

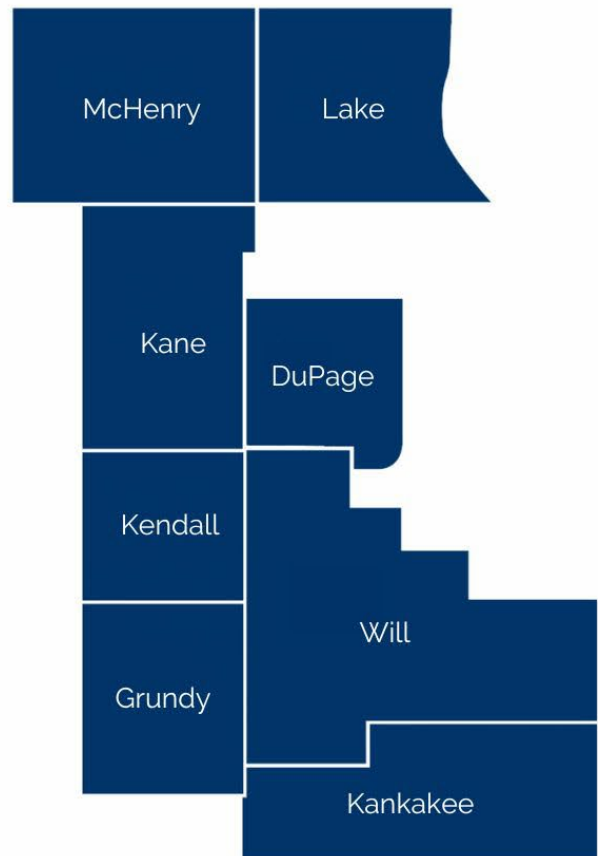


Public Information Document

FY2025 - FY2027 AREA PLAN

Mission of AgeGuide Northeastern Illinois

At AgeGuide, it is our mission to be a vital resource and advocate for people as we age by providing thoughtful guidance, supportive services and meaningful connections.



Serving Older Americans in Northeastern Illinois: DuPage, Grundy, Kane, Kankakee, Kendall, Lake, McHenry and Will Counties
(Planning and Service Area – 02)

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Purpose of the Public Information Document and the Public Hearings

The purpose of this Public Information Document is to provide a summary of the Northeastern Illinois Area Agency on Aging's (AgeGuide) proposed service design, delivery, and the associated fund distributions, and other activities in which AgeGuide anticipates involvement. This Public Information Document summarizes the first year of the three-year AgeGuide Area Plan for Fiscal Years 2025-2027. It is intended to outline AgeGuide's plan for allocating funds so that the public can review this plan and provide comments and questions at the public hearing.

The purpose of the Public Hearing is to provide an open forum for the public to comment on proposed services, expenditures, and other activities as outlined in this document and anticipated to be carried out during Fiscal Year 2025 through 2027 Area Plan Cycle. The Public Hearings provide information about AgeGuide's proposed plans, budget, funding formula, and priorities for funding community-based services for older adults and family caregivers.

**Public Hearings will be held in person and virtually on the following dates:
Register here: <https://bit.ly/ageguide-public-hearings-2024>**

In-Person

Thursday, April 4, 2024
1:00pm-3:00pm
AgeGuide Training Room
1910 S. Highland Ave, Lombard, IL

Virtual

Friday, April 5, 2024
10:00am-12:00pm

If you need special assistance, a translator, closed captioning, or other accommodation, please contact Cristine Ben at (630) 293-5990 prior to the hearing. If you are unable to attend a hearing and would like to comment on this proposed plan, written statements will be received through **April 11, 2024 at 4:00 p.m.** Comments may be faxed, e-mailed, or mailed to the following address:

AgeGuide Northeastern Illinois

Attention: Marla Fronczak, Chief Executive Officer
1910 S. Highland Ave, Suite 100, Lombard, IL 60148
Fax: 630-293-7488; e-mail: info@ageguide.org

A Message from our Chief Executive Officer

This year, AgeGuide is hitting a milestone that's nothing short of extraordinary – our 50th anniversary! We have many opportunities for you to join us as we celebrate half a century of dedicated service and innovation.

As I write this, a shift toward “The Great Reconnection” is unfolding across the region and the nation. The spotlight is on rekindling relationships and building community. This emphasis holds particular significance for older adults, caregivers, and everyone navigating the aging process.

