumer/self directed models of care; the “how to’s” of identifying and accessing services that best fit their needs/preferences; and how to manage the funds that finance their consumer directed package of services. As noted above, this knowledge will endure post-project, with support from the AAA network of options counselors/staff, funded by the AoA.

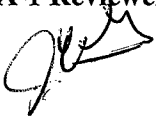
I hope this memo satisfactorily responds to your questions. Please feel free to contact me if you require any additional information.



Agency of Human Services
Office of the Secretary
103 South Main Street
Waterbury, VT 05671-0204
[phone] 802-241-2220
[fax] 802-241-2979

MEMORANDUM

TO: Nursing Home Grant AA-1 Reviewers

FROM: Jim Giffin, AHS, CFO 

DATE: November 1, 2007

RE: Nursing Home Grant Further Information

Please find below additional information provided by DDAIL staff pertaining to the planned implementation of the Nursing Home Diversion Grant

Does the existing State contract with ARIS contract allow for tasks described in this grant?
No, but there is a letter from ARIS supporting the project and the willingness to work on the implementation of the Grant with the Area Agencies on Aging (AAA) and DDAIL.

What are the IT implications? Modifications to SAMS? How will you track the project data?
We do not anticipate making any adjustments to add this project to SAMS data collection, because of the short duration of the grant (18 months) and the relatively small number of people to be served (200HHs); We believe the participating AAAs will have little difficulty collecting our data for project and reporting via formats similar to what we require for the Dementia Respite grant program. The AAAs collect program data on hard copies of reporting formats created by DDAIL, and submit to us, compiling the information on the hard copy and transmitting by email attachment or snail mail.

The budget says \$121,601 from AAA's existing funds. What are the implications to Maintenance Of Effort?
DDAIL will use the FlexFunds and \$100,000 one-time funds for FY08. These funds are not part of the MOE.

What happens to people receiving services when the grant ends?
The goal of this project is to transform the way existing OAA and related services are delivered so we would expect that AAA's would change how they use existing funds through this project.

One part implies will only serve people under 300%, but then when speak to serving moderate people without that caveat. Will you serve people over 300% of poverty? If so will you they have to co-pay for services?
The eight State grantees will work with the Administration on Aging to refine the target group of consumers to be served, developing methods to identify those at greatest risk of spend down to Long Term Care Medicaid. Vermont's 'moderate group' under Choices For Care does NOT meet the level of

care (loc) criteria...our target group MUST meet loc criteria. We know that many AAA, HASS, and Dementia Respite clients assessed as 'moderate' needs eventually meet the loc criteria.

One of our project activities will be to develop a means to identify, quickly, those people who are not eligible for Long Term Care Medicaid, but ARE nursing home level of care. AoA did not prescribe a target income level for the participant group, they left that to each state/grantee. DDAIL selected the 300% below poverty in part because we plan to collaborate with the Dementia Respite grant program, part of our Alzheimer Demonstration grant. The Dementia Respite program uses 300% or less of FPL, as the highest level of income served.

We anticipate that many people, if not the majority, will fall well below 300% of FPL. We did not build in a plan to develop a fee for service that is not in the project design for people over 300%; It is possible that one outcome of the grant may be a recommendation that the AAAs go to a fee for service model.

BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Nursing Home Divers	93.048	\$	\$	\$ 500,000.00	\$ 168,831.00	\$ 668,831.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 0.00	\$ 0.00	\$ 500,000.00	\$ 168,831.00	\$ 668,831.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) Nursing Home Divers	(2)	(3)		
a. Personnel	\$	\$	\$ 16,678.00	\$ 18,905.00	\$ 35,583.00
b. Fringe Benefits			5,504.00	8,063.00	13,567.00
c. Travel			1,500.00		1,500.00
d. Equipment					0.00
e. Supplies			3,996.00		3,996.00
f. Contractual			425,428.00	121,601.00	547,029.00
g. Construction					0.00
h. Other			11,894.00	20,262.00	32,156.00
i. Total Direct Charges (sum of 6a-6h)	0.00	0.00	465,000.00	168,831.00	633,831.00
j. Indirect Charges			35,000.00		35,000.00
k. TOTALS (sum of 6i and 6j)	\$ 0.00	\$ 0.00	\$ 500,000.00	\$ 168,831.00	\$ 668,831.00
7. Program Income	\$	\$	\$	\$	\$ 0.00

Authorized for Local Reproduction

SECTION C - NON-FEDERAL RESOURCES					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8. Nursing Home Diversion-Grant	\$ 26,968.00	\$	\$ 141,863.00	\$ 168,831.00	
9.				0.00	
10.				0.00	
11.				0.00	
12. TOTAL (sum of lines 8-11)	\$ 26,968.00	\$ 0.00	\$ 141,863.00	\$ 168,831.00	
SECTION D - FORECASTED CASH NEEDS					
13. Federal	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
	\$ 333,332.00	\$ 83,333.00	\$ 83,333.00	\$ 83,333.00	\$ 83,333.00
14. Non-Federal	112,554.00	28,138.00	28,138.00	28,139.00	28,139.00
15. TOTAL (sum of lines 13 and 14)	\$ 445,886.00	\$ 111,471.00	\$ 111,471.00	\$ 111,472.00	\$ 111,472.00
SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT					
(a) Grant Program	FUTURE FUNDING PERIODS (Years)				
	(b) First	(c) Second	(d) Third	(e) Fourth	
16. Nursing Home Diversion Grant	\$ 166,668.00	\$	\$	\$	
17.					
18.					
19.					
20. TOTAL (sum of lines 16-19)	\$ 166,668.00	\$ 0.00	\$ 0.00	\$ 0.00	
SECTION F - OTHER BUDGET INFORMATION					
21. Direct Charges:		22. Indirect Charges:			
23. Remarks:					

SFY08						Grant for 1 1/2 years				SFY09						
	Total	Federal	State	non state match	Proration 7.5 months of 18 months of grant		Total	Federal	State	non state match		Total	Grant	State	non state match	
PS operating grants indirect	73,627 17,597 209,596 17,500 318,320	50,586 9,168 160,721 17,500 237,976	23,041 - 48,875 - 71,915	- 8,429 - - 8,429		PS Operating Grants Indirect	176,988 37,652 419,191 - 633,831	121,602 17,390 326,008 - 465,000	55,386 - 93,183 - 148,569	- 20,262 - - 20,262		PS Operating Grants Indirect	103,361 20,055 209,596 17,500 350,512	71,016 8,222 165,287 17,500 262,025	32,345 - 44,309 - 76,654	- 11,833 - - 11,833
PS salaries		6,938	7,864	-	5/12	PS salaries	35,583	16,678	18,905		PS	20,780	9,740	11,041		
div overhead		-	-	-	5/12	div overhead	-	-	-			0	-	-	-	
0		-	-	-			-	-	-		0	-	-	-	-	
0		-	-	-			-	-	-		0	-	-	-	-	
fringe		2,290	3,354	-	5/12	fringe	13,567	5,504	8,063		fringe	7,923	3,214	4,709		
0		-	-	-	5/12		-	-	-		0	-	-	-	-	
0		-	-	-	5/12		-	-	-		0	-	-	-	-	
contracts Contracts		41,359	11,822	-	5/12	contracts Contracts	127,838	99,420	28,418		contracts	74,657	58,061	16,596		
operating travel		624	-	-	5/12	operating travel	1,500	1,500	-		operating travel	876	876	-		
Equip/supplies		3,596	-	-	9/10	Equip/supplies	3,996	3,996	-		Equip/supplies	400	400	-		
Training		-	-	-	5/12	Training	-	-	-		Training	-	-	-		
other		4,948	-	8,429	5/12	other	32,156	11,894	-	20262	other	18,779	6,946	-	11,833	
AAA Contracts		160,721	48,875	-	1/2	Grants AAA Contracts	419,191	326,008	93,183		Grants AAA Contracts	209,596	165,287	44,309		
0		-	-	-	0		-	-	-			-	-	-	-	
0		-	-	-	0		-	-	-			-	-	-	-	
0		-	-	-	1/2		-	-	-			-	-	-	-	
0		-	-	-			-	-	-		0	-	-	-	-	
Indirect		17,500	-	-	1/2	Indirect	35,000	35,000	-		Indirect	17,500	17,500	-		
total	318,320	237,976	71,915	8,429		total	668,831	500,000	148,569	20,262	total	350,511	262,025	76,654	11,833	

PAYMENT INFORMATION

Payment under this award will be made available through the DHHS Payment Management System (PMS). PMS is administered by the Division of Payment Management (DPM); Program Support Center (PSC), which will forward instructions for obtaining payments. Inquiries regarding payments should be directed to:

Regular Mailing Address:

DHHS Program Support Center
Division of Payment Management
P.O.Box 6021
Rockville, Maryland 20852

Overnight Mailing Address:

DHHS Program Support Center
11400 Rockville Pike
Rockwall Building #1, Suite 700
Rockville, MD 20852

Phone: (877) 614-5533 (7:30 am to 6:00 pm ET except Federal Holidays)
Fax: (301) 443-8362
E-Mail: PMSSupport@psc.gov

ATTACHMENT TO FINANCIAL ASSISTANCE AWARD

NURSING HOME DIVERSION MODERNIZATION GRANT PROGRAM (HHS-2007-AoA-CD-0713)

COOPERATIVE AGREEMENT

Consistent with the Federal Grant and Cooperative Agreement Act of 1977 (P.L. 95-224), the Vermont Department of Disabilities, Aging and Independent Living, also herein referred to as the **grantee**, has received a Notice of Award to establish a Cooperative Agreement between the Administration on Aging (AoA) and the **grantee**. This Cooperative Agreement, whose terms are described below, provides for the substantial involvement and collaboration of AoA in activities the recipient organization will complete in accordance with the provisions of the approved grant award.

Grantee Responsibilities

As proposed in its approved application, the **grantee** agrees to carry out the objectives and activities of the project announced as the Nursing Home Diversion Modernization Grants Program. The **grantee** will design and implement a Nursing Home Diversion Program in accordance with the following conditions described in the *Nursing Home Diversion Modernization Grants Program Announcement*:

1. The **grantee** will partner with one or more Area Agencies on Aging (AAA), and work in collaboration with aging service provider organizations and other long-term care stakeholders, to modernize existing efforts to help individuals who are not eligible for Medicaid to avoid unnecessary nursing home placement and spenddown to Medicaid.
2. The **grantee** agrees to focus grant activities on one or more of the elements described in the *Standards of a Nursing Home Diversion Program* attached to the *Nursing Home Diversion Modernization Grants Program Announcement*.
 - a. Service Elements:
 - i. Flexible service dollars
 - ii. Criteria targeting those most at risk of nursing home placement
 - iii. Offering clients the option of the Cash and Counseling model
 - iv. Ensure the program complements the efforts of family caregivers
 - v. Criteria targeting those most at risk of Medicaid spenddown
 - b. Systems Elements:
 - i. Use of "Single Entry Point" system
 - ii. Infrastructure necessary to support the Cash and Counseling model

- iii. Quality Assurance
- iv. Program Evaluation

3. By the end of the 18-month project period, the **grantee's** project will at a minimum be:
 - a. Providing consumers with flexible service options, not limited to any particular service or package of services, with funds from Title III-B, III-E, ADDGS, and/or other programs that serve individuals who are not eligible for Medicaid;
 - b. Effectively targeting these flexible services to individuals who are at-risk of nursing home placement and spend down to Medicaid;
 - c. Using a Single Entry Point system to perform the functions of client screening, assessment, care planning, and the targeting of services to individuals who are at-risk of nursing home placement and spend-down to Medicaid.
4. The **grantee** agrees that activities under this initiative will not duplicate activities funded under other resources.

AoA Responsibilities

The Administration on Aging agrees to work cooperatively in the development and execution of the activities of the project as follows:

1. AoA Project Officer will perform the day-to-day Federal responsibilities of managing the Nursing Home Diversion Modernization Grants Program.
2. AoA and the **grantee** will work cooperatively to clarify the programmatic and budgetary issues to be addressed by the project. Based on these negotiations, the **grantee** will revise the project work plan detailing expectations for major activities and products during the 18 month grant. The work plan will include key tasks, timelines, and staff assignments. AoA or the **grantee** can propose a revision in the final work plan at any time. Any changes in the final work plan will require agreement of both parties.
3. AoA will assist the **grantee** project leadership in understanding the policy concerns and/or priorities of AoA by conducting periodic briefings and by carrying out ongoing consultations.
4. AoA will work with the **grantee** to ensure that the minimum requirements of the grant are met. Particular attention will be paid to the development of flexible service options and targeting criteria for identifying individuals at risk of institutionalization and spend down to Medicaid, and the use of Single Entry Point systems.

5. AoA will work with the **grantee** on the development and implementation of evaluation and quality assurance systems in an effort to ensure consistency with program goals and the activities of other NHDM grantees.
6. AoA will designate technical assistance providers to design and implement, in cooperation with AoA, technical assistance to support grantee activities.
7. AoA will review and comment upon all materials, reports, documents, etc. produced by the project with funds provided through Nursing Home Diversion Modernization Grants Program awards.

The grant period for this project is up to 18 months beginning **September 30, 2007**.

Requests to modify or amend this Cooperative Agreement may be made at any time by AoA or the grantee. Any modifications and/or amendments shall be effective upon the mutual agreement of both parties.

Draw down of funding for this grant through the Federal Payment Management System serves as official acceptance of this Cooperative Agreement. If you do not plan to accept the grant award, please send a letter of declination to the AoA Grants Management Officer with a copy to the AoA Project Officer by close of business on October 30, 2007.

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-CITE-

42 USC Sec. 280c-3

01/03/05

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER II - GENERAL POWERS AND DUTIES

Part K - Health Care Services in the Home

subpart ii - grants for demonstration projects with respect to
alzheimer's disease

-HEAD-

Sec. 280c-3. Establishment of program

-STATUTE-

(a) In general

The Secretary shall make grants to States for the purpose of assisting grantees in carrying out demonstration projects for planning, establishing, and operating programs -

(1) to coordinate the development and operation with public and private organizations of diagnostic, treatment, care management, respite care, legal counseling, and education services provided within the State to individuals with Alzheimer's disease or related disorders and to the families and care providers of such individuals;

(2) to provide home health care, personal care, day care, companion services, short-term care in health facilities, and other respite care to individuals with Alzheimer's disease or related disorders who are living in single family homes or in

congregate settings;

(3) to improve the access of such individuals to home-based or community-based long-term care services (subject to the services being provided by entities that were providing such services in the State involved as of October 1, 1995), particularly such individuals who are members of racial or ethnic minority groups, who have limited proficiency in speaking the English language, or who live in rural areas; and

(4) to provide to health care providers, to individuals with Alzheimer's disease or related disorders, to the families of such individuals, to organizations established for such individuals and such families, and to the general public, information with respect to -

(A) diagnostic services, treatment services, and related services available to such individuals and to the families of such individuals;

(B) sources of assistance in obtaining such services, including assistance under entitlement programs; and

(C) the legal rights of such individuals and such families.

(b) Requirement with respect to certain expenditures

The Secretary may not make a grant under subsection (a) of this section to a State unless the State agrees to expend not less than 50 percent of the grant for the provision of services described in subsection (a)(2) of this section.

(c) Relationship to items and services under other programs

A State may not make payments from a grant under subsection (a) of this section for any item or service to the extent that payment has been made, or can reasonably be expected to be made, with respect to such item or service -

- (1) under any State compensation program, under an insurance policy, or under any Federal or State health benefits program; or
- (2) by an entity that provides health services on a prepaid basis.

-SOURCE-

(July 1, 1944, ch. 373, title III, Sec. 398, as added Pub. L. 100-175, title VI, Sec. 602, Nov. 29, 1987, 101 Stat. 981; amended Pub. L. 101-557, title I, Sec. 102(a), (b), Nov. 15, 1990, 104 Stat. 2767; Pub. L. 105-392, title III, Sec. 302(a), Nov. 13, 1998, 112 Stat. 3586.)

-MISC1-

PRIOR PROVISIONS

A prior section 398 of act July 1, 1944, ch. 373, title III, formerly Sec. 399a, as added Oct. 22, 1965, Pub. L. 89-291, Sec. 2, 79 Stat. 1066; renumbered Sec. 399, Mar. 13, 1970, Pub. L. 91-212, Sec. 10(c)(3), 84 Stat. 67; renumbered Sec. 398, July 23, 1974, Pub. L. 93-353, title II, Sec. 204, 88 Stat. 373, which related to the continuing availability of appropriated funds, was classified to section 280b-10 of this title, prior to repeal by Pub. L. 99-158, Sec. 3(b), Nov. 20, 1985, 99 Stat. 879.

AMENDMENTS

1998 - Subsec. (a). Pub. L. 105-392, Sec. 302(a)(1), struck out "not less than 5, and not more than 15," after "shall make" in introductory provisions.

Subsec. (a)(2). Pub. L. 105-392, Sec. 302(a)(2), inserted "who are living in single family homes or in congregate settings" after "disorders" and struck out "and" at end.

Subsec. (a)(3), (4). Pub. L. 105-392, Sec. 302(a)(3), (4), added par. (3) and redesignated former par. (3) as (4).

1990 - Subsec. (a). Pub. L. 101-557, Sec. 102(a), substituted

"shall make not less than 5, and not more than 15, grants" for

"shall make not less than 3, and not more than 5, grants".

Subsec. (a)(1). Pub. L. 101-557, Sec. 102(b), substituted "with public and private organizations" for "by public and private organizations".



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42 USC Sec. 280c-4

01/03/05

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER II - GENERAL POWERS AND DUTIES
Part K - Health Care Services in the Home
subpart ii - grants for demonstration projects with respect to
alzheimer's disease

-HEAD-

Sec. 280c-4. Requirement of matching funds

-STATUTE-

(a) Requirement of matching funds

(1) (A) For the first year of payments to a State from a grant under section 280c-3(a) of this title, the Secretary may not make such payments in an amount exceeding 75 percent of the costs of services to be provided by the State pursuant to such section.

(B) For the second year of such payments to a State, the Secretary may not make such payments in an amount exceeding 65 percent of the costs of such services.

