



**PROGRAM INSTRUCTION**  
**AoA-PI-10-05**

**TO:** State Agencies on Aging Administering Plans under Title III of the Older Americans Act of 1965, as amended

**SUBJECT:** Guidance on the Development and Submission of FY-2012 State Plans, Amendments and Intrastate Funding Formulas

**LEGAL REFERENCES:** Sections 305, 306, 307, 308, 373, and 705, of the Older Americans Act of 1965, As Amended

The purpose of this Program Instruction (PI) is to provide States with guidelines for use in developing and submitting FY 2012 State Plans and Plan Amendments including intrastate funding formula (IFF) requirements. Resources available to assist State in the development and writing of their State Plan include:

- Your Regional Office of the Administration on Aging (AoA); and
- The TASC Planning Zone – a national aging services planning model at [http://www.nasuad.org/tasc/tasc\\_index.html](http://www.nasuad.org/tasc/tasc_index.html)

***The PI contains the following:***

- I. STATE PLAN VISION AND FOCUS AREAS
  - A. Older Americans Act (OAA) Core Programs
  - B. AoA Discretionary Grants
  - C. Consumer Control and Choice
- II. STATE PLAN CONTENT
  - A. Signed Verification of Intent
  - B. Narrative (1. Executive Summary; 2. Context; 3. Goals/Objectives; 4. Strategies; and 5. Outcomes and Performance Measures)
  - C. Intrastate Funding Formula
  - D. Attachments to State Plan
- III. STATE PLAN SUBMISSION AND APPROVAL
- IV. ATTACHMENTS to the Program Instruction (PI)

**I. STATE PLAN PURPOSE AND FOCUS AREAS**

The State Plan serves multiple purposes:

- Documenting the tangible outcomes planned and achieved as a result of state long-term care reform efforts.
- Translating activities, data, and outcomes into proven best practices, which can be used to leverage additional funding.

- Providing a Blueprint that spells out the activities the state will undertake in modernizing its long-term care system.
- Building Capacity for long-term care efforts in the state.

It is the intent of AoA that States incorporate into the State Plan as many of their activities related to aging as possible, regardless of funding source, e.g., activities related to new federal health care programs such as “Care Transitions” and “Risk Reduction”. The plan should serve as a valuable tool for planning/tracking all efforts on behalf of older adults. Information on Affordable Care Opportunities for the Aging Network is available at the AoA website below:

[http://www.aoa.gov/Aging\\_Statistics/Health\\_care\\_reform.aspx](http://www.aoa.gov/Aging_Statistics/Health_care_reform.aspx)

The TASC Planning Zone, an aging services planning model developed by the National Association of States United for Aging and Disabilities (NASUAD) and AoA, is available to assist States in developing the FY 2012 plans. This web based tool located at [http://www.nasuad.org/tasc/tasc\\_index.html](http://www.nasuad.org/tasc/tasc_index.html) provides the resources necessary to develop a comprehensive State Plan on Aging. *The state is strongly encouraged to use this resource and to work with their AoA Regional Office in the development of their plans.*

#### *Focus Areas for FY 2012 State Plans*

In responding to the focus areas, states are expected to discuss their leadership role in developing comprehensive service systems for older individuals, caregivers, and persons with disabilities served through Aging and Disability Resource Centers (ADRCs). Such leadership should include substantial advocacy and coordination activities with an emphasis on creation of a service system that is client centered.

States must include measurable objectives that address each of the three focus areas below (A through C) in the Goals and Objectives section of the State Plan Content (Section II.B.3.). Data and other resources for developing measurable objectives/performance measures are available on the “Resource Links” section of the TASC Planning Zone.

**A. Older Americans Act (OAA) Core Programs** - OAA core programs are encompassed in Titles III (Supportive Services, Nutrition, Disease Prevention/Health Promotion and Caregiver Programs), VI (Native American Programs), and VII (Elder Rights Programs), and serve as the foundation of the national aging services network. *Describe your state’s plans to:*

- (1) Coordinate Title III programs with Title VI Native American programs, including potential opportunities for coordination with the Indian Health Service (IHS);
- (2) Strengthen and/or expand Title III & VII services, e.g., refining SPR data and using same to track services provided to at-risk populations. Note: *States are*

*encouraged to provide evidence-based interventions with Title III-D funds, where feasible; and*

(3) Integrate Titles III and VII with AoA discretionary programs addressed in Focus Area B below.