(C) For the third or subsequent year of such payments to a State, the Secretary may not make such payments in an amount exceeding 55 percent of the costs of such services.

(2) The Secretary may not make a grant under section 280c-3(a) of this title to a State unless the State agrees to make available, directly or through donations from public or private entities, non-

Federal contributions toward the costs of services to be provided pursuant to such section in an amount equal to -

(A) for the first year of payments to the State from the grant, not less than \$25 (in cash or in kind under subsection (c) of this section) for each \$75 of Federal funds provided in the grant;

(B) for the second year of such payments to the State, not less than \$35 (in cash or in kind under subsection (c) of this section) for each \$65 of such Federal funds; and

(C) for the third or subsequent year of such payments to the State, not less than \$45 (in cash or in kind under subsection (c) of this section) for each \$55 of such Federal funds.

(b) Determination of amount of non-Federal contribution

Non-Federal contributions required in subsection (b) of this section may be in cash or in kind, fairly evaluated, including plant, equipment, or services. Amounts provided by the Federal Government, or services assisted or subsidized to any significant extent by the Federal Government, may not be included in determining the amount of such non-Federal contributions.

-SOURCE-

(July 1, 1944, ch. 373, title III, Sec. 398A, formerly Sec. 399, as added Pub. L. 100-175, title VI, Sec. 602, Nov. 29, 1987, 101 Stat. 982; renumbered Sec. 398A, Pub. L. 102-321, title V, Sec. 502(1), July 10, 1992, 106 Stat. 427; amended Pub. L. 105-392, title III, Sec. 302(b), Nov. 13, 1998, 112 Stat. 3586.)

-MISC1-

AMENDMENTS

1998 - Pub. L. 105-392, Sec. 302(b)(1), substituted "Requirement of matching funds" for "Limitation on duration of grant and

requirement of matching funds" in section catchline.

Subsec. (a). Pub. L. 105-392, Sec. 302(b)(2)-(4), redesignated subsec. (b) as (a), substituted "third or subsequent year" for "third year" in pars. (1)(C) and (2)(C), and struck out heading and text of former subsec. (a). Text read as follows: "The period during which payments are made to a State from a grant under section 280c-3(a) of this title may not exceed 3 years. Such payments shall be subject to annual evaluation by the Secretary."

Subsecs. (b), (c). Pub. L. 105-392, Sec. 302(b)(3), redesignated subsecs. (b) and (c) as (a) and (b), respectively.



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42 USC Sec. 280c-5

01/03/05

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER II - GENERAL POWERS AND DUTIES

Part K - Health Care Services in the Home

subpart ii - grants for demonstration projects with respect to
alzheimer's disease

-HEAD-

Sec. 280c-5. General provisions

-STATUTE-

(a) Limitation on administrative expenses

The Secretary may not make a grant under section 280c-3(a) of this title to a State unless the State agrees that not more than 10 percent of the grant will be expended for administrative expenses with respect to the grant.

(b) Description of intended use of grant

The Secretary may not make a grant under section 280c-3(a) of this title to a State unless -

(1) the State submits to the Secretary a description of the purposes for which the State intends to expend the grant; and

(2) such description provides information relating to the programs and activities to be supported and services to be provided, including -

(A) the number of individuals who will receive services

pursuant to section 280c-3(a) of this title and the average costs of providing such services to each such individual; and

(B) a description of the manner in which such programs and activities will be coordinated with any similar programs and activities of public and private entities.

(c) Requirement of application

The Secretary may not make a grant under section 280c-3(a) of this title to a State unless the State has submitted to the Secretary an application for the grant. The application shall -

(1) contain the description of intended expenditures required in subsection (b) of this section;

(2) with respect to carrying out the purpose for which the grant is to be made, provide assurances of compliance satisfactory to the Secretary; and

(3) otherwise be in such form, be made in such manner, and contain such information and agreements as the Secretary determines to be necessary to carry out this subpart.

(d) Evaluations and report by Secretary

The Secretary shall -

(1) provide for an evaluation of each demonstration project for which a grant is made under section 280c-3(a) of this title; and

(2) not later than 6 months after the completion of such evaluations, submit to the Congress a report describing the findings made as a result of the evaluations.

(e) Authorizations of appropriations

For the purpose of carrying out this subpart, there are authorized to be appropriated \$5,000,000 for each of the fiscal years 1988 through 1990, \$7,500,000 for fiscal year 1991, such sums as may be necessary for each of the fiscal years 1992 and 1993,

\$8,000,000 for fiscal year 1998, and such sums as may be necessary for each of the fiscal years 1999 through 2002.

-SOURCE-

(July 1, 1944, ch. 373, title III, Sec. 398B, formerly Sec. 399A, as added Pub. L. 100-175, title VI, Sec. 602, Nov. 29, 1987, 101 Stat. 982; amended Pub. L. 101-557, title I, Sec. 102(c), Nov. 15, 1990, 104 Stat. 2767; renumbered Sec. 398B, Pub. L. 102-321, title V, Sec. 502(1), July 10, 1992, 106 Stat. 427; Pub. L. 105-392, title III, Sec. 302(c), Nov. 13, 1998, 112 Stat. 3586.)

-MISC1-

AMENDMENTS

1998 - Subsec. (e). Pub. L. 105-392 substituted "1991, such sums" for "1991, and such sums" and inserted before period at end ", \$8,000,000 for fiscal year 1998, and such sums as may be necessary for each of the fiscal years 1999 through 2002".

1990 - Subsec. (e). Pub. L. 101-557 substituted "there are" for "there is" and inserted before period at end ", \$7,500,000 for fiscal year 1991, and such sums as may be necessary for each of the fiscal years 1992 and 1993".



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Veda Lyon

To: Lynady, Alexis (AoA/OGM)
Cc: Victoria Alberghini
Subject: RE: NF Diversion grant response to AoA questions

Ms. Lynady,

I'm checking in to be sure you received what was needed from us, re: the request below.

We also wanted to let you know that when we revised our SF 424A, Ms. Alberghini and I noticed that although we included our Indirect cost (\$35,000) on the Budget/Justification form, it was (erroneously) omitted from page 2 of the SF 424A.

The total amount VT/DAIL requested does not change (\$500K for the grant period) but we wanted to be sure you know that the original SF 424A is lacking our Indirect cost line item of \$35,000.00.

Thank-you.

Veda Lyon, Manager
 Community Development Unit, DAIL- State of VT

From: Lynady, Alexis (AoA/OGM) [mailto:Alexis.Lynady@AoA.hhs.gov]
Sent: Wednesday, September 19, 2007 11:28 AM
To: Veda Lyon
Cc: Victoria Alberghini
Subject: RE: NF Diversion grant response to AoA questions

Ms. Lyon,

The work on this application has been transferred from Mr. Lewis to me, Alexis. Yes, the non-federal cash match amount does need to be adjusted - total amounts for Personnel and Fringe, you will need to be going to go towards non-federal cash and the amount

to your question in #3, we have the correct amounts that are

When submitting the revised budget, please provide items of both consultants (\$28,220 each). This could

be the contractual

Please also submit a revised SF-424A that reflects the

Please call me if you have any questions.

Alexis Lynady
 Grant Management Specialist
 202-357-3465

Fax:
 202-357-
 3466

From: Veda Lyon [mailto:Veda.Lyon@dail.state.vt.us]
Sent: Thursday, September 13, 2007 4:19 PM
To: Lewis, Sean P. (AoA)
Cc: Victoria Alberghini
Subject: NF Diversion grant response to AoA questions

9/24/2007

Mr. Lewis,

Attached is an updated spread sheet provided by our Business Office re: the NF Diversion Grant. In comparing notes with our BO Acct assigned to this project (Vickie Alberghini), she gave me corrected information on both the salary and the fringe, to replace the information included in the grant budget section.

Per Ms. Alberghini, the attached spreadsheet provides the accurate information, and does vary but from DAIL's submission re: the budget you have reviewed. Ms. Alberghini provided a brief narrative for each of the items, as well.

1. Salaries:

Salaries in the budget submission: Proj Director @ \$21,000.00; Admin Asst @ \$14,578.00, = \$35,578.00

Salaries in the spreadsheet, Proj Director @ \$21,910.00; Admin Asst @ \$13,673.00, = \$35,583. The attached spreadsheet is \$5.00 more than the budget submission.

2. Fringe:

Fringe in budget submission: Proj Director @ \$6,930.00, Admin Asst @ \$4,811.00, = \$11,741.00

Fringe on the spreadsheet: Proj Director @ \$3,995.00; Admin Asst @ \$9,572.00, = \$13,567.00

The attached spreadsheet is \$1,826.00 more than the budget. (DAIL will make up the difference, i.e. contribute more to the project than originally showed on the budget submission)

3. Question for AoA/Mr. Lewis: Do we need to increase the Non-Federal Cash Match Amt to adjust for these differences? Pls advise.

<<Salary Calculations N H Diversion Grant-9 11 07 for Veda-Final.xls>>

If you have any additional questions, please let me know. Ms. Alberghini and I will be glad to make ourselves available to speak with you, if further discussion or clarification is needed.

Thank you for your assistance.

Sincerely,

Veda Lyon
Manager, Community Development Unit
DAIL
Division of Disabilities, Aging and Independent Living
103 So. Main St., Weeks 2
Waterbury, VT 05671-1601
802-241-2628

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9/24/2007

Application for Federal Assistance SF-424

Version 02

* 1. Type of Submission:

- Preapplication
- Application
- Changed/Corrected Application

* 2. Type of Application:

- New
- Continuation
- Revision

* If Revision, select appropriate letter(s):

* Other (Specify)

* 3. Date Received:

Completed by Grants.gov upon submission.

4. Applicant Identifier:

5a. Federal Entity Identifier:

* 5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

* a. Legal Name: Vermont Dept. of Disabilities, Aging and Independent Living

* b. Employer/Taxpayer Identification Number (EIN/TIN):

03-6000264

* c. Organizational DUNS:

809376155

d. Address:

* Street1: 103 South Main Street

Street2: Weeks Building - 2nd Floor

* City: Waterbury

County:

* State: VT: Vermont

Province:

* Country: USA: UNITED STATES

* Zip / Postal Code: 05671-1601

e. Organizational Unit:

Department Name:

Division Name:

Disability & Aging Svcs.

f. Name and contact information of person to be contacted on matters involving this application:

Prefix: Ms. * First Name: Veda

Middle Name:

* Last Name: Lyon

Suffix:

Title: Community Development Manager

Organizational Affiliation:

* Telephone Number: 802.241.2628

Fax Number: 802.241.4224

* Email: veda.lyon@dail.state.vt.us

9. Type of Applicant 1: Select Applicant Type:

A: State Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

* 10. Name of Federal Agency:

Administration on Aging

11. Catalog of Federal Domestic Assistance Number:

93.048

CFDA Title:

Special Programs for the Aging Title IV and Title II Discretionary Projects

* 12. Funding Opportunity Number:

HHS-2007-AOA-CD-0713

* Title:

Nursing Home Diversion Modernization Grants

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

* 15. Descriptive Title of Applicant's Project:

Vermont Nursing Home Diversion Modernization Project

Attach supporting documents as specified in agency instructions.

Add Attachments Delete Attachments View Attachments

Application for Federal Assistance SF-424

Version 02

16. Congressional Districts Of:

* a. Applicant

* b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:

* a. Start Date:

* b. End Date:

18. Estimated Funding (\$):

* a. Federal	<input type="text" value="500,000.00"/>
* b. Applicant	<input type="text" value="25,137.00"/>
* c. State	<input type="text" value="0.00"/>
* d. Local	<input type="text" value="121,601.00"/>
* e. Other	<input type="text" value="20,262.00"/>
* f. Program Income	<input type="text" value="0.00"/>
* g. TOTAL	<input type="text" value="667,000.00"/>

* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?

- a. This application was made available to the State under the Executive Order 12372 Process for review on
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E.O. 12372.

* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)

Yes No

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: * First Name:
Middle Name:
* Last Name:
Suffix:

* Title:

* Telephone Number: Fax Number:

* Email:

* Signature of Authorized Representative: * Date Signed:

*** Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.

[Empty text input area for Applicant Federal Debt Delinquency Explanation]

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Nursing Home Diversion	93.048	\$ 0.00	\$ 0.00	\$ 500,000.00	\$ 167,000.00	\$ 667,000.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 0.00	\$ 0.00	\$ 500,000.00	\$ 167,000.00	\$ 667,000.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) Nursing Home Diversion	(2)	(3)	(4)	
a. Personnel	\$ 0.00	\$ 0.00	\$ 16,678.00	\$ 18,900.00	\$ 35,578.00
b. Fringe Benefits			5,504.00	6,237.00	11,741.00
c. Travel			1,500.00		1,500.00
d. Equipment					0.00
e. Supplies			3,996.00		3,996.00
f. Contractual			425,428.00	121,601.00	547,029.00
g. Construction					0.00
h. Other			11,894.00	20,262.00	32,156.00
i. Total Direct Charges (sum of 6a-6h)	0.00	0.00	468,000.00	167,000.00	635,000.00
j. Indirect Charges					0.00
k. TOTALS (sum of 6i and 6j)	\$ 0.00	\$ 0.00	\$ 468,000.00	\$ 167,000.00	\$ 635,000.00
7. Program Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

8.	Nursing Home Diversion	\$ 25,137.00	\$	\$ 141,863.00	\$ 167,000.00
9.					0.00
10.					0.00
11.					0.00
12. TOTAL (sum of lines 8-11)		\$ 25,137.00	\$ 0.00	\$ 141,863.00	\$ 167,000.00

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 83,333.00	\$ 83,333.00	\$ 83,333.00	\$ 83,333.00	\$ 83,333.00
14. Non-Federal	\$ 111,332.00	\$ 27,833.00	\$ 27,833.00	\$ 27,833.00	\$ 27,833.00
15. TOTAL (sum of lines 13 and 14)	\$ 194,665.00	\$ 111,166.00	\$ 111,166.00	\$ 111,166.00	\$ 111,166.00

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program	FUTURE FUNDING PERIODS (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16. Nursing Home Diversion	\$ 166,668.00	\$	\$	\$
17.				
18.				
19.				
20. TOTAL (sum of lines 16 - 19)	\$ 166,668.00	\$ 0.00	\$ 0.00	\$ 0.00

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:		22. Indirect Charges:	Please see 23 below.
23. Remarks:	The State does not operate with an indirect rate. DAIL operates with a Statewide Cost Allocation Plan.		

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

0348-0046

Review Public Burden Disclosure Statement

1. * Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance			2. * Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award			3. * Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change		
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> SubAwardee * Name VT Dept. of Disabilities, Aging and Independent Living * Street 1 Street 2 103 South Main Street Weeks Bldg 2nd Floor * City State Zip Waterbury VT: Vermont 05671-1601 Congressional District, if known: VT				5. If Reporting Entity in No.4 is Subawardee. Enter Name and Address of Prime:				
6. * Federal Department/Agency: Administration on Aging				7. * Federal Program Name/Description: Special Programs for the Aging_Title IV_and Title II_Discretionary Projects CFDA Number, if applicable: 93.048				
8. Federal Action Number, if known: _____				9. Award Amount, if known: \$ _____				
10. a. Name and Address of Lobbying Registrant: Prefix * First Name Middle Name _____ n/a _____ * Last Name Suffix n/a _____ * Street 1 Street 2 _____ _____ * City State Zip _____ _____ _____				b. Individual Performing Services (including address if different from No. 10a) Prefix * First Name Middle Name _____ n/a _____ * Last Name Suffix n/a _____ * Street 1 Street 2 _____ _____ * City State Zip _____ _____ _____				
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.				* Signature: Completed on submission to Grants.gov * Name: Prefix * First Name Middle Name Mrs. Camille _____ * Last Name Suffix George _____ Title: Director, Community Development Unit Telephone No.: 802.241.2427 Date: Completed on submission to Grants.gov				
Federal Use Only:					Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)			

Vermont Nursing Home Diversion Modernization Grant Program Narrative

Summary/Abstract

The Vermont Department of Disabilities, Aging and Independent Living (DAIL) requests an eighteen month \$500,000 grant to develop a comprehensive nursing home diversion program targeting individuals age 60 and over who currently are clinically-eligible for the Medicaid-funded Choices for Care program but do not yet meet the Medicaid long-term care financial eligibility criteria. Caregivers of the target population will also be served. The goals of this initiative are to build upon the new provisions within the Older Americans Act, supporting Area Agencies on Aging, in partnership with DAIL, to build consumer-directed flexible supports that enable Vermonters to live independently in the community and avoid unnecessary nursing home placement.

Project objectives are to: (1) develop a non-Medicaid Flexible Choices PLUS cash and counseling program administered through selected Area Agencies on Aging; (2) develop targeting criteria to ensure services are available to those individuals most at-risk of Medicaid spend-down; (3) expand existing support brokerage functions used for the current Flexible Choices option; (4) expand/modify the role of current AAA staff to perform options counseling for the targeted population; (5) develop a comprehensive options counseling curriculum based upon the work completed by the National Association of State Units on Aging and the Independent Living Resource Utilization to facilitate the development of an interactive and informed decision making process; and (6) develop a training program on consumer self-directed care to support AAA and other aging network staff to translate into practice and service delivery the new language in the Older Americans Act regarding "self-directed care".

Project outcomes are to: (1) establish an effective and sustainable nursing home diversion program that can be expanded statewide; (2) transform and modernize funding to support flexible, consumer-directed services; (3) strengthen the capacity of the state to reach older adults before they enter a nursing home, supporting choice in long-term care options and self-directed care.

ATTACHMENT B: NURSING HOME DIVERSION MODERNIZATION PROGRAM NARRATIVE

Current Status of Vermont's Long-Term Care Rebalancing and Nursing Home Diversion Efforts

Background

Vermont is a small rural state with a population of 608,827,¹ modest income levels, geographic challenges and a growing older population. It has been categorized as “an aging state” and is expected to be 8th highest in the nation in 2030, with individuals age 65 and over comprising nearly a quarter of the state's citizens.² Over the next ten years, the projected increase for individuals age 85 and older will be 24%. Even though the “oldest old” are relatively small in number, they have the greatest need for long term care services, and are at high risk of nursing home placement.³

Vermont is nationally recognized as a leader in shifting the balance of long-term care for elders and people with disabilities from nursing facilities and other institutional settings to community-based support. Vermont's 1996 landmark legislation (Act 160) allowed the State to alter the balance between institutional and home and community-based services. The Act required the State to take saved dollars from reduced Medicaid nursing home utilization and shift those funds to home and community-based care. Vermont's aggressive efforts to improve and expand home and community-based services have led to a shift away from nursing home care. Since 1992, Vermont has witnessed a steady decline in the use of nursing homes with the sharpest declines seen in Vermont's oldest old—those 85 years and older. This decline is expected to continue throughout the next ten years.⁴ The award of this nursing home diversion modernization grant will position the State to fulfill its mission to make Vermont the best place in which to grow old or to live with a disability-with dignity, respect and independence.

¹ U.S. Census 2000

² ³ ⁴ Shaping the Future of Long Term Care and Independent Living, State of Vermont, DAIL, 2006 - 2016

Current and Past Efforts and Activities to Facilitate Nursing Home Diversion

Over the past decade and more, Vermont has implemented a number of programs which provide frail and at-risk elders with choices to remain independent in the community. Many of these programs started as a result of federal grant funding; others began as a result of State leadership, vision, and ingenuity.

The Vermont Choices for Care Program

Vermont took a dramatic step in reshaping its long term care system through implementation of the Choices for Care 1115 Medicaid Waiver in October, 2005. Under Choices for Care, enrollees have the option of choosing whether they receive their Medicaid long-term care in the community or in a nursing facility. This is the first program of its kind nationally and since its implementation, has enabled 1,974 Vermonters in need of long term care to “age in place,” substantially reducing the state’s long-term care expenditures. Highlighted accomplishments through this program include:

- An option to permit spouses to be paid caregivers;
- A 24-hour Care option which will provide an alternative for people who previously had no choice other than a nursing facility or residential care home;
- A pilot “cash and counseling” option (Flexible Choices), which provides even greater consumer direction;
- The opening of Vermont’s first PACE center (Program for All-Inclusive Care for the Elderly)

While this program has been very successful in providing nursing facility or home and community-based options for individuals who meet both clinical and financial eligibility criteria, gaps still exist for individuals who are clinically eligible for the Choices for Care program, but are not yet financially-eligible for Medicaid long term care. It is estimated that in the next ten years in Vermont, the projected users of Older Americans Act case management services will increase 31%, homemaker service users will increase 22%, adult day by 23% and mental health and aging by 23%.⁵ Vermont needs to

⁵ Shaping the Future of Long Term Care, State of Vermont, DAIL 2006 – 2016

continue to build the capacity in the community in order to serve individuals who would otherwise move into a nursing home. This will require strategic targeting of services to those most in need and a sustainable and expanding revenue base to develop more services.

Vermont Flexible Choices

The Robert Wood Johnson Foundation funded cash and counseling program called Flexible Choices became another service option under Choices for Care in July 2006. It allows people to convert their plans of care for home-based services into a dollar-equivalent allocation. Working with a consultant, people develop a spending plan for that allocation, which allows them to purchase their care and meet their needs more flexibly. Since this pilot began, a support broker and fiscal intermediary now provide services as an intermediary service organization (ISO) including consultation services, and case managers and State staff are trained in the Flexible Choices option.

The Flexible Choices program provides a proven infrastructure including the cash and counseling model, the support broker fiscal intermediary and counseling supports, and the technical expertise to assist in expanding this model to the non-Medicaid eligible target population. Should Vermont be awarded this grant, it will build upon and expand this successful model to non-Medicaid eligible at-risk elders administered through the AAAs. This would be a first of its kind in the state.

Vermont Dementia Respite Grant

Started as a small state-funded pilot and building from a prior Alzheimer's Disease Demonstration grant, Vermont makes available Dementia Respite grants that can be used for a range of services that give family caregivers a break from their caregiving responsibilities. Funds can be used to hire in-home caregivers or to assist with payment for out-of-home services such as Adult Day Programs. Respite gives family caregivers the opportunity to reduce stress, remain healthy, and maintain overall well-being. In FY '06, 370 individuals and their family caregivers were served. Respite grants are available to family members or other unpaid primary caregivers providing day-to-day in-home care for a person of any age who has been diagnosed with Alzheimer's Disease or a related disorder and meets

certain financial criteria. Priority is given to those who are ineligible for other programs and who anticipate needing out-of-home placement if they do not receive respite services.

The respite program model supports the goals of the nursing home diversion modernization initiative in assisting individuals who do not currently qualify for many State- and Medicaid-funded programs by giving their families much needed support in order to continue to provide the critical informal supports to their loved ones in order to remain out of a nursing home. This grant opportunity will support the respite program as an important component of flexible services and supports, and will provide even greater flexibility in how dementia respite grant funds can be used to best support family caregivers.

Real Choice Comprehensive Systems Reform Grant: Health and Long-Term Care Integration Project:

The work of the MyCare project extends the success of the PACE model to a broader population than can currently be served through PACE. The model supports the goals of diverting individuals from nursing home placement and is another important option that will be made available in the near future to support consumer choice and self-direction.

In September 2004, Vermont was awarded a \$2.1 million Real Choice Comprehensive Systems Reform Grant. Much work has been accomplished over the past three years to integrate funding streams and integrate acute/primary and long-term care service delivery as a choice for older persons who are frail, at-risk or chronically ill, including adults with physical disabilities. The MyCare Vermont program will, when fully developed and implemented, provide person-centered care for individuals over the age of 18, integrate primary/acute and long-term care services through an interdisciplinary team, and will operate through community networks. Additionally, it will provide another important option for individuals to avoid unnecessary nursing home placement.

Aging and Disability Resource Connection(s):

In October 2005, Vermont was awarded a three-year \$800,000 grant from the Administration on Aging and Centers for Medicare and Medicaid Services to develop visible, trusted places in the

community where Vermonters can turn for information about and access to long-term services and supports. Vermont's "no wrong door" decentralized model is being piloted in two regions of the state. The AAAs were the original sites to come on board providing the core functions of an ADRC, including the important service of information, referral and assistance. The ADRC is an integral part of the long term care system, playing a pivotal role in ensuring that all individuals, regardless of age or income, have access to the right information at the right time, in order to make informed decisions.

The ADRCs, by providing comprehensive information and assistance and streamlined access to long term services and supports, will assist the efforts of this grant in identifying individuals at risk of nursing home placement and spend down to Medicaid long term care as well as providing the options counseling necessary to ensure individuals are aware of the full range of choices available to facilitate community-based living. Moreover, the conceptual model has built important relationships across many key agencies and individuals, including the DAIL Long Term Care Clinical Coordinators responsible for conducting clinical eligibility for the Choices for Care program and the Department for Children and Families (DCF), Economic Services Divisions responsible for conducting Medicaid financial eligibility. The relationships already established among these partners will be critical to helping any nursing home diversion program identify those individuals most at-risk, educate consumers about all of their options, and support them in making decisions about their lives.

Area Agencies on Aging and Older Americans Act Services

The AAAs have been in existence in Vermont for over three decades. Their role in the local communities in serving older Vermonters and family caregivers cannot be understated. The AAAs provide information, referral and assistance, benefits counseling, advocacy, options education and case management for Vermonters age 60 and over. They also house the Vermont State Health Information and Assistance Program (SHIP), the National Family Caregiver Support Program, the Senior Companion Program, case management, Dementia Respite Programs, nutrition programs and successful aging initiatives.

Through the availability of Older Americans Act (OAA) funds, AAAs are able to provide a range of programs that offer services and opportunities for older Vermonters to remain as independent as possible and to be active and contributing members of their community. Additionally, AAAs provide a range of services to family caregivers to support them to continue in this essential role. The OAA focuses on improving the lives of older adults and family caregivers in areas of income, housing, nutrition, health, employment, retirement, and social and community services.

Under the OAA, case managers play a vital role in helping older adults and family caregivers build upon their strengths, seek and obtain new resources, and achieve their goals. The Division of Disability and Aging Services (DDAS) within DAIL works closely with the AAAs and Home Health Agencies to develop a comprehensive approach to training staff and to the provision of case management services. Services are provided by certified case managers in accordance with established DDAS Case Management standards. The Standards require that a case manager annually participate in at least twelve hours of relevant education and training in order to retain certification.

DAIL also makes available to AAAs a small amount of State general Flexible Funds on an annual basis to support elders to remain independent in the community. These flexible funds are not tied to any eligibility criteria, but are prioritized to serve those individuals most in need who are at risk of going into a hospital or nursing home. Flexible funds have been a very successful tool for AAAs to augment existing services and supports. It supports the concept of flexible services and supports as envisioned by Vermont's nursing home diversion modernization program. Vermont plans to incorporate and expand the availability of such flexible services and supports to divert individuals from unnecessary nursing home placement within its nursing home diversion program.

Residential Alternatives

Vermont has spent many years building the appropriate array of residential alternatives so that consumers have choices in the types of living arrangements available. Over the past fifteen years, options have expanded—both with Medicaid and non-Medicaid funding, to support aging in place. Examples include:

- Enhanced Residential Care
- Assisted Living Residences
- HomeShare Vermont
- CMS funded Real Choices Supportive Housing Grant
- Housing and Supportive Services Program (HASS)

Quality Improvement Activities

DAIL is one of nine 2004 CMS Real Choice Systems Change Quality Assurance/Quality Improvement grantees. This funding from CMS is being used to develop and implement a comprehensive quality management system across the Department's Division of Disability and Aging Services (DDAS) waivers over a 3-year period that began in September, 2004. The quality management system is based on the expectations contained within the CMS HCBS Quality Framework. The home- and community-based services available under these waivers are provided to individuals with developmental disabilities, older adults, individuals with physical disabilities, and individuals with traumatic brain injuries.

The goals of the grant are to effect enduring systems change that fulfills Vermont's commitment to ensure the health and well-being of individuals receiving waiver services within Vermont's home-and community-based, long-term care system; and to provide a comprehensive quality assurance and quality improvement management system in the HCB waivers utilizing the CMS Quality Framework.

It is the intent of this project to collaborate with the work accomplished already in the development of outcomes and indicators for home and community-based services, and to augment that work with additional outcomes and indicators that specifically address diversion activities.

Goals and Objectives

The goals of this initiative are to build upon the new provisions within the Older Americans Act, supporting Area Agencies on Aging, in partnership with DAIL, to build consumer-directed flexible supports that enable Vermonters to live independently in the community and avoid unnecessary nursing home placement.

Project objectives are to: (1) develop a non-Medicaid Flexible Choices PLUS cash and counseling program administered through selected Area Agencies on Aging; (2) develop targeting criteria to ensure services are available to those individuals most at-risk of Medicaid spend-down; (3) expand existing support brokerage functions used for the current Flexible Choices option; (4) expand/modify the role of current AAA staff to perform options counseling for the targeted population; (5) develop a comprehensive options counseling curriculum based upon the work completed by the National Association of State Units on Aging and the Independent Living Resource Utilization to facilitate the development of an interactive and informed decision making process; and (6) develop a training program on consumer self-directed care to support AAA and other aging network providers to translate into practice and service delivery the new direction in the Older Americans Act regarding “self-directed care”.

Proposed Approach

Vermont will develop a comprehensive nursing home diversion program in partnership with identified AAAs that includes several key components:

- (1) Development of consumer-directed flexible services and supports, called the Flexible Choices PLUS program, that is not tied to any particular program or service offered by AAAs or other aging network service providers. This program is modeled after the existing Flexible Choices, a cash and counseling option being piloted within the Choices for Care program. DAIL, in partnership with the AAAs, plans to develop a monthly allocation for each individual to build an individual support plan, based upon the individual’s needs. Options counselors will assist in identifying the needs, services, and individual support plans in collaboration with consumers and family members. Funding for the services offered within this program will come from grant funds, State general funds and local funds awarded to AAAs.

Shift from status quo: While the AAAs have managed flexible funds for many years to support individuals in need of gap-filling services in order to remain independent in the community, the

implementation of a formal consumer-directed program that builds upon existing resources within the OAA Title III-B and III-E funds, as well as State general funds to support the ability of the AAAs to utilize those resources more flexibly, has never existed before. AAAs utilize their Title III-B and III-E funds to provide a myriad of services to individuals age 60 and over. Many of the individuals served are those who are not eligible for Medicaid-funded services. The implementation of the Flexible Choices PLUS program will enhance and refine the AAAs to utilize funds in ways that follow the needs of the individual, rather than following the funding restrictions of dollars assigned to specific programs and services.

- (2) Expansion of support brokerage and fiscal intermediary services to support this new program. Under this expansion, the AAAs will subcontract with a support brokerage agency to provide fiscal intermediary services including payroll for hired caregivers and attendants and processing of service payments to providers of service under the Flexible Choices PLUS program. Funding for this service will come from grant funds.

Shift from status quo: The AAAs have never contracted with a support broker or fiscal intermediary service to process payroll for consumer-directed services or to provide payments to service providers under the OAA or other State funded programs. Under the Flexible Choices PLUS program, the AAAs will now have the ability to directly contract for these services, enhancing their ability to offer consumer-directed flexible services to support nursing home diversion and independent living.

Partnering with an experienced infrastructure learned through the Choices for Care program, Attendant Services Program, and Flexible Choices, the AAAs will gain a value-added service to offer to individuals in the community who desire to direct their own services.

- (3) Expansion/modification of role of existing AAA staff to perform the role of options counselors as defined by the NASUA/ILRU concept paper. Funding for this service will come from a retooling of how AAAs use their Title III-B monies to pay for case management, information, referral and assistance, and funds for the National Family Caregiver Support program. Identified case managers and other AAA staff funded out of the Title III-B program will function as options counselors—a real

transformation and sustainable use of OAA money to support nursing home diversion and the new language in the OAA.

Shift from status quo: AAAs have offered quality case management services for many years. The skills that the case management staff bring to their respective positions is commendable. Case managers must be certified and must meet specific skill sets, with an expectation for ongoing continuing education. The case managers provide services to the general population of individuals age 60 and over seeking services through the AAA. DAIL also contracts for case management services for the Choices for Care program. There are varying opinions regarding the definition of options counseling and to what extent current case management staff and practices embrace the concept of options counseling. If we look specifically at the concepts put forth by NASUA and ILRU and options counseling practices as part of ADRCs, we will see variations from one AAA to the next in the implementation of those practices. It is the desire of the nursing home diversion program to identify and implement a discrete options counseling role for existing AAA staff that follows the best practices and ideas put forth in the NASUA/ILRU concept paper. This is a shift in existing practice, and by using funds in a more creative way, will be a self-sustaining service into the future.

- (4) To support the expansion of AAA staff to function as options counselors, the program will develop a comprehensive Options Counseling Training Program targeting AAA staff, long term care clinical coordinators currently performing clinical eligibility for the Choices for Care program, hospital discharge planners, Dementia Respite and National Family Caregiver Coordinators at the AAAs, and other aging network service providers. DAIL will seek the input and recommendations of The Lewin Group to assist in identifying national experts who have experience in implementing Options Counseling programs and the development of high-quality training curricula. DAIL intends to implement a competitive bidding process for the development and implementation of the Training Program.

Shift from status quo: Case management training has been a part of the DAIL training curriculum for many years. This training has focused on many topic areas including eligibility for programs, serving

individuals with dementia and other specific diagnoses, working with families, etc. The difference that we envision the introduction of an Options Counseling Training Program to make within the nursing home diversion program is to build a program in the context of the changes within the Older Americans Act, the advent of the ADRCs unfolding across the state, and to support the movement towards consumer choice and consumer direction. Additionally, the invitation to other key aging stakeholders such as hospital discharge planners, home health agencies, adult day programs, long term care clinical coordinators, etc., expands the function of options counseling more broadly. While it does not necessarily mean that all of these entities and agencies would be in the business of performing options counseling as defined by this program, the exposure to the concepts, best practices, and key components assists these aging partners to direct consumers and individuals at-risk to the most appropriate entity.

- (5) Develop a comprehensive Consumer Self-Directed Care Curriculum to support the new language in the Older Americans Act around self-directed care. There exists a paradigm shift in elder services to support a more consumer-directed system of services. Similar to the evolution of the independent living movement within the disability community, the aging network is preparing itself to be able to proactively serve the next generation of baby boomers who come from a very different history and set of expectations. The time is now to prepare our AAAs and other aging network providers in the concepts of self-direction, consumer-direction, and person-centered approaches to service delivery.
Shift from status quo: While AAAs embrace the concept of consumer direction and empowerment, translating concepts into practice is not easy. Using the expertise of consultants, this program will develop a curriculum that will include input from consumers, key aging advocacy organizations in the state, as well as other networks with a long-standing history in self-directed models of services. There is much experience in this area resulting from the recent Real Choice grants, Independence Plus grants, Cash and Counseling models, and Quality Improvement grant activities across the country. We are confident that we will be able to design and build a consumer self-directed curricula that works well for Vermont and Vermonters. This curricula will target not only the AAA staff and

other stakeholders working in partnership to implement the nursing home diversion program, but also consumers, family members, respite and national family caregiver support coordinators. It is just as important for staff to know how to support self-direction as it is for consumers and family members to know how to take responsibility for self-direction and what that means within a cash and counseling model, with flexible services and supports. We envision a system where consumers and families are able to take full advantage of flexible services, and believe individuals should have the choice of self-directing their care.

(6) Development of targeting criteria to ensure nursing home diversion activities are targeting those individuals most at-risk of nursing home placement. The program proposes to build off of the targeting criteria established by the Dementia Respite Grant program:

- a. Age 60 and over
- b. Clinically-eligible for the Choices for Care program
- c. Denied or ineligible for Medicaid long term care
- d. Income at or below 300% of the federal poverty level

It is the desire of this program to also explore a secondary target population of individuals who are currently defined as the Choices for Care Moderate Needs group. These individuals do not currently meet nursing home level of care, and do not meet Medicaid financial eligibility but are at-risk:

- Individuals who require supervision or any physical assistance three (3) or more times in seven (7) days with any single ADL or IADL, or any combination of ADLs or IADLs;
- Individuals who have impaired judgment or decision making skills that require general supervision on a daily basis;
- Individuals who require at least monthly monitoring for a chronic health condition;
- Individuals whose health condition will worsen if services are not provided or if services are discontinued.