Specific resources to assist states in maximizing coordination and planning efforts in Core programs are available on the “Resource Links” section of the TASC Planning Zone:

[http://www.nasuad.org/tasc/resource\\_links.html](http://www.nasuad.org/tasc/resource_links.html)

**B. AoA Discretionary Grants** – For each of the following AoA Discretionary Grant programs received by your state, develop measurable objectives that include integration of these programs with OAA core programs above (Focus Area A): Community Living Programs (CLP); Alzheimer’s Disease Supportive Services Program (ADSSP); Lifespan Respite; and Evidence-Based Disease and Disability Prevention Program.

Note: For ADRC Discretionary grants, list: 1) Projected Objectives, 2) Partners, and 3) Budget leading to the statewide expansion of ADRCs and full integration with OAA core programs. *The information included in the state plan for ADRCs should be consistent with, and may serve as, the ADRC Five Year plan that will be due as a requirement of your ADRC award (required within 18 months of award).* A template for use in developing the ADRC five year plan and the criteria for Fully Functioning ADRCs may be accessed on the Planning Zone at:

<http://www.nasuad.org/documentation/tasc/ADRCstatewideplantemplate.pdf> and <http://www.nasuad.org/documentation/tasc/criteriaforfullyfunctioningADRCSEP.pdf>

Specific resources to assist states in developing objectives for respective AoA discretionary grants are available at links below as well as at the “Resource Links” pages of the resource section of the TASC Planning Zone.

Aging and Disability Resource Centers (ADRC), Alzheimer’s Disease Supportive Services Program (ADSSP):

<http://www.adrc-tac.org/tiki-index.php?page=HomePage>

Evidence Based Disease Prevention Programs:

<http://www.healthyagingprograms.org/content.asp?sectionid=32>

Lifespan Respite:

<http://www.archrespice.org/>

**C. Consumer Control and Choice** – Making fundamental changes in state policies and programs which support consumer control and choice is recognized as critical focus for State Plans. OAA Title VII programs and services are designed to support this effort, and opportunities also exist for maximizing consumer control and choice in Title III

programs. Describe your planned efforts (measurable objectives) to support consumer control and choice in Title III programs, e.g., consumer choice in providers, and/or use of vouchers. In addition, outline your planned activities to promote consumer control and choice in non-OAA programs you administer such as Veterans Directed Home and Community Based Services (VDHCBS). Specific resources to assist states with building consumer choice and control into aging programs are available at the link below as well as on the “Resource Links” section of the TASC Planning Zone.

National Resource Center for Participant Directed Services –  
<http://www.bc.edu/schools/gssw/nrcpds/>

## II. STATE PLAN CONTENT

The following sections A through D outline the required content of the FY 2012 State Plan on Aging.

### A. Signed Verification of Intent

It is important that the state plan be signed (Verification of Intent) by the Governor or the individual (designee) to whom the Governor has granted signature authority. Such authority should be obtained in writing from the Governor’s office and be on file should AoA need to verify the designation.

### B. Narrative

It is recommended that the narrative of State Plan be comprised of 20 - 30 pages and clearly address the following areas:

1. Executive Summary (approximately 3 pages) - The executive summary should stand alone in summarizing the state’s planned efforts on behalf of older individuals. A well written summary can aid the state in educating the public, lawmakers, and other agencies, and can assist in securing additional resources.
2. Context – The context sets the stage for the State Plan and describes the issues (needs) to be addressed in the rest of the document.
3. Goals and Objectives – Goals are visionary statements that describe the strategic direction in which the state is moving while objectives are the attainable, specific, and measurable steps the State will take to achieve its goals. *Goals should align with the AoA Strategic Plan goals listed found at:*  
[http://www.nasuad.org/documentation/tasc/Strategic Action Plan 2007-2012.pdf](http://www.nasuad.org/documentation/tasc/Strategic_Action_Plan_2007-2012.pdf).  
*One or more objectives should be included for each of the 3 focus areas listed on Pages 2 and 3 of this PI.*
4. Strategies – Strategies outline *how* the goals and objectives will be achieved.