Current data indicates that there are 171 individuals on the Moderate Needs Group waiting list as of June 2007. Many of these individuals are waiting for homemaker and adult day services. While these individuals do not yet meet nursing home level of care, it is the belief of the AAAs and of DAIL that this group is an important target group for which to explore nursing home diversion activities. Without necessary services, they may in a short time become clinically eligible for the Choices for Care program. The goals and vision for the nursing home diversion program are to make flexible services available to individuals at-risk of nursing home placement. Should Vermont be able to fold this target population in to its program, it will track the impacts such a program has on delaying institutionalization and the relative costs of providing flexible services.

As a result of these program components, it is anticipated that consumers will benefit from three key areas: (1) options counseling; (2) training in self-directed care and service delivery; and (3) enrollment in the Flexible Choices PLUS program. Using budgetary estimates, it is anticipated that at least 200 consumers over the 18-month grant period will benefit from at least one of the three program components.

DAIL intends to complete the planning of the program in the first nine (9) months of the grant, with program implementation and actual delivery of flexible services and supports to start in month ten. It is the desire to collect data across a nine (9) month period in order to measure the impact of the nursing home diversion program.

DAIL and the AAAs currently utilize the Social Assistance and Management Systems (SAMS) database to manage the information related to Choices for Care and OAA funding and services. The existing SAMS database will be used at the AAAs to track enrolled consumers, individual support plans, and in collaboration with the support broker and fiscal intermediary, a tracking of service costs per enrolled participant.

Project Outcomes

Project outcomes are to: (1) establish an effective and sustainable nursing home diversion program that can be expanded statewide; (2) transform and modernize funding to support flexible,

consumer-directed services; (3) strengthen the capacity of the state to reach older adults before they enter a nursing home, supporting choice in long-term care options and self-directed care.

Key system outcomes to be accomplished include: (1) use of single entry point systems (ADRCs) as pivotal resources to refer consumers to nursing home diversion programs. Because the AAAs are already core partners of the ADRC model in Vermont, this is a highly likely outcome; (2) Serve 200 consumers over an 18-month period in one of three program components: options counseling, consumer self-directed training, and Flexible Choices PLUS services; (3) expansion of program to all AAAs; (4) development of refined targeting criteria serving those individuals at greatest risk of nursing home placement; and (5) overall system and consumer satisfaction with program model.

Project Management

The lead agency, as designated by the Secretary of the Agency of Human Services, will be the Department of Disabilities, Aging and Independent Living (DAIL). Within DAIL, the Division of Disability and Aging Services will manage the project. Veda Lyon, Manager of the Community Development Unit, will be the Project Director. Ms. Lyon manages the administration of the current ADRC grant as well as oversees a number of other grants assigned to her unit. She will supervise compliance with grant objectives and required grant reporting, working closely with the Project Manager, DAIL staff and leadership as well as the AAAs.

The Project Director reports to Camille George, Community Development Unit Director, who will supervise the Project Director's grant activities. The Department's Finance Director will supervise all fiscal services associated with management of this project.

DAIL will contract with a Project Manager who will be responsible for the day to day management of the grant, development of the overall work plan, implementation and grant outcomes, providing direction and facilitation of the grant implementation. This position will review and contribute to the required grant reports, provide project leadership and monitoring of the project's ongoing progress, functioning as liaison among the Grantee (DAIL), AoA, the AAAs and other aging network stakeholders.

The Project Manager will work closely with the AAAs in the development of workplan milestones, timelines, tasks and objectives to assure the successful and ongoing implementation of the program.

Bard Hill, Director of the Information and Data Unit, will collaborate with the Project Director and Project Manager in identifying the appropriate data elements that are available within the SAMS database to support the program.

Maria Mireault, Dementia Project Director, will assist in ensuring that the Respite Grant activities are coordinated with the grant at the local level through the AAAs, as well as assist in identifying respite coordinators who will be a part of the Options Counseling Training Program.

Merle Edwards-Orr, Cash and Counseling Project Director, will provide technical assistance in the implementation of the Flexible Choices PLUS program, including guidance in developing support brokerage and fiscal intermediary services.

Joe Carlamagno, Quality Management Unit Director, will assist in the identification of outcomes and indicators that support the Department's new Quality Management Plan, and define the success of the nursing home diversion program.

A grant management team will be formed that includes the Project Director, Project Manager, key DAIL staff, the AAA leadership and the Council of Vermont Elders (COVE). This team will meet periodically to review the progress of the grant.

The grant will contract with two yet to be identified technical assistance consultants for the following services:

- (1) Development of a comprehensive Options Counseling Curriculum based on the National Association of State Units on Aging and ILRU concept paper written for the Aging and Disability Resource Center grant initiative. DAIL will seek the input of The Lewin Group, the national technical assistance subcontractor for the ADRC grant, to identify consultants

who bring the necessary experience in implementing model Options Counseling programs across the country;

- (2) Development of a comprehensive Consumer Self-Directed Care Curriculum designed for AAA staff, long term care clinical coordinators, respite coordinators, hospital discharge planners, other aging network providers as well as consumers and family members to provide education in facilitating and supporting consumer self-directed care.

Organizational Capability

The Department of Disabilities, Aging and Independent Living has oversight of all State-funded programs that serve older Vermonters and individuals with physical disabilities, developmental disabilities, and/or with traumatic brain injury. The Department has a proven track record for developing and successfully implementing grant funded community-based programs through collaboration with organizations such as the AAAs, Home Health Agencies, Developmental Service Providers, the Vermont Department of Health and consumer advocacy groups. DAIL manages a budget of \$156 million and has strong IT support and robust project management and data collection and analysis capability.

Vermont's Choices for Care, the 1115 Research and Demonstration Program for Long-Term Care has received national recognition and continues to be a model for other states who are seeking ways to reduce their long-term care expenditures while maintaining services for older adults and adults with disabilities. Of the many reports produced by the Department, the 2007-2010 State Plan on Aging, the Long-Term Care Sustainability Study, and the Shaping the Future of Long Term Care and Independent Living Report 2006-2016 were instrumental in developing this proposal.

The AAA network, as the key partner organizations in implementing the nursing home diversion program, includes strong organizations with excellent management capacity. The AAAs have used the SAMS2000 system for several years and manage their data collection and analysis functions appropriately. They are recognized leaders in their planning and service areas in the planning and development of services to older Vermonters and are very interested in enhancing their capacity to serve

individuals who are at risk for nursing home placement. The AAAs, through their existing case management system, have years of experience as advocates and case managers, assisting individuals in identifying their service needs and helping them navigate the long term care system to put those services in place. They also have extensive experience identifying service gaps and collaborating together to try and fill those gaps, or proactively working through the political system to seek funding to support necessary services that do not exist, or are in short supply to serve the demand.

The AAAs have shown the willingness and capacity to think innovatively and move in new directions to improve services for elders. They are ready to partner with DAIL and other community partners to build a successful nursing home diversion program that moves them in a new direction in the support of consumer-driven flexible supports that are not tied to specific programs and services. They view this grant as an opportunity to utilize their resources in a way that supports flexibility and choice, including enhanced support in making informed decisions about long term service options. Vermont anticipates developing an RFP process to identify 2-3 AAAs best positioned to partner with DAIL to pilot the nursing home diversion program. While all AAAs have expressed an interest to partner in this endeavor, DAIL would like to maximize the ability to serve as many consumers as possible through the Flexible Choices PLUS program during this initial project phase. It fully anticipates expanding the project to all AAAs in the future.

Vermont does plan to use two consultants to develop educational curricula necessary to the successful implementation of its nursing home diversion program, but must go through a competitive bid process before a contract can be executed. Therefore, we cannot supply specific information about any consultants at this time.

Vermont is currently implementing ADRCs in two regions of the state to build the capacity for a no-wrong door to long term services and supports for persons of all ages, incomes, and disabilities. The AAAs function as the "single point of entry" to services for the 60 and over population in this decentralized model. The model is now expanding to include additional core partners, extending ADRC services to younger persons with physical disabilities, persons with traumatic brain injury and persons

with developmental disabilities. The AAAs have spent considerable time over the past year building important partnerships and relationships with a number of key agencies who have a responsibility for providing long term services and supports to a broad population including the VT 211 program and the regional resource specialists responsible for ensuring local community resources are reflected and updated in the Refer software resource database. They have built their own internal capacity to utilize Refer software to provide a solid resource database of services for the 60 and over population. As members of the Streamlining Access Workgroup, the AAAs have assisted in developing a long-term strategic plan designed to coordinate and enhance access to long term services and supports from the point of initial contact and the information and referral services, to the development of a more efficient eligibility determination process in collaboration with the long term care clinical coordinators and the regional DCF offices responsible for Medicaid financial eligibility.

The work the AAAs have accomplished as part of the ADRC grant has positioned them solidly to support the components of the nursing home diversion modernization program. The development of a comprehensive Options Counseling Training Program will enhance the ability of the AAAs participating in the ADRC pilots to provide options counseling to individuals based upon the values and recommendations developed by NASUA and ILRU. For those AAAs not yet operating as an Aging and Disability Resource Connection, this training will jump start their capacity to function as an ADRC in collaboration with their other local partners, providing a best practice core function of options counseling well in advance of functioning as a formal ADRC. In this vein, they will be able to serve as a model for their future core partners in the provision of quality, cutting edge options counseling services. The development of the Flexible Choices PLUS program and companion Consumer Self-Directed Care curriculum advances the ADRCs ability to embrace self-direction across all of their services and functions, as well as streamline even further access to long term services and supports that delay unnecessary nursing home placement. Lastly, the relationships that the ADRCs have established with the DAILE long term care clinical coordinators and the regional DCF offices will assist the nursing home diversion program in the identification of individuals who fit the target criteria, and expediting the referral

processes of individuals who are deemed ineligible for Medicaid long term care to the appropriate

AAA/ADRC in the consumer's community.

Attachment C: Budget Justification, Page 1
18- Month Budget

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	TOTAL	Justification
Personnel	\$16,678	\$18,900	0	\$35,578	Project Director = .25FTE = \$21,000 Administrative Assistant = .25FTE = \$14,578
Fringe Benefits	\$5,504	\$6,237	0	\$11,741	Fringe on Project Director and Administrative Assistant at 33% of salary (Healthcare, Workers Comp, Dental, Life, Unemployment Insurance) Project Manager = \$6,930 Administrative Assistant = \$4,811
Travel	\$1,500	0	0	\$1,500	Travel to Annual Grantee Meeting: Airfare: 1 RT x 1 person x \$750/RT = \$760 Lodging: 3 nights x 1 person x \$160/night = \$480 Per Diem: 4 days x 1 person x \$65/day = \$260
Equipment	0	0	0	0	No equipment requested
Supplies	\$3,996	0	0	\$3,996	Consumable supplies (paper, pens, etc.): \$100/month x 18 months = \$1,800 Copying: \$122/month x 18 months = \$2,196

Attachment C: Budget Justification, Page 2

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	TOTAL	Justification
Contractual	\$425,428	\$121,601	0	\$547,029	<p>Contracts for the following services:</p> <p><u>Project Manager</u>: \$42,980 for 18-month time period to provide overall oversight and direction of grant work plan and activities, working in collaboration with Project Director. This is inclusive of all expenses.</p> <p><u>Options Counseling Technical Assistance Consultant</u>: \$28,220 to develop and implement comprehensive options counseling curricula. This is inclusive all expenses.</p> <p><u>Self-Directed Care Technical Assistance Consultant</u>: \$28,220 to develop and implement comprehensive training on the concepts of consumer self-directed care, self-direction within cash and counseling models, case management, and managing individual budgets. This is inclusive of all expenses.</p> <p><u>AAA Contracts for Flexible Choices Program</u>: \$326,008 for contracts with AAAs to develop Flexible Choices Services Package to include flexible, consumer-directed services for the target population. This includes funding for direct services through flexible service packages and subcontracts with a support broker to administer payroll and support broker functions. This is inclusive of all expenses including travel.</p> <p>\$121,601 non-federal cash match generated from contributions from Town Funds to AAAs and State general funds to AAAs.</p>

Attachment C: Budget Justification, Page 3

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	TOTAL	Justification
Other	\$11,894	0	\$20,262	\$32,156	<p>Consumer stipends for participation in consumer advisory meetings at 9 meetings over 18 months x 6 consumers x \$35/meeting = \$1,890</p> <p>Development and printing of marketing materials = \$10,004</p> <p>In-kind match generated from:</p> <p>Grant team meetings: Ave. 12 persons/meeting x 18 meetings, ave of 4 hours/meeting with travel time and value of 1 hour = \$15.43 for total of \$13,332.</p> <p>Training space rental and materials: \$6,930</p>
Indirect Charges	\$35,000	0	0	\$35,000	Indirect charges calculated at 7%
TOTAL	\$500,000	\$146,738	\$20,262	\$667,000	

Attachment D: Project Work Plan, Page 1

Goal: Develop a comprehensive nursing home diversion program targeting individuals age 60 and over who currently are clinically-eligible for the Medicaid-funded Choices for Care program but do not yet meet the Medicaid long-term care financial eligibility criteria														
Measurable Outcome(s):														
(1) Project management team is established (2) AAAs selected to partner with State in development of nursing home diversion program (3) Options Counseling Training Program is developed and implemented (4) Consumer Self-Directed Care Curriculum is developed and implemented (5) Consumers are enrolled in FlexibleChoices PLUS program (6) Sustainability is successfully addressed														
Major Objectives	Key Tasks	Lead Person	Timeframe (Start and End Date by Month) October 2007 – March 31, 2009											
			Oct 07- 08	Nov 07- 08	Dec 07- 08	Jan 08- 09	Feb 08- 09	Mar 08- 09	Apr 08	May 08	June 08	July 08	Aug 08	Sept 08
1. Secure Legislative approval to accept the grant award	<ul style="list-style-type: none"> Request filed with and approved by Joint Fiscal Committee 	DAIL	→											
2. Project Manager hired and oriented to project goals and objectives	<ul style="list-style-type: none"> Issue RFP for Project Manager, review team meets, Project Manager selected, contract issued and Manager oriented to goals and objectives of the project 	DAIL		→										
3. AAAs selected to partner with DAIL to implement nursing home diversion program activities	<ul style="list-style-type: none"> Issue RFP for AAAs, review team meets, AAAs selected, contracts issued, and AAAs oriented to goals and objectives of the project 	DAIL			→									
4. Grant management team established	<ul style="list-style-type: none"> Role and purpose of team developed, members identified and invited, schedule of meetings established 	Project Manager						→						→

Attachment D: Project Work Plan, Page 2

		Oct 07- 08	Nov 07- 08	Dec 07- 08	Jan 08- 09	Feb 08- 09	Mar 08- 09	Apr 08	May 08	June 08	July 08	Aug 08	Sept 08	
5. Consumer Advisory Board established	<ul style="list-style-type: none"> Role and purpose of board developed, members identified and invited, first meeting held and regular meeting schedule established 	Project Manager												
6. Options Counseling Training Program implemented	<ul style="list-style-type: none"> RFP developed and issued, review team meets, consultant selected, contracts issued, and consultant oriented to the goals and objectives of the project Training developed Training implementation plan developed Develop marketing/outreach plan to recruit/identify consumers to participate Trainings scheduled and implemented 	Project Manager												
7. Consumer Self-Directed Care Curriculum implemented	<ul style="list-style-type: none"> RFP developed and issued, review team meets, consultant selected, contracts issued, and consultant oriented to the goals and objectives of the project Training developed Training implementation plan developed Develop marketing/outreach plan to recruit/identify consumers to participate Trainings scheduled and implemented 	Project Manager												

Attachment D: Project Work Plan, Page 3

			Oct 07- 08	Nov 07- 08	Dec 07- 08	Jan 08- 09	Feb 08- 09	Mar 08- 09	Apr 08	May 08	June 08	July 08	Aug 08	Sept 08		
8.	Flexible Choices PLUS program developed	<ul style="list-style-type: none"> • Monthly budget developed and approved • Policies around targeting criteria established • Exclusionary policies developed • Protocols around development of individual support plans developed • Quality improvement plan developed based upon the HCBS quality framework • Develop marketing /outreach plan to recruit/identify consumers to participate 	Project Manager Project Director AAAs	→					→	→	→			→	→	
9.	Subcontracts with fiscal intermediary/ support brokers in place	<ul style="list-style-type: none"> • Contract developed and issued , and agency oriented to the goals and objectives of the project • Payroll and service protocols established 	Project Manager AAAs										→	→	→	
10.	Implement data tracking and data collection processes	<ul style="list-style-type: none"> • Identify measures for successful diversion • Identify data systems necessary for tracking measures • Conduct analysis of data system capacity to track data • Establish local AAA protocols for tracking Flexible Choices PLUS enrollee data 	Project Manager DAIL AAAs	→		→	→	→						→	→	→

Attachment D: Project Work Plan, Page 4

			Oct 07 - 08	Nov 07- 08	Dec 07- 08	Jan 08- 09	Feb 08- 09	Mar 08- 09	Apr 08	May 08	June 08	July 08	Aug 08	Sept 08
11. Develop sustainability and expansion plan	<ul style="list-style-type: none"> Grant management team identify components requiring funds for sustainability Develop plan for continued funding of components Make formal recommendations to Leadership for expansion and continued operations 	Project Director DAIL AAAs Project Manager			→									
					→									
							→							

Biographical Sketch

(Provide the following information for all professional personnel who will be involved in the project. Use continuation pages and follow the general format for each person.)

NAME	TITLE
Veda Lyon	Community Development Manager

ROLE IN PROPOSED PROJECT

Project Director

EDUCATION (Begin with Baccalaureate training and include post-doctoral training)

INSTITUTION AND LOCATION	DEGREE(s)	YEAR CONFERRED	PROFESSIONAL FIELD
Trinity College, Burlington, VT	Bachelor of Science	1998	Human Resources Development, minor in Gerontology

RESEARCH AND/PROFESSIONAL EXPERIENCE (Starting with present position, list training and experience relevant to the proposed project.)

Community Development Manager, Vermont Department of Disabilities, Aging and Independent Living, Waterbury, Vermont, October 2005 to present: Work within the Division of Disability and Aging Services, working with Federal, State and Local agencies to build the capacity in Vermont to meet the needs of older adults and persons with disabilities. Responsibilities include supervisory oversight and direction to professional and administrative staff, development, implementation and oversight of Federal and State grants programs, including Aging and Disability Resource Connections; case management training, certification and development; State Health Insurance Assistance Program; Medicaid Administration; Flexible Funding; Fuel Outreach and management of multiple volunteer, Neighbor-to-Neighbor AmeriCorps and other community service programs. Serve as primary liaison to Federal and State agencies around the development of transportation and housing and supportive services initiatives, policy development and programmatic implementation.

Director, Bartlett Woods Residence, Rockland, Maine, January – April 2005: Directed operations for a 33-unit assisted living residence serving older adults. Duties included financial management; staff recruitment, hiring and supervision; community relations and marketing; case management services for residents and oversight of all assisted living services and plant operations.

Vermont Department of Aging and Independent Living, December 1995 – January 2005:

Project Director, Real Choice Systems Change and Mental Health/Aging Initiatives, June 2003 – December 2005: Administered three statewide programs serving elders and adults with disabilities. Responsible for project development, federal and state reporting requirements, management of grants and contracts with community providers for: 1) the Alzheimer's Disease Demonstration Grant, providing community based respite care and education services to caregivers of and individuals with Alzheimer's Disease and related dementias (ADRD); 2) the Real Choice Systems Change grant, a community development and planning project designed to expand options for and improve the quality of Vermont's long term care delivery system; and 3) the Mental Health and Aging Initiative, providing community based mental health care, treatment and case management services to older adults with mental illness. Represented the Department and staffed the VT Commission on Alzheimer's Disease; and the VT Advisory Council on MH and Aging Initiatives.

Program Chief, Adult Protective Services (March 1999 – June 2003):

Responsible for operations of statewide Adult Protective Services program serving vulnerable seniors and adults with disabilities. Supervised 7 investigative staff and support personnel. Directed intake, screening, referral, investigative, case management and protective services operations and managed program reporting functions. Developed and provided curriculum for abuse prevention education and training programs for the public, human service and health care providers and law enforcement.

Administrator, Advocacy/Independent Living Programs (October 1997 – March 1999)

Administered statewide programs providing services to elders and adults with disabilities, supervising a four-person unit. The unit provided funding and administrative oversight of grants and contracts made to community based non-profits, for services that included case management, public transit assistance, nutrition/Meals on Wheels, volunteer assistance and other community development initiatives supporting independent living. Represented the Department of the Vermont Commission on Alzheimer's Disease and Related Disorders and the Department of Transportation's 5310 Public Transit project committee.

Advocacy Program and Policies Consultant, Home and Community Based Medicaid Waiver Program (December 1995 – October 1997)

Implemented federal Medicaid Waiver for Enhanced Residential Care (ERC) services, a new option for community/residential based long-term care services for senior citizens and younger adults with disabilities. Duties included recruitment, site inspection and RFP solicitations to select community based residential care home providers, development and implementation of program policies and procedures, tracking and preparation of data for monthly and annual reports, preparation of renewal applications to HCFA (CMS). Established and maintained community provider relationships, monitored individual ERC provider and statewide program performance.

Department of Social Welfare, Waterbury, VT (September 1994- December 1995)

Fuel Program Policies Consultant/Administrator

Administered the Vermont Low Income Heating Assistance Program (LIHEAP), a supplemental and emergency heating assistance program serving eight thousand low-income Vermonters. Responsible for development and administration of public policies, procedures and regulations, tracking budget expenditures, communications with state and federal public officials. Member of/staff to the Vermont Fuel Program Advisory Council that served as the principle advisory group for LIHEAP policy development.

VT Office of Economic Opportunity , Waterbury, VT (October 1993 – September 1994)
Consultant

Managed two assignments designed to improve and/or increase access to services for lower income Vermonters, as follows: 1) a Quality Improvement Project: Conducted an assessment of the operations and service delivery systems of an OEO funded community based non-profit. Assessed their capacity for service delivery, quality of services provided, community development activities and public relations. Reported to the Director of OEO and provided a final, summary report of findings and recommendations to improve the agency's operations and service delivery. 2) Americorps Anti-Hunger Project: Implemented a statewide 3-Year Anti-Hunger Project, designed to expand or create new anti-hunger resources within Vermont through community development activities. Developed the core project, hired project staff and oversaw recruitment, training and placement of the Americorps volunteers.

Northeast Kingdom Community Action (NEKCA), Newport, VT (October 1992-September 1993)

Special Projects Staff

Responsible for providing technical support to a non-profit social service agency serving low income Vermonters. Assisted in development of new program initiatives and/or expansion of existing projects; identified potential funding sources; developed budgets and prepared grant applications for submission. Worked closely with senior staff, board committees and community groups to develop program initiatives.

Dartmouth Medical School, Lebanon, NH (October 1991 – September 1992)

Grants Administrator

Responsible for grants administration within Dartmouth Medical School's Microbiology Department, which operated five research laboratories. Reported to the Department Chair. Supported Project Directors in preparation and resubmission of grant applications to NIH, in collaboration with Dartmouth's Grants Development office. Supervised secretarial staff; carried out personnel functions (payroll, orientation, job description development) for graduate student interns and non-exempt staff.

Central Vermont Community Action Council, Barre, VT (March 1986- February 1991)
Executive Director (April 1987-February 1991)

Directed the administration and management of a 100 staff tri-county non-profit serving low-income Vermonters through an array of programs and community development activities, including Head Start, crisis intervention, housing development and rehabilitation, domestic violence intervention/prevention, nutrition/anti-hunger services, transportation assistance and job training. Responsible for public/community relations, fund raising and grant development, and state/federal legislative activities conducted on behalf of an 18 member Board of Directors.

Grants Writer/Development Director (March 1986-April 1987)

Researched and prepared successful funding initiatives for senior housing, adult day services, a statewide food bank, domestic violence projects, early education initiatives, housing rehabilitation projects and crisis intervention services.

Rutland Mental Health Services, Inc. (January 1982-February 1986)

Human Resource Manager

Managed all aspects of HR operations for a mental health and developmental disabilities services agency with 140 personnel, including position control/development, recruitment, wage and hour compliance, salary/benefits package and personnel actions. Developed and maintained the agency's personnel policies, working closely with the Executive Director, Board and supervisory personnel. Managed the agency's initial successful application for 3-year CARF certification (Commission on the Accreditation of Rehabilitation Facilities). Developed and conducted job readiness workshops for adults with disabilities. Staffed Personnel and Community Education Committees of the Board and was principle liaison for community development activities related to the annual town funding and United Way appeals.

Camille F. George
P.O. Box 632
Richmond, Vermont 05477-0632

Home Phone: (802) 434-2307
Work Phone: (802) 241-2427

Home E-mail: curiousgeorges@gmavt.net
Work E-mail: Camille.george@dail.state.vt.us

**SUMMARY OF
QUALIFICATIONS:**

Experience in the field of aging and disabilities. Working knowledge of human services skills, planning, policy development and programmatic and financial management. Strong organizational, interpersonal and communication skills. Ability to interpret and comply with complex federal and state laws and regulations.

**PROFESSIONAL
EMPLOYMENT:**

**Vermont Department of Disabilities, Aging and Independent Living,
Division of Disability and Aging Services, Waterbury, Vermont,
September 1989 to present:**

Director, Community Development Unit, April 2006 to present.
Supervision and oversight of the Division's Community Development Unit, with primary responsibility for working with federal, state and local agencies, providers and consumer's to build Vermont's capacity to meet the needs of older adults, individuals with developmental disabilities, physical disabilities and/or traumatic brain injury, with emphasis placed on developing new initiatives to promote healthy aging, independent living and enhancing service delivery and the quality of life of consumers. Serve as a member of the Division's Leadership Team and responsible for overall programmatic and financial management of all unit employees and operations. Development and coordination of service include focused efforts around autism, supported employment, transportation, housing and supportive services, self-advocacy, elder mental health, emergency preparedness, health promotion/disease prevention, nutrition services, case management and family caregiver services and supports. Primary liaison and responsibility for implementation and oversight of State Unit on Aging functions under the federal Older Americans Act. Direct and/or supervise a range of federal grants. Substantial research, compilation and analysis of national and statewide information, data and other statistics relevant to the aging and disabled population in Vermont.

Independent Living Programs Administrator, October 2000 to April 2006.
Supervision and oversight of Division's Independent Living Unit, including development, implementation, program and policy development, quality assurance, technical assistance, monitoring and supervisory oversight of multiple home and community-based programs and services that promote healthy aging and independent living. Policy development, management and oversight of all Division employees and operations in the absence of and/or at the request of the Division Director/Deputy Commissioner. Implementation and oversight of the Department's work as the State Unit on Aging under the Older American's Act (OAA) and the delivery of OAA services throughout Vermont. Substantial research, compilation and analysis of national and statewide information, data and other statistics relevant to the aging population in Vermont.

Advocacy Program and Policies Consultant, October 1997 to October 2000. Developed, implemented, provided technical assistance and managed service home and community-based service delivery systems for older persons and persons with disabilities. Primary focus on adult day services and transportation. Additional focus on Medicaid programs, State Health Insurance Program and case management. Developed and implemented new program models, policies and standards; collected and analyzed program data; developed reports related to program administration; designed and implemented quality assurance initiatives and facilitated statewide advisory groups.

Independent Living Services Coordinator, February 1993 to October 1997. Negotiated, managed and monitored public outreach programs and grants involving Federal and State government and regional providers. Designed, implemented and monitored quality assurance initiatives; provided data collection and analysis, technical assistance, training and support to expand and enhance services. Represented the Department in collaborate efforts with consumers, providers and government agencies. Monitored Federal and State laws and regulations and analyzed the impact of proposed changes.

State Long Term Care Ombudsman, September 1989 to January 1993. Director of State program (funded by the OAA) representing and advocating on behalf of the interests of long term care facility residents. Oversaw the investigation and resolution of complaints on behalf of residents and performed systems advocacy at the state and national levels to improve the quality of life of residents. Negotiated and monitored annual grant agreements for regional services; developed program objectives and policies, monitoring criteria and evaluation standards; collected and analyzed program data. Maintained current knowledge of Federal and State laws, policies and regulations and analyzed the impact of proposed changes.

Advocate/Outreach Worker, Champlain Valley Agency on Aging, Inc., Winooski, Vermont. March 1987 to September 1989. Outreach and advocacy for a caseload of 180 +/- older Vermonters served under the OAA.

Head Social Worker, Verdelle Village, Inc., St. Albans, Vermont. July 1986 to March 1987. Department Head of Social Services for 120 bed licensed nursing facility/skilled nursing facility. Developed care plans, complied with applicable Federal and State regulations, facilitated admissions and discharges, resolved grievances. Staff supervision and training.

Services Coordinator, Howard Mental Health Services, Burlington, Vermont. December 1984 to July 1986. Service coordination for a caseload of 30 +/- adults with developmental disabilities.

EDUCATION:

UNIVERSITY OF VERMONT, Burlington, Vermont. Graduation: May, 1985. Bachelor of Science Degree in Social Work.

HONORS AND AWARDS:

Commissioner's Award for Excellence, Vermont Department of Aging and Disabilities, 1999 and 2003.

Outstanding Senior in Social Work Award, University of Vermont Honors Convocation, 1985.

Dean's List, Four Semesters, 1983 – 1985.

REFERENCES:

Available upon request.

Bard Hill
186 Tilden Avenue
Richmond, VT 05477
h:802.434.5672 w: 802.241.2335

Education:

B.A. Psychology, 1982: University of Vermont, Burlington, VT
1975-1977: Hobart College, Geneva, NY
1975: Loomis Chaffee School, Windsor, CT

Professional Experience:

Director, Information and Data Unit, 8/05-present

Division of Disability and Aging Services, Vermont Department of Disabilities, Aging and Independent Living, Waterbury, VT (Theresa Wood, Deputy Commissioner)

- Responsible for improving data management and analysis within diverse new division. Responsible for supervision of five staff, supporting data management in a division of approximately one hundred staff and numerous programs/funding sources. Member of Division Leadership Team, which is responsible for policy development. Current projects include monthly performance monitoring of Choices for Care Long Term Care Medicaid Waiver; development of Choices for Care program evaluation; development of secure electronic communication between district DCF staff and regional DAIL staff to expedite LTC Medicaid eligibility process; review and consolidation of DS data management practices; review and coordination of consumer survey practices; member of work team with Area Agencies on Aging to profile needs of local communities; member of Critical Incident Reporting work team.
- Accomplishments include creating core performance measures for 'Choices for Care' Long Term Care Medicaid Waiver; creating new Information and Data Unit, including hiring and training four new staff; successful approval of state regulations for Choices for Care, including facilitation of work team; transition LTC data to new software application (SAMS 2000), including development of business processes, data entry procedures, and training of staff; first-ever financial review of services provided to High Tech program; facilitate restructuring of division's electronic files.
- October, 2005: merit bonus

1115 Medicaid Waiver Project Manager, 1/05-7/05

Division of Disability and Aging Services, Vermont Department of Disabilities, Aging and Independent Living, Waterbury, VT (Theresa Wood, Deputy Commissioner)

- Coordinate design and implementation of Vermont's 1115 Long Term Care Medicaid Waiver including regulations, program management database, and business processes. Member of Department Management Team.
- Accomplishments include federal approval and implementation of the first long-term care 1115 Medicaid Waiver; facilitated multiple work teams and complex work plan in support of federal application and approval process.
- May, 2005: Public Service Recognition as 'Outstanding State Employee'.

Director, Division of Advocacy and Independent Living, 10/03-1/05

Vermont Department of Aging and Disabilities, Waterbury, VT (Patrick Flood, Commissioner; Theresa Wood, Deputy Commissioner).

- Management of a range of community-based services for elders and adults with physical disabilities. Member of Department Management Team. Responsible for division of twenty five staff, managing numerous programs and grants to diverse community-based providers serving over 30,000 people per year.
- Accomplishments include managing several transitions between Intermediary Service Organizations; revised Adult Day service standards; completion of cost study comparing comprehensive costs of HCBS with nursing home costs; successful 'cash and counseling' grant application to Robert Wood Johnson Foundation; primary

liaison with Home Care Council; primary liaison with Designated Agencies; created program performance measures for adult day and waiver services; participated in revision of case management policies and standards; successful management of continued growth in service capacity.

Chief of Home and Community Based Services, 12/97-10/03

Division of Advocacy and Independent Living, Vermont Department of Aging and Disabilities, Waterbury, VT (Patrick Flood, Division Director; Joan Senecal, Division Director)

- Management of community-based long-term care programs, serving elders and adults with physical disabilities. Supervision of four staff positions and five programs, serving over 2,000 people per year.
- Accomplishments include: developed consumer-directed and surrogate-directed Medicaid Waiver service options, including contracting with Intermediary Services Organization; developed a Medicaid state plan Participant-Directed Attendant Care program, including management of work team; developed state plan Adult Day service; developed informed consent/negotiated risk policies; developed home modification/assisted devices services; created several successful 1915c Medicaid Waiver renewal applications, including management of work teams; participated in several successful waiver quality reviews by CMS; monitored financial impact of home health provider tax; initiated surveys of participants in core programs via contract with ORC MACRO; successful management of continued growth in service capacity, associated with 'bending the curve' in use of Medicaid nursing homes.
- January, 1998: merit bonus; May, 2000: Commissioner's Award for Exemplary Public Service; May, 2001: Public Service Recognition as member of 'Outstanding State Team'.

Independent Living Programs Administrator, 7/93-12/97

Division of Advocacy and Independent Living, Vermont Department of Aging and Disabilities, Waterbury, VT (Patrick Flood, Division Director)

- Management of community-based long-term care programs, serving elders and adults with physical disabilities. Supervision of four staff positions and four programs, serving over 1500 people per year.
- Accomplishments include: developed policy and procedure for allocating Medicaid Waiver resources among regions; developed prioritization procedures for Medicaid Waiver applicants; developed Designated Administrative Agencies to manage applications for Medicaid Waiver services; developed grants for regional 'flex funds' to meet non-categorical individual needs; developed of comprehensive Medicaid Waiver policies and procedures manual; developed regional Medicaid Waiver teams to support Medicaid Waiver services at the local level, including regional protocols; member of work team planning Children's Personal Care services; developed individualized Medicaid Waiver personal care service authorizations using individualized assessment tool; developed Enhanced Residential Care Medicaid Waiver; developed policy and guidelines for Attendant Services Program eligibility committee; successful management of significant growth in service capacity.
- May, 1996: Public Service Recognition certificate as member of Long Term Care planning team.

Children's Services Specialist, 7/90-7/93

Child, Adolescent, and Family Unit, Division of Mental Health, Vermont Department of Mental Health and Mental Retardation, Waterbury, VT (Gary DeCarolis, Unit Director)

- Management of Medicaid Waiver for children and adolescents with severe emotional disturbances, including eligibility determination and service authorization. Participated in interagency review teams and approval of all intensive residential placements. Member of State Interagency Team, responsible for interagency policy development and problem resolution. Provided primary response for mental health emergencies involving children and adolescents. Completed quality reviews of waiver service providers. Managed special services funds for children and adolescents. Provided training and consultation to intensive case managers and service providers.
- Accomplishments include a 50% reduction in the number of children and adolescents placed in out-of-state residential programs; successful waiver quality review by CMS; development of intensive case management capacity; member of work team planning the development of PNMI services.

Agency Planning Specialist, 9/87-7/90

Planning Unit, Division of Mental Health, Vermont Department of Mental Health and Mental Retardation, Waterbury, VT (John Pierce, Unit Director)

- Program planning and program development, with primary emphasis on services to children and adolescents with severe emotional disturbances. Led interagency program planning and evaluation work teams. Developed and wrote grant proposals, implemented and monitored grant activities, prepared grant progress reports.
- Accomplishments include the development of a statewide respite care program; participation in systems change grants from the Child and Adolescent Service System Program and the Robert Wood Johnson Foundation.
- 1988: merit bonus

Therapeutic Foster Parent, 12/85-10/90

Washington County Mental Health Services, Barre, VT (Lee Crider, Case Manager)

- Provided therapeutic foster care services to several individuals, including children and adolescents with severe emotional disturbances and young adults with mental retardation.