5. Outcomes and Performance Measures related to Focus Areas – Outcomes document the benefit older individuals should derive from the state plan goals, objectives and strategies.

Specific resources are available for each of the above sections on “The Plan” drop down menu of the TASC Planning Zone at [http://www.nasuad.org/tasc/state\\_plan\\_content.html](http://www.nasuad.org/tasc/state_plan_content.html).

#### C. Intrastate Funding Formula

Each new State plan submittal must include a copy of the current intrastate funding formula (IFF) and the resulting funding allocation to the planning and service areas. Any revisions to the IFF must be clearly indicated and take into consideration the statutory requirements listed in Attachment B, Intrastate Funding Formula Requirements. Any change to IFF factors or weights requires approval by the Assistant Secretary. Revisions that do not coincide with a new State plan submittal must be submitted as a State Plan Amendment. Attachment B to this PI, Intrastate Funding Formula (IFF) Requirements, is a guide to the development of new or revised IFFs and is provided for information purposes.

#### D. Attachments (to the State Plan document)

The number and type of state plan attachments will vary from state to state but **every state plan must include Attachment A from this PI, State Plan Assurances, Provisions and Information Requirements.** Please review and respond carefully to this attachment as there are specific tasks that your State assures will be completed such as the development of Emergency Preparedness plans (Sec. 307(a)(29). Other attachments to the plan could include demographic data, needs analysis, special initiatives, etc. The intrastate funding formula may be included as an attachment or in another clearly marked section of the plan.

### III. STATE PLAN SUBMISSION AND APPROVAL

State Agencies on Aging may elect to develop a State Plan for a two, three or four-year period. States with a two or three-year plan may request an extension or may amend plans annually if needed; however, at the end of a four-year plan, the State will develop a new Plan. *There is no statutory authority to extend a Plan beyond a four-year period.*

The deadline for State Plans and Plan Amendments is **July 1, 2011** to the appropriate Regional Office. States that do not operate on the Federal fiscal year must submit State Plans or Plan Amendments at least 90 days prior to plan or amendment implementation. For efficiency and coordination purposes states need to work with their AoA Regional Office on State Plan development prior to the submittal deadline. The AoA Regional Office will be in frequent contact with SUA staff providing technical assistance writing

the plans well in advance of submission so that appropriate technical assistance can be incorporated prior to state approving official sign-off.

Please note a State Plan Amendment is required when a State proposes any of the following:

- Changes to the intrastate funding formula;
- Changes to planning and service areas (PSAs) and/or the designation of area agencies on aging (AAAs); or
- Major changes in objectives such as initiating or deleting an objective related to funding a particular service/initiative, e.g., starting/stopping a transportation program, starting/stopping an ADRC or similar long term care reform project.

State Plans are submitted electronically via email to the appropriate Regional Office of the Administration on Aging with original approving official signature, (e.g., on Verification of Intent page) scanned into or attached to the plan *document*. The Regional Office will review State Plans and send recommendations to the Assistant Secretary who has authority to approve State Plans and State Plan Amendments.

#### **IV. ATTACHMENTS:** (to this Program Instruction)

**Attachment A – State Plan Assurances, Required Activities and Information Requirements** includes all statutory requirements related to the development of State Plans and must be reviewed, signed and included in the State Plan/Amendment submittal. In addition, documentation of how the State will address each assurance, required activity and information requirement must be maintained at the State and made available for review by AoA, as appropriate.

**Attachment B – Intrastate Funding Formula (IFF) Requirements** is a guide to the development of new or revised IFFs and is provided for informational purposes. This attachment ***does not need*** to be included in the State Plan/Amendment submittal.

EFFECTIVE DATE: Immediately

INQUIRIES: Address inquiries to Regional Administrators on Aging,  
DHHS Regional Offices

  
Kathy Greenlee  
Assistant Secretary for Aging