Job Placement Specialist, 6/85-9/87

Green Mountain Workforce, Montpelier, VT (Mary Lou Razza, Director)

- Provided vocational placement, training, and support to individuals with psychiatric disabilities.

Senior Vocational Instructor, 9/83-6/85

Queen City Enterprises, Burlington, VT (Stephen Fishman, Director)

- Managed a sheltered employment program for individuals with mental retardation and developmental disabilities.

Other pursuits:

Vermont Association for Mental Health: Member of the Board, 1996-present (Personnel Chair 1999-2006, Vice President 2006-present)

Coach youth sports (currently soccer, futsal, softball); skiing; sailing; camping.

MARIA J. MIREAULT

554 Maquam Shore Road
Swanton, Vermont 05488
Phone: (802) 241-3738
Email: maria.mireault@dail.state.vt.us

POSITION

Dementia Project Director at the Department of Disabilities, Aging and Independent Living

SUMMARY OF QUALIFICATIONS

Mental health professional with advanced degree in Clinical Psychology and six years of combined experience in geriatric psychology, community mental health, and program management. Relevant areas of expertise include:

- Extensive clinical experience providing care for older adults with cognitive impairment and / or other psychiatric disorders
- Experience with grant management
- Excellent organizational and documentation skills
- Highly developed verbal and oral communication skills, including public speaking in educational and professional settings
- Research experience in adult development and aging and in health psychology
- Ability to work independently and collaborate productively within a team
- Proficiency with MS Word, MS Outlook and familiarity with MS Excel, and SPSS

PROFESSIONAL EXPERIENCE

DEPT OF DISABILITIES, AGING
& INDEPENDENT LIVING

Waterbury, Vt.

2005-present

Dementia Project Director

- Provide oversight of the Administration on Aging Alzheimer's Disease Demonstration Grant to States for the Vermont Department of Disabilities, Aging and Independent Living
- Prepare grant continuation applications, submit program reports and disseminate information to stakeholders as required by funding agencies
- Provide oversight of the Dementia Respite Grants Program to offer services, education and respite care referrals to eligible caregivers
- Involved in the development and administration of the Caregiver Bridges Program to improve caregiver / care recipient access to services and wellness programs
- Plan curricula and provide training to increase the capacity of professional caregivers to support family caregivers of individuals with dementia
- Liaison between the Department of Disabilities, Aging and Independent Living, the Governor's Commission on Alzheimer's Disease and Related Disorders, the Elder Care Clinician Program and the Elder Mental Health, Dementia and Substance Abuse Advisory Council

- Facilitate meetings for the Governor's Commission on Alzheimer's Disease and Related Disorders, Elder Care Clinician Program and the Elder Mental Health, Dementia and Substance Abuse

HOWARD CENTER FOR HUMAN SERVICES

Burlington, Vt.

2004-2005

Eldercare Clinician

- Conduct intake evaluations, facilitate treatment planning and provide supportive counseling to nursing home residents experiencing cognitive impairment and / or psychiatric disorders
- Function as a liaison between nursing home staff and psychiatric providers
- Provide education to nursing home staff and residents' families about psychological and behavioral issues associated with dementia
- Produce accurate and timely documentation of clinical services provided to clients for medical records and billing department

NORTHWESTERN COUNSELING

& SUPPORT SERVICES

St. Albans, Vt.

2001-2003

Crisis Team Leader / Crisis Clinician / DBT Therapist / Family Psychoeducation Clinician

- Functioned as a liaison representing the crisis team with other NCSS divisions, DMH staff, community service providers, nursing homes, hospitals, local physicians, law enforcement and schools
- Organized and facilitated crisis team meetings to implement initiatives discussed at statewide emergency directors meetings and improve crisis services
- Conducted telephone and face-to-face crisis evaluations to determine level of care required and coordinate follow-up treatment with other care providers
- Provided supportive counseling to individuals in crisis
- Produced accurate and timely documentation of clinical services provided to clients for medical records and billing department
- Facilitated skills training group, provide telephone coaching and individual counseling for DBT clients.
- Facilitated Family Psychoeducation groups for clients with severe and persistent mental illnesses and their families

DOUGLAS HOSPITAL

Verdun, Quebec

2003-present

Doctoral Intern - Clinical Psychology, Department of Psychogeriatrics, Memory Clinic and Dementia Unit

- Performed neuropsychological assessment of individuals with cognitive decline to determine level of functioning and follow-up treatment
- Provided supportive counseling to patients and their families
- Participated at interdisciplinary team meetings to plan appropriate care
- Prepared clinical reports for medical records

DOUGLAS HOSPITAL

Verdun, Quebec

2000-2001

Psychologist, Department of Psychogeriatrics, Outpatient Clinic / Day Hospital

- Conducted intake and neuropsychological evaluations and personality assessments
- Participated at interdisciplinary team meetings discussing treatment planning and patient care
- Provided individual and group counseling to clients when required

- Prepared clinical reports of services provided to clients for medical records
- Coordinated community services for clients

DOUGLAS HOSPITAL

Verdun, Quebec

1997-1999

**M.A. Intern – Clinical Psychology, Department of Psychogeriatrics, Day Hospital / Admissions Unit
Chronic Care Ward**

- Conducted intake and neuropsychological evaluations and personality assessments of patients for treatment coordination
- Provided individual counseling as required
- Participated at interdisciplinary team meetings discussing treatment and discharge planning

IBM CANADA LIMITED

Bromont, Quebec

1987-1988, 1990-1992

Administrative Assistant

- Provided clerical support to purchasing agents and purchasing manager

EDUCATION

CONCORDIA UNIVERSITY

Montreal, Quebec

1996-1998

M.A. Clinical Psychology

FCAR Scholarship Recipient for research in Adult Development and Aging

BISHOPS UNIVERSITY

Lennoxville, Quebec

1991-1995

B.A. Psychology (Honors)

REFERENCES

Available upon request

Biographical Sketch

NAME	TITLE
Joseph Carlomagno	Associate Director of the Division of Developmental Services

ROLE IN PROPOSED PROJECT

Key project management staff in: designing and implementing the Quality Management Plan; assisting in the development and implementation of quality management activities; acting as liaison to the Division of Developmental Services, developmental service providers and advocacy organizations.

EDUCATION

INSTITUTION AND LOCATION	DEGREE(S)	YEAR CONFERRED	PROFESSIONAL FIELD
Saint Anselm College, Manchester, New Hampshire.	B.A.	May 1982	Psychology
University of Vermont, Burlington, Vermont	M.Ed	October 1990	Special Education Transition and Employment Training Specialist Concentration

RESEARCH AND/PROFESSIONAL EXPERIENCE (Starting with present position, list training and experience relevant to the proposed project.)

Associate Director, Division of Developmental Services, State of Vermont, Waterbury, Vermont December 1999 -Present

Director of Operations: performs managerial, administrative and policy development work for the Department of Developmental and Mental Health Services involving oversight of the quality and responsiveness of services provided under the Division of Developmental Services Medicaid waiver. Responsible for the development and implementation of policies and procedures to fulfill requirements of the Medicaid waiver and the Vermont Developmental Disabilities Act of 1996 relating to client eligibility, staffing levels, and quality assurance. Provides leadership in assuring the availability of a qualified designated agency for developmental services in each region, which provides services mandated by law and policy. Responsible for the development and implementation of certification requirements mandated through the Developmental Disabilities Act of 1996 for all programs funded by the Division of Developmental Services. Supervises: Quality Review Teams, Community Alternative Specialists and Nurse Surveyors in the certification, monitoring and quality assurance reviews of community provider programs, and the provision of training to disseminate best practices and technical assistance to remedy deficiencies in order to ensure compliance with federal and state regulations and standards. Reviews office

and field operating procedures and policies and implements necessary improvements. Acts as Division Director in the absence of the Division Director.

Director, Island Community Resources, Martha's Vineyard Community Services, Oak Bluffs, Massachusetts. April, 1995 - December 1999

Director of an agency serving individuals with disabilities. Responsible for four programs including a residential support program, a supported employment program, a family support program and a mental health clubhouse. Duties include: Develop and manage annual budgets; manage all fiscal operations; supervise agency staff; direct all programs and personnel operations; assess area service needs and secure funding; write grants; negotiate contracts with state agencies, schools and private foundations. Responsible for all service delivery to consumers; meeting contract obligations; implementing quality assurance and improvement activities; coordinating with community organizations representing the agency, maintaining statistics and writing reports; providing for staff training in best practices; participating in agency strategic planning; coordinating all ADA policy and activities; coordinating human rights committee; speaking at functions to educate the community regarding the agency and disability issues.

Supported Employment Coordinator, Division of Vocational Rehabilitation, State of Vermont, Waterbury, Vermont. February, 1994- March, 1995

Program and fiscal administrator for 50 supported employment programs funded by the State of Vermont. Responsible for administering a multi-million dollar budget, determining funding and writing contracts, coordinating interagency collaboration among the Divisions of Vocational Rehabilitation, Mental Retardation, Mental Health, Special Education, Division of the Blind and Visually Impaired and the Department of Employment and Training to expand and fund supported employment throughout the state. Responsible for developing new initiatives, evaluating program effectiveness, implementing quality assurance activities, setting state policy and developing procedures on supported employment, and hiring and supervising staff. Additionally, collaborated with the University of Vermont to provide technical assistance to supported employment staff. Presented at statewide and national conferences.

Community Program Specialist, Division of Mental Retardation, State of Vermont, Waterbury, Vermont. September, 1990- February, 1994

Program and fiscal administrator, program evaluator and technical assistant to employment and day service programs funded by the Division of Mental Retardation. Responsible for monitoring 25 supported employment projects, implementing quality assurance and improvement activities; negotiating contracts with providers and state agencies, fiscal planning and management, providing technical assistance to supported employment project staff, developing new programs, maintaining the Vermont supported employment data system and presenting Vermont supported employment at national and statewide conferences. Additionally, served as a consultant to 15 day service programs to increase the level of community based services and increase individual participation in the community. Organized five pilot projects statewide to improve the quality of day services in Vermont.

Coordinator, Transition III, White River Junction, Vermont. April, 1989-September, 1990

Coordinated a supported employment project serving individuals with disabilities. Responsible for managing the project, hiring and supervising staff, ensuring the quality of services, providing technical assistance to businesses, marketing, job development, aggregating project data, coordinating services with state agencies and schools, and administering all aspects of the project. Additionally, provided vocational consultation to area elementary and secondary schools.

Curriculum Coordinator, Transition II, Trinity College of Vermont, Burlington, Vermont.
August, 1988-April, 1989

Developed a curriculum to support workers with disabilities in their jobs. Taught three to four courses a semester. Collaborated with job coaches working with individuals on the job. Administrative duties included: hiring and supervising staff and interns, purchasing curriculum materials, grading, student scheduling and working with Trinity professors to facilitate the integration of students with disabilities into Trinity College classes.

Job Developer, Creative Work Systems, Saco, Maine. March, 1987- June, 1988

Employment Facilitator/Vocational Instructor, United Developmental Services,
Lebanon, New Hampshire. December, 1985- December, 1986

Assistant Teacher, Autism Services Association, Weston, Massachusetts. 1984-1985

Millen Counselor, Charles River Hospital, Wellesley, Massachusetts. 1982-1984



State of Vermont
Agency of Human Services
Office of the Secretary
103 South Main Street
Waterbury, VT 05671-0204
www.ahs.state.vt.us

Phone) 802-241-2220
Fax) 802-241-2979

Cynthia D. LaWare, Secretary

August 14, 2007

Linda Velgouse
U.S. Department of Health and Human Services
Administration on Aging
Washington, DC 20201

Dear Ms. Velgouse:

I am writing to express the VT Agency of Human Services' support and commitment to the goals of Vermont's proposed Nursing Home Diversion grant. The Department of Disabilities, Aging and Independent Living (DAIL), which is part of the Agency of Human Services, will be the lead organization in our Agency for programmatically and financially managing the grant.

The goal of the Vermont Agency of Human Services is to improve the conditions and well-being of Vermonters today and tomorrow and protect those who cannot protect themselves. The Vermont Agency of Human Services funds programs and provides services both directly through our departments and in cooperation with our community partners.

The Grant will create a comprehensive nursing home diversion program, building the Area Agency on Aging (AAAs) network's capacity to target flexible and consumer-directed services to Vermonters age 60 and over who are clinically eligible for the Choices for Care program, but are not yet financially eligible for Medicaid long-term care. This target group is considered the most "at-risk" for nursing home placement. By matching existing State general funds and Older Americans Act funds with federal Administration on Aging grant dollars, Vermont will develop a model program that is built upon the new provisions within the Older Americans Act and supports DAIL's mission and vision to build a system of supports and services that enable Vermonters to live independently in the community and avoid unnecessary nursing home placement.

Too often older Vermonters have just enough income to make them ineligible for State and federally-funded programs, yet they are poor enough to ill-afford to pay for services privately. These individuals go without, or make difficult choices about their

 VERMONT



Letter to Linda Velgouse

August 14, 2007

Page 2

health and well-being. This program will fill an important gap in the system, offering flexible and consumer-driven services to a cohort of individuals who frequently end up in a nursing home if necessary services are not available.

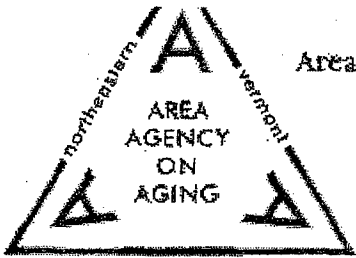
One of the program goals/outcomes will be AAAs serving as the "single point of entry" for the target population. This positions the AAAs in the system to connect with efforts such as the current Aging & Disability Resource Connection initiative, the Flexible Choices "Cash and Counseling" option within the Choices for Care program, Alzheimer's Disease Demonstration Grant initiative and the Department for Children and Families, Economic Services Division.

Thank you for your consideration of Vermont's application.

Sincerely,



Cynthia D. LaWare, Secretary
Agency of Human Services



Area Agency on Aging for Northeastern Vermont

481 Summer Street, Ste 101
St. Johnsbury, VT 05819-2103



Advocacy. Action. Answers on Aging.

August 16, 2007

Linda Velgouse
U.S. Department of Health and Human Services
Administration on Aging
Washington, DC 20201

Dear Ms. Velgouse:

I am writing on behalf of the Vermont Area Agencies on Aging to express our unqualified support for the Vermont Department of Disabilities, Aging and Independent Living's (DAIL) *Nursing Home Diversion Modernization Grant* proposal to the Administration on Aging to develop a comprehensive nursing home diversion program targeting individuals age 60 and over who currently are clinically-eligible for the Medicaid-funded Choices for Care program but do not yet meet the Medicaid long-term care financial eligibility criteria. The AAAs offer a commitment to participate in the planning and implementation necessary to ensure the success of this project.

For over 28 years, Vermont's Area Agencies on Aging have advocated for the needs of Vermont's elders. This grant initiative will provide Vermonters with flexible service options, including consumer directed care and flexible budgets. We have direct experience working with individuals who are frail enough to qualify for the State's Choices for Care program, yet have too much income to qualify for Medicaid long-term care. This places them at high-risk of nursing home placement. This grant will assist these individuals by allowing for payment for new and innovative approaches to providing options for elders.

DAIL and the AAA network are well-positioned to implement the work of this grant, as the goals are consistent with the DAIL mission, shifting the balance efforts, and the reauthorization of the OAA principles and goals. The Vermont Area Agencies on Aging look forward to partnering with the State to ensure a successful implementation of this initiative.

We strongly encourage a favorable review of DAIL's grant application. We look forward to helping DAIL in accomplishing the grant's goals.

Sincerely,


Ken Gordon
Executive Director

A program of the North East Kingdom Council on Aging, Inc.
Tel: [802] 748-5182 FAX: [802] 748-6622 Email: nevaa@together.net



Community of Vermont Elders

August 20, 2007

Linda Velgouse
U.S. Department of Health and Human Services
Administration on Aging
Washington, DC 20201

Dear Ms. Velgouse:

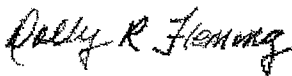
The Community of Vermont Elders (COVE) is pleased to offer our enthusiastic support for the Vermont Department of Disabilities, Aging and Independent Living's (DAIL) *Nursing Home Diversion Modernization Grant* proposal to the Administration on Aging. We understand the intent of this grant is to develop a comprehensive nursing home diversion program targeting individuals age 60 and over who currently are clinically-eligible for the Medicaid-funded Choices for Care program but do not yet meet the Medicaid long-term care financial eligibility criteria. COVE offers a commitment to participate in the planning and implementation necessary to ensure the success of this project.

COVE has worked for 27 years advocating for self determination, dignity, rights and the well-being of Vermont elders. This grant initiative will provide Vermonters with flexible service options, including consumer directed care and flexible budgets. This grant will assist individuals by allowing for payment for new and innovative approaches to providing options for elders.

DAIL and the AAA network are well-positioned to implement the work of this grant, as the goals are consistent with the DAIL mission, our state's vision and the reauthorization of the OAA principles and goals.

We strongly encourage a favorable review of DAIL's grant application. We look forward to exploring ways that COVE can support consumers and DAIL in accomplishing the grant's goals.

Sincerely,

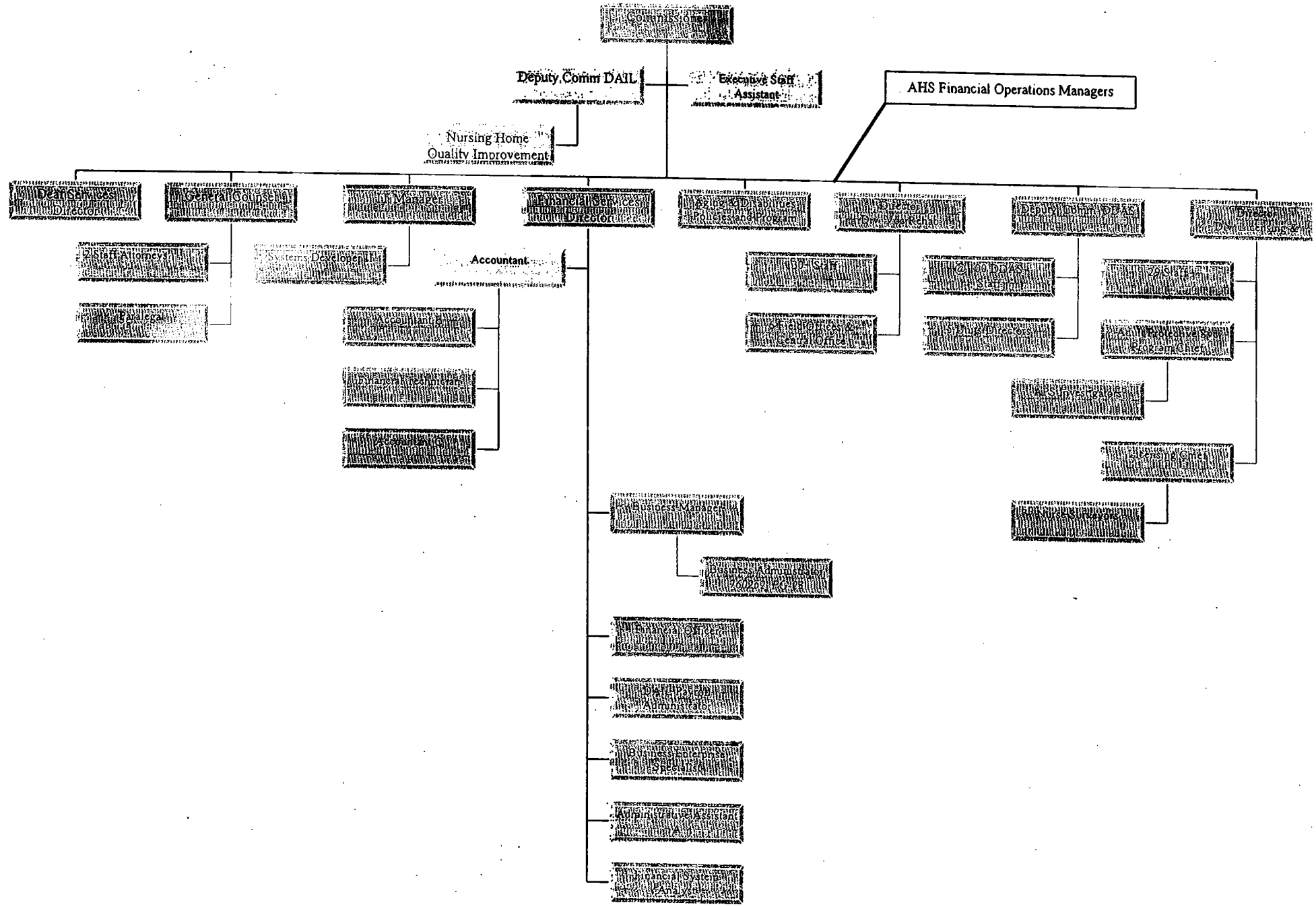


Dolly Fleming
Executive Director

P.O. Box 1276 · 641 Comstock Road, Suite 4 · Montpelier, VT 05602
802-229-4731 · cove@vermontelders.org · www.vermontelders.org



Organizational chart Department of Disabilities, Aging and Independent Living



**ORGANIZATION CHART
DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING
DIVISION OF DISABILITY AND AGING SERVICES**

Theresa Wood
Deputy Commissioner

Lanora Freedom
Executive Staff Assistant

June Bascom
Program Development & Policy Analyst

Gail Falk, Director
Office of Public Guardian

Camille George, Director
Community Development Unit

Bard Hill, Director
Information & Data Unit

Joseph Tomagnio, Director
Quality Management Unit

Leona L'Amore, Director
Individual Supports Unit

Michele LaPerle
Administrative Assistant B

Terri Picard
Program Technician I

Jane Culver
Administrative Assistant B (.5)

Heather Gauvin
Program Technician I

Mike Atley
Rebecca Guyell
Karen Hawley
Joan Stephens
Jan Sherman
Senior Public Guardians

Marybeth Blakeney
Suzan Caslor
Jordan Derderian
David Ramos
Rodger Goodrich
Laurie Gulowski
Timothy Haley
John Homiller
Diane Iorfano-Morris
Lisa Lamoureux
Jon McGovern
Leslie Pinkham
Dale Severy
Lisa Sipse
Elizabeth Spicer
Keith Ulrich
Sedney Ulrich
Linda Vondle
Edmund Wells
Nancy Collins Zucca
Public Guardians

Victoria Wetmore
Community Financial Specialist
Cassandra Torrey
Program Services Clerk

Veda Lyon
Community Development Manager

Janel Merrill
Administrative Assistant B
Jennie Masterson
Supported Employment Specialist
Karen Topper
Consumer Development Coordinator
Gretchen Berger
Housing and Community Services Specialist
Richard Moffi
Supportive Housing Project Manager

Renita Jacobs
Administrative Assistant B
Cecile Sherburn
Administrative Assistant B
Clare McFadden
Autism Specialist
Joan Haslett
Real Choice Project Manager
Maria Mireault
Dementia Project Manager
Vacant
Nutrition Health Promotion Specialist

Dick Laverty
Senior Planner
Deb Tighe
Systems Developer II
Dale Brooks
Systems Developer II
Tracey Harrington
Information Technology Specialist II

Stephen Morabito
Quality Management Development Specialist
Jeff Coy
Training Coordinator

Robert Turchin
QM Team Leader
Al Urpsis
QM Team Leader

Marie Bean
Ellen Booth
Avi Freund
Kathy Rainville
Chris O'Neill
Vacant
Karen Graham
Don Grabowski
QM Reviewers
Ryan Whipple (.5)
Harold Nadeau (.5)
Consumer QM Reviewers
Margaret Higgins
Joy Barrett
QM Nursing Reviewers

David O'Vill
Nurse Intake Coordinator
Merie Edwards-Orr
Cash & Counseling Grant Manager
Vacant (.5)
Administrative Assistant B

Adele Edeleman
Medicaid Waiver

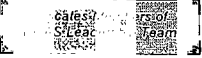
Samantha Baraw
Program Technician I
Erin Weaver
Nancy Marinelli
Megan Tiemey-Ward
Waiver Supervisors

Vacant
TBI Grant Manager
Vacant(.5)
Administrative Assistant B

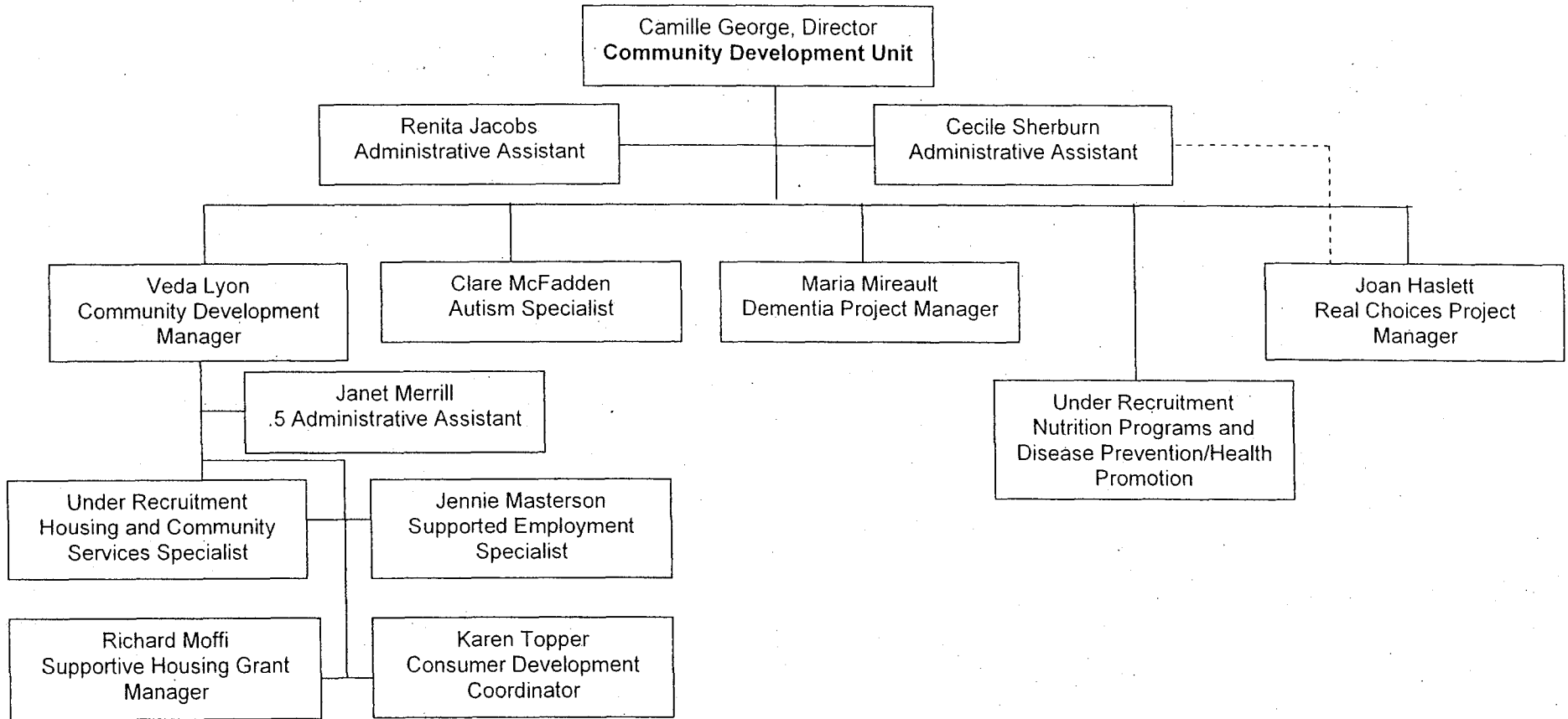
Celine Aprilliano
Julie Bigelow
Jessica Bird
Sally Garmon
Mary Gerdt
Paula Hartshom
George Jurasinski
Maura Krueger
Toni Morgan
Paulette Simard
Brenda Smith
Mary Wood
Jennifer Genung
Long Term Care Clinical Coordinators

Ellen Malone
Developmental & Specialty Services Manager

April Green
Administrative Assistant B
Amy Rolh
Children's Services Specialist
Jennifer Garabedian
Independent Living Services Consultant - Children's Personal Care
Janine Parker-Moulton
Developmental Disabilities Services Specialist
Mike Meunier
Independent Living Services Consultant - Attendant Services
Gordon Bullard
Program Technician I



ORGANIZATION CHART
DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING
DIVISION OF DISABILITY AND AGING SERVICES





State of Vermont
Agency of Human Services
Department of Disabilities, Aging and Independent Living
Division of Disability and Aging Services
103 South Main Street--Weeks Building
Waterbury, VT 05671
Phone: 802-241-2614
Fax: 802-241-4224

Fax Transmittal Form

To: *Alexis Lynady*
Organization Name/Dept: *AOA*
Phone number: *202-357-3465*
Fax number: *202-357-3466*

FROM: *Veda Lyon*
Organization Name/Dept: *DAIL/CDU*
Phone number: *802-241-2628*
Fax number: *802-241-4224*

Date sent: *9/25/07*
Time sent: *2:45*
Number of pages including cover page: *3*

- Urgent
- For Review
- Please Comment
- Please Reply
- Original will be mailed
- Original will not be mailed

Message:

Alexis,

*Here is DAIL's revised SF 424A for your review,
per your request.*

Veda Lyon / DAIL

The documents accompanying this telecopy transmission contain confidential information, belonging to the DAIL that may be legally privileged. This information is intended only for the use of the individual or entity named above. The authorized recipient of this information is prohibited from disclosing this information to any other party and is required to destroy the information after its stated need has been fulfilled.

This information may in whole or part concern a client in alcohol/drug treatment. If so, this information has been disclosed to you from records protected by federal confidentiality rules (42 CFR Part 2). The federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is not sufficient for this purpose. The federal rules restrict any use of the information to criminally investigate or prosecute a patient relative to any alcohol or drug abuse.

BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Nursing Home Divers	93.048	\$	\$	\$ 500,000.00	\$ 168,831.00	\$ 668,831.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 0.00	\$ 0.00	\$ 500,000.00	\$ 168,831.00	\$ 668,831.00
SECTION B - BUDGET CATEGORIES						
6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY					Total (5)
	(1) Nursing Home Divers	(2)	(3)			
a. Personnel	\$	\$	\$ 16,678.00	\$ 18,905.00	\$ 35,583.00	
b. Fringe Benefits			5,504.00	8,063.00	13,567.00	
c. Travel			1,500.00		1,500.00	
d. Equipment					0.00	
e. Supplies			3,996.00		3,996.00	
f. Contractual			425,428.00	121,601.00	547,029.00	
g. Construction					0.00	
h. Other			11,894.00	20,262.00	32,156.00	
i. Total Direct Charges (sum of 6a-6h)		0.00	0.00	465,000.00	168,831.00	633,831.00
j. Indirect Charges			35,000.00		35,000.00	
k. TOTALS (sum of 6i and 6j)	\$	\$ 0.00	\$ 0.00	\$ 500,000.00	\$ 168,831.00	\$ 668,831.00
7. Program Income	\$	\$	\$	\$	\$	0.00

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SECTION C - NON-FEDERAL RESOURCES					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8. Nursing Home Diversion Grant	\$ 26,968.00	\$	\$ 141,863.00	\$ 168,831.00	
9.				0.00	
10.				0.00	
11.				0.00	
12. TOTAL (sum of lines 8-11)	\$ 26,968.00	\$ 0.00	\$ 141,863.00	\$ 168,831.00	
SECTION D - FORECASTED CASH NEEDS					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 333,332.00	\$ 83,333.00	\$ 83,333.00	\$ 83,333.00	\$ 83,333.00
14. Non-Federal	112,554.00	28,138.00	28,138.00	28,139.00	28,139.00
15. TOTAL (sum of lines 13 and 14)	\$ 445,886.00	\$ 111,471.00	\$ 111,471.00	\$ 111,472.00	\$ 111,472.00
SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT					
(a) Grant Program	FUTURE FUNDING PERIODS (Years)				
	(b) First	(c) Second	(d) Third	(e) Fourth	
16. Nursing Home Diversion Grant	\$ 166,668.00	\$	\$	\$	
17.					
18.					
19.					
20. TOTAL (sum of lines 16-19)	\$ 166,668.00	\$ 0.00	\$ 0.00	\$ 0.00	
SECTION F - OTHER BUDGET INFORMATION					
21. Direct Charges:		22. Indirect Charges:			
23. Remarks:					



[Home](#) > [Apply for Grants](#) > Confirmation

CONFIRMATION

Thank you for submitting your grant application package via Grants.gov. Your application is currently being processed by the Grants.gov system. Once your submission has been processed, Grants.gov will send email messages to advise you of the progress of your application through the system. Over the next 24 to 48 hours, you should receive two emails. The first will confirm receipt of your application by the Grants.gov system, and the second will indicate that the application has either been successfully validated by the system prior to transmission to the grantor agency or has been rejected due to errors.

Please do not hit the back button on your browser.

If your application is successfully validated and subsequently retrieved by the grantor agency from the Grants.gov system, you will receive an additional email. This email may be delivered several days or weeks from the date of submission, depending on when the grantor agency retrieves it.

You may also monitor the processing status of your submission within the Grants.gov system by using the following steps:

1. Go to <http://www.grants.gov>
2. Click on the "Applicants" link at the top of the Grants.gov home page
3. Login to the system using your AOR user id and password
4. Click on the "Application Status" link at the left of your screen.

Note that once the grantor agency has retrieved your application from Grants.gov, you will need to contact them directly for any subsequent status updates. Grants.gov does not participate in making any award decisions.

IMPORTANT NOTICE: If you do not receive a receipt confirmation and either a validation confirmation or a rejection email message within 48 hours, please contact us. The Grants.gov Contact Center can be reached by email at support@grants.gov, or by telephone at 1-800-518-4726. Always include your Grants.gov tracking number in all correspondence. The tracking numbers issued by Grants.gov look like GRANTXXXXXXXXX. Contact Center hours of operation are Monday-Friday from 7:00 A.M. to 9:00 P.M. Eastern Standard Time.

The following application tracking information was generated by the system:

Grants.gov Tracking GRANT00330589

Number :
CFDA Number : 93.048
CFDA Description : Special Programs for the Aging_Title IV_and
Title II_Discretionary Projects
**Funding Opportunity
Number :** HHS-2007-AOA-CD-0713
**Funding Opportunity
Description :** Nursing Home Diversion Modernization
Grants
Agency Name : Administration on Aging
**Application Name of
this Submission :** VT Nursing Home Diversion Project
**Date/Time of
Receipt :** 2007.08.22 4:08 PM, EDT

It is suggested you Save and/or Print this response for your records.

CLOSE

Camille George

From: support@grants.gov
Sent: Wednesday, August 22, 2007 4:09 PM
To: Camille George
Subject: Grants.gov Submission Receipt GRANT00330589

Your application has been received by Grants.gov and is currently being validated.

Your submission was received at 22-Aug-07 04:08:52 PM EDT

Type: GRANT

Grants.gov Tracking Number: GRANT00330589

We will notify you via email when your application has been validated by Grants.gov and is ready for the Grantor agency to retrieve and review.

DUNS Number: 809376155

Application Name: VT Nursing Home Diversion Project

Opportunity Number: HHS-2007-AOA-CD-0713

Opportunity Name: Nursing Home Diversion Modernization Grants

AOR Name: Camille George

<https://apply.grants.gov/ApplicantLoginGetID>

Thank you,

Grants.gov Customer Support

www.support@grants.gov

800-518-4726(7 a.m. - 9 p.m. ET)

PLEASE NOTE: This email is for notification purposes only. Please do not reply to this email for any purpose.

<https://apply.grants.gov/>

Camille George

From: support@grants.gov
Sent: Wednesday, August 22, 2007 4:10 PM
To: Camille George
Subject: Grants.gov Submission Validation Receipt for Application GRANT00330589

Your application has been received and validated by Grants.gov and is being prepared for Grantor agency retrieval and review.

Type: GRANT
Grants.gov Tracking Number: GRANT00330589

We will notify you via email when your application is ready to be retrieved by the Grantor agency.

Thank you,

Grants.gov Customer Support
www.support@grants.gov
800-518-4726 (7 a.m. - 9 p.m. ET)

PLEASE NOTE: This email is for notification purposes only. Please do not reply to this email for any purpose.

<https://apply.grants.gov/>

Opportunity Title:	Nursing Home Diversion Modernization Grants
Offering Agency:	Administration on Aging
CFDA Number:	93.048
CFDA Description:	Special Programs for the Aging Title IV and Title II Discre
Opportunity Number:	HHS-2007-AOA-CD-0713
Competition ID:	
Opportunity Open Date:	06/25/2007
Opportunity Close Date:	08/24/2007
Agency Contact:	Richard Nicholls E-mail: richard.nicholls@aoa.gov Phone: 202-357-0152

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

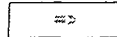
This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

* Application Filing Name: VT Nursing Home Diversion Project

Mandatory Documents

Open Form

Move Form to
Submission List



Move Form to
Documents List



Mandatory Completed Documents for Submission

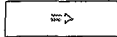
Application for Federal Assistance (SF-424)
 Budget Information for Non-Construction Programs (SF-424A)
 Assurances for Non-Construction Programs (SF-424B)
 Project Narrative Attachment Form
 Budget Narrative Attachment Form
 Grants.gov Lobbying Form

Open Form

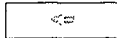
Optional Documents

Open Form

Move Form to
Submission List



Move Form to
Documents List



Optional Completed Documents for Submission

Faith Based EEO Survey
 Disclosure of Lobbying Activities (SF-LLL)

Open Form

Instructions

- 1 Enter a name for the application in the Application Filing Name field.
 - This application can be completed in its entirety offline; however, you will need to login to the Grants.gov website during the submission process.
 - You can save your application at any time by clicking the "Save" button at the top of your screen.
 - The "Submit" button will not be functional until the application is complete and saved.
- 2 Open and complete all of the documents listed in the "Mandatory Documents" box. Complete the SF-424 form first.
 - It is recommended that the SF-424 form be the first form completed for the application package. Data entered on the SF-424 will populate data fields in other mandatory and optional forms and the user cannot enter data in these fields.
 - The forms listed in the "Mandatory Documents" box and "Optional Documents" may be predefined forms, such as SF-424, forms where a document needs to be attached, such as the Project Narrative or a combination of both. "Mandatory Documents" are required for this application. "Optional Documents" can be used to provide additional support for this application or may be required for specific types of grant activity. Reference the application package instructions for more information regarding "Optional Documents".
 - To open an item, simply click on it to select the item and then click on the "Open" button. When you have completed a form or document, click the form/document name to select it, and then click the => button. This will move the form/document to the "Completed Documents" box. To remove a form/document from the "Completed Documents" box, click the form/document name to select it, and then click the <= button. This will return the form/document to the "Mandatory Documents" or "Optional Documents" box.
 - When you open a required form, the fields which must be completed are highlighted in yellow. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message.
- 3 Click the "Submit" button to submit your application to Grants.gov.
 - Once you have properly completed all required documents and saved the application, the "Submit" button will become active.
 - You will be taken to a confirmation page where you will be asked to verify that this is the funding opportunity and Agency to which you want to submit an application.

Application Submission Verification and Signature

Opportunity Title: Nursing Home Diversion Modernization Grants
Offering Agency: Administration on Aging
CFDA Number: 93.048
CFDA Description: Special Programs for the Aging_Title IV_and Title II_Discretionary Projects
Opportunity Number: HHS-2007-AOA-CD-0713
Competition ID:
Opportunity Open Date: 06/25/2007
Opportunity Close Date: 08/24/2007
Application Filing Name: VT Nursing Home Diversion Project

Do you wish to sign and submit this Application?

Please review the summary provided to ensure that the information listed is correct and that you are submitting an application to the opportunity for which you want to apply.

If you want to submit the application package for the listed funding opportunity, click on the "Sign and Submit Application" button below to complete the process. You will then see a screen prompting you to enter your user ID and password.

If you do not want to submit the application at this time, click the "Exit Application" button. You will then be returned to the previous page where you can make changes to the required forms and documents or exit the process.

If this is not the application for the funding opportunity for which you wish to apply, you must exit this application package and then download and complete the correct application package.

[Sign and Submit Application](#)

[Exit Application](#)

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

<p>* SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL</p> <p>Completed on submission to Grants.gov</p>	<p>* TITLE</p> <p>Director, Community Development Unit</p>
<p>* APPLICANT ORGANIZATION</p> <p>Vermont Dept. of Disabilities, Aging and Independent Living</p>	<p>* DATE SUBMITTED</p> <p>Completed on submission to Grants.gov</p>

Project Narrative File(s)

* Mandatory Project Narrative File Filename: Attachment B-Narrative FINAL (3).pdf

Add Mandatory Project Narrative File Delete Mandatory Project Narrative File New Mandatory Project Narrative File

To add more Project Narrative File attachments, please use the attachment buttons below.

Add Optional Project Narrative File Delete Optional Project Narrative File New Optional Project Narrative File

* Mandatory Budget Narrative

VT NH Diversion Budget Narrative FINAL.pdf

Add Mandatory Budget Narrativ

Delete Mandatory Budget Narrative

View Mandatory Budget Narrative

To add more Budget Narrative attachments, please use the attachment buttons below.

Add Optional Budget Narrativ

Delete Optional Budget Narrative

View Optional Budget Narrative

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

* APPLICANT'S ORGANIZATION		
Vermont Dept. of Disabilities, Aging and Independent Living		
* PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE		
Prefix: Mrs.	* First Name: Camille	Middle Name:
* Last Name: George	Suffix:	* Title: Director, Community Development
* SIGNATURE: Completed on submission to Grants.gov	* DATE: Completed on submission to Grants.gov	

* Mandatory Other Attachment Filename: Attachment D-Workplan.pdf

Add Mandatory Other Attachment | Select Mandatory Other Attachment | View Mandatory Other Attachment

To add more "Other Attachment" attachments, please use the attachment buttons below.

Add Optional Other Attachment | Delete Optional Other Attachment | View Optional Other Attachment

Survey on Ensuring Equal Opportunity For Applicants

OMB No. 1890-0014 Exp. 2/28/2009

Purpose:

The Federal government is committed to ensuring that all qualified applicants, small or large, non-religious or faith-based, have an equal opportunity to compete for Federal funding. In order for us to better understand the population of applicants for Federal funds, we are asking nonprofit private organizations (not including private universities) to fill out this survey.

Upon receipt, the survey will be separated from the application. Information provided on the survey will not be considered in any way in making funding decisions and will not be included in the Federal grants database. While your help in this data collection process is greatly appreciated, completion of this survey is voluntary.

Instructions for Submitting the Survey

If you are applying using a hard copy application, please place the completed survey in an envelope labeled "Applicant Survey." Seal the envelope and include it along with your application package. If you are applying electronically, please submit this survey along with your application.

Applicant's (Organization) Name: Vermont Dept. of Disabilities, Aging and Independent Living

Applicant's DUNS Name: 8093761550000

Federal Program: Nursing Home Diversion Modernization Grants

CFDA Number: 93.048

1. Has the applicant ever received a grant or contract from the Federal government?

Yes No

2. Is the applicant a faith-based organization?

Yes No

3. Is the applicant a secular organization?

Yes No

4. Does the applicant have 501(c)(3) status?

Yes No

5. Is the applicant a local affiliate of a national organization?

Yes No

6. How many full-time equivalent employees does the applicant have? (Check only one box.)

3 or Fewer 15-50
 4-5 51-100
 6-14 over 100

7. What is the size of the applicant's annual budget? (Check only one box.)

Less Than \$150,000
 \$150,000 - \$299,999
 \$300,000 - \$499,999
 \$500,000 - \$999,999
 \$1,000,000 - \$4,999,999
 \$5,000,000 or more

Provide the applicant's (organization) name and DUNS number and the grant name and CFDA number.

1. Self-explanatory.
2. Self-identify.
3. Self-identify.
4. 501(c)(3) status is a legal designation provided on application to the Internal Revenue Service by eligible organizations. Some grant programs may require nonprofit applicants to have 501(c)(3) status. Other grant programs do not.
5. Self-explanatory.
6. For example, two part-time employees who each work half-time equal one full-time equivalent employee. If the applicant is a local affiliate of a national organization, the responses to survey questions 2 and 3 should reflect the staff and budget size of the local affiliate.
7. Annual budget means the amount of money your organization spends each year on all of its activities.

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is **1890-0014**. The time required to complete this information collection is estimated to average five (5) minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: The Agency Contact listed in this grant application package.

Veda Lyon

To: Lynady, Alexis (AoA/OGM)
Cc: Victoria Alberghini
Subject: RE: NF Diversion grant response to AoA questions

Ms. Lynady,

I'm checking in to be sure you received what was needed from us, re: the request below.

We also wanted to let you know that when we revised our SF 424A, Ms. Alberghini and I noticed that although we included our Indirect cost (\$35,000) on the Budget/Justification form, it was (erroneously) omitted from page 2 of the SF 424A.

The total amount VT/DAIL requested does not change (\$500K for the grant period) but we wanted to be sure you know that the original SF 424A is lacking our Indirect cost line item of \$35,000.00.

Thank-you.

Veda Lyon, Manager
 Community Development Unit, DAIL- State of VT

From: Lynady, Alexis (AoA/OGM) [mailto:Alexis.Lynady@AoA.hhs.gov]
Sent: Wednesday, September 19, 2007 11:28 AM
To: Veda Lyon
Cc: Victoria Alberghini
Subject: RE: NF Diversion grant response to AoA questions

Ms. Lyon,

The work on this application has been transferred from Mr. Lewis to me, Alexis. Yes, the non-federal cash match amount does need to be adjusted - total amounts for Personnel and Fringe, you will not be going to go towards non-federal cash and the amc

to your question in #3,
 we have the correct
 amounts that are

When submitting the revised budget, please provide items of both consultants (\$28,220 each). This could

be a portion of the contractual

Please also submit a revised SF-424A that reflects the

Please call me if you have any questions.

Alexis Lynady
 Grant Management Specialist
 202-357-3465

Fax:
 202-357-
 3466

From: Veda Lyon [mailto:Veda.Lyon@dail.state.vt.us]
Sent: Thursday, September 13, 2007 4:19 PM
To: Lewis, Sean P. (AoA)
Cc: Victoria Alberghini
Subject: NF Diversion grant response to AoA questions

9/24/2007

Mr. Lewis,

Attached is an updated spread sheet provided by our Business Office re: the NF Diversion Grant. In comparing notes with our BO Acct assigned to this project (Vickie Alberghini), she gave me corrected information on both the salary and the fringe, to replace the information included in the grant budget section.

Per Ms. Alberghini, the attached spreadsheet provides the accurate information, and does vary but from DAIL's submission re: the budget you have reviewed. Ms. Alberghini provided a brief narrative for each of the items, as well.

1. Salaries:

Salaries in the budget submission: Proj Director @ \$21,000.00; Admin Asst @ \$14,578.00, = \$35,578.00

Salaries in the spreadsheet, Proj Director @ \$21,910.00; Admin Asst @ \$13,673.00, = \$35,583. The attached spreadsheet is \$5.00 more than the budget submission.

2. Fringe:

Fringe in budget submission: Proj Director @ \$6,930.00, Admin Asst @ \$4,811.00, = \$11,741.00

Fringe on the spreadsheet: Proj Director @ \$3,995.00; Admin Asst @ \$9,572.00, = \$13,567.00

The attached spreadsheet is \$1,826.00 more than the budget. (DAIL will make up the difference, i.e. contribute more to the project than originally showed on the budget submission)

3. Question for AoA/Mr. Lewis: Do we need to increase the Non-Federal Cash Match Amt to adjust for these differences? Pls advise.

<<Salary Calculations N H Diversion Grant-9 11 07 for Veda-Final.xls>>

If you have any additional questions, please let me know. Ms. Alberghini and I will be glad to make ourselves available to speak with you, if further discussion or clarification is needed.

Thank you for your assistance.

Sincerely,

Veda Lyon
Manager, Community Development Unit
DAIL
Division of Disabilities, Aging and Independent Living
103 So. Main St., Weeks 2
Waterbury, VT 05671-1601
802-241-2628

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Application for Federal Assistance SF-424

Version 02

* 1. Type of Submission:

- Preapplication
- Application
- Changed/Corrected Application

* 2. Type of Application:

- New
- Continuation
- Revision

* If Revision, select appropriate letter(s):

* Other (Specify)

* 3. Date Received:

Completed by Grants.gov upon submission.

4. Applicant Identifier:

5a. Federal Entity Identifier:

* 5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

* a. Legal Name:

Vermont Dept. of Disabilities, Aging and Independent Living

* b. Employer/Taxpayer Identification Number (EIN/TIN):

03-6000264

* c. Organizational DUNS:

809376155

d. Address:

* Street1:

103 South Main Street

Street2:

Weeks Building - 2nd Floor

* City:

Waterbury

County:

* State:

VT: Vermont

Province:

* Country:

USA: UNITED STATES

* Zip / Postal Code:

05671-1601

e. Organizational Unit:

Department Name:

Division Name:

Disability & Aging Svcs.

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:

Ms.

* First Name:

Veda

Middle Name:

* Last Name:

Lyon

Suffix:

Title:

Community Development Manager

Organizational Affiliation:

* Telephone Number:

802.241.2628

Fax Number:

802.241.4224

* Email:

veda.lyon@dail.state.vt.us

9. Type of Applicant 1: Select Applicant Type:

A: State Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

* 10. Name of Federal Agency:

Administration on Aging

11. Catalog of Federal Domestic Assistance Number:

93.048

CFDA Title:

Special Programs for the Aging Title IV and Title II Discretionary Projects

* 12. Funding Opportunity Number:

HHS-2007-AOA-CD-0713

* Title:

Nursing Home Diversion Modernization Grants

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

* 15. Descriptive Title of Applicant's Project:

Vermont Nursing Home Diversion Modernization Project

Attach supporting documents as specified in agency instructions.

Add Attachments Delete Attachments View Attachments

Application for Federal Assistance SF-424

Version 02

16. Congressional Districts Of:

* a. Applicant: 1

* b. Program/Project: VT

Attach an additional list of Program/Project Congressional Districts if needed.

[Attachment Field] Add Attachment Delete Attachment View Attachment

17. Proposed Project:

* a. Start Date: 10/01/2007

* b. End Date: 03/31/2009

18. Estimated Funding (\$):

* a. Federal	500,000.00
* b. Applicant	25,137.00
* c. State	0.00
* d. Local	121,601.00
* e. Other	20,262.00
* f. Program Income	0.00
* g. TOTAL	667,000.00

* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?

- a. This application was made available to the State under the Executive Order 12372 Process for review on []
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E.O. 12372.

* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)

Yes No [Explanation:]

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: Mrs. * First Name: Camille
Middle Name: []
* Last Name: George
Suffix: []

* Title: Director, Community Development Unit

* Telephone Number: 802.241.2427 Fax Number: 802.241.4224

* Email: camille.george@dail.state.vt.us

* Signature of Authorized Representative: Completed by Grants.gov upon submission. * Date Signed: Completed by Grants.gov upon submission.

*** Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.

[Empty text input area for Applicant Federal Debt Delinquency Explanation]

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Nursing Home Diversion	93.048	\$ 0.00	\$ 0.00	\$ 500,000.00	\$ 167,000.00	\$ 667,000.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 0.00	\$ 0.00	\$ 500,000.00	\$ 167,000.00	\$ 667,000.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) Nursing Home Diversion	(2)	(3)	(4)	
a. Personnel	\$ 0.00	\$ 0.00	\$ 16,678.00	\$ 18,900.00	\$ 35,578.00
b. Fringe Benefits			5,504.00	6,237.00	11,741.00
c. Travel			1,500.00		1,500.00
d. Equipment					0.00
e. Supplies			3,996.00		3,996.00
f. Contractual			425,428.00	121,601.00	547,029.00
g. Construction					0.00
h. Other			11,894.00	20,262.00	32,156.00
i. Total Direct Charges (sum of 6a-6h)	\$ 0.00	\$ 0.00	\$ 468,000.00	\$ 167,000.00	\$ 635,000.00
j. Indirect Charges					0.00
k. TOTALS (sum of 6i and 6j)	\$ 0.00	\$ 0.00	\$ 468,000.00	\$ 167,000.00	\$ 635,000.00
7. Program Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

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Prescribed by OMB (Circular A-102)

8.	Nursing Home Diversion	\$ 25,137.00	\$	141,863.00	\$ 187,000.00
9.					0.00
10.					0.00
11.					0.00
12. TOTAL (sum of lines 8-11)		\$ 25,137.00	\$ 0.00	\$ 141,863.00	\$ 187,000.00

SECTION D - FORECASTED CASH NEEDS

		Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$	83,333.00	\$ 83,333.00	\$ 83,333.00	\$ 83,333.00	\$ 83,333.00
14. Non-Federal	\$	111,332.00	27,833.00	27,833.00	27,833.00	27,833.00
15. TOTAL (sum of lines 13 and 14)	\$	444,664.00	\$ 111,166.00	\$ 111,166.00	\$ 111,166.00	\$ 111,166.00

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

	(a) Grant Program	FUTURE FUNDING PERIODS (Years)			
		(b) First	(c) Second	(d) Third	(e) Fourth
16.	Nursing Home Diversion	\$ 166,668.00	\$	\$	\$
17.					
18.					
19.					
20. TOTAL (sum of lines 16 - 19)		\$ 166,668.00	\$ 0.00	\$ 0.00	\$ 0.00

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:		22. Indirect Charges:	Please see 23 below.
23. Remarks:	The State does not operate with an indirect rate. DAIL operates with a Statewide Cost Allocation Plan.		