The pandemic disrupted social connections, but it also sparked renewed interest in new experiences and relationships. AgeGuide's plan not only addresses current needs but anticipates future ones. In collaboration with our funded partners, the focus is on strategically building social connections, especially among the most vulnerable older adults.

To move toward this Great Reconnection, AgeGuide is innovating and evolving in response to changing needs, implementing a growing range of services and supports that help older adults, caregivers, and people with disabilities connect to their communities and age well. From information and referral/assistance, transportation, advocacy, health insurance and Medicare counseling, to caregiver and kinship family supports, and so much more – AgeGuide and its network of funded partners, are building new connections.

This 3-year plan for aging services in Northeastern Illinois acknowledges that the challenges facing older adults today may not be the same as they were even three years ago.

Our work with the disability population taught us the concept of “nothing about us without us.” We traveled through our eight counties, listened to what people want and need to support them in their community and incorporated their input into our planning process.

The pandemic also prompted additional Federal funding for the aging network, allowing it to rebuild and expand services. This funding was critical because more people are turning sixty and living longer every day and Federal Older Americans Act funding has not kept pace with increased demand.

With the influx of Federal relief investments, for the first time in many years, we could finally address social connection through innovative new services like ethnic meal options, community restaurant dining sites, and new individually tailored caregiver assessment tools.

Regrettably, the relief funding was temporary. At AgeGuide, our commitment is unwavering - we advocate for additional investments to support social connections and opportunities for everyone, especially those with the greatest social and economic need. This is crucial to support the ongoing Great Reconnection and the overall well-being of our communities.

We appreciate the support from the Department on Aging, AgeGuide's Board, Advisory Council members, and community partners as we continue to enhance the quality of life for everyone on their aging journey.

We encourage you to advocate with us. Together, let's make a lasting impact for the next 50 years!

Sincerely,

Marla Fronczak
CEO, AgeGuide

WHO WE ARE

Northeastern Illinois Area Agency on Aging (AgeGuide), began in 1972 as a model project and was formally designated by the Illinois Department on Aging in 1974. There are over 622 Area Agencies on Aging (AAAs) nationwide. AgeGuide is a nonprofit 501(c)(3) governed by a Board of Directors. The Board sets policy and makes decisions about programs and is advised by an Advisory Council. Volunteers from the eight-county planning and service area (PSA) comprise both the Board and Advisory Council, and the majority of both bodies' members are age 60 years and older.



AgeGuide is one of 13 Area Agencies in Illinois and operates within the aging network which includes the federal Administration on Community Living (ACL), the Illinois Department on Aging (IDoA), and local community-based organizations who work together to serve older adults.

AgeGuide is engaged in its leadership role of developing and enhancing a comprehensive and coordinated community-based service system for older adults, including Elder Rights services and the National Family Caregiver Support Program.

The U.S. Census Bureau reports that in 2022, 735,864 persons age 60 years of age and older live in AgeGuide's region. Over 104,512 older adults and their caregivers received OAA services in the Agency's eight county PSA in Fiscal Year 2023.



**A WIDE RANGE OF LONG-TERM SERVICES AND SUPPORTS
TO CONSUMERS IN THEIR LOCAL PLANNING & SERVICE AREA (PSA)**

WHAT WE DO



ADVOCACY

AgeGuide advocates for older adults, weighing in on policymaking at the local, state, and national level. We advocate to effect policy change that supports aging at home and in the community with maximum health, independence, and well-being. Our advocacy activities are designed to induce a change in attitude and stereotypes, legislation, and policies around older adults, adults with disabilities, and those who care for them. As advocates for services and funding at the federal and state levels, AgeGuide informs older adults, caregivers, and legislators of the impact of proposed legislation on people and services.



COORDINATION

AgeGuide builds working relationships with other local non-profit organizations, governmental agencies, and aging network partners to develop a comprehensive and integrated service delivery system. We seek input from the communities we serve through our Advisory Council, and participation in community-based collaborations. Organizations funded by AgeGuide provide guidance on services and the changing needs of their communities.



PLANNING & PROGRAM DEVELOPMENT

AgeGuide leverages federal dollars, building on Older Americans Act (OAA) funding to expand economic support for Home and Community Based Services. The U.S. Administration on Aging estimates that for every \$1 of federal OAA investment, an additional \$3 is leveraged. AgeGuide understands that bringing services to people where they live in their communities helps them save their own resources and government dollars, making this a more sensible approach from a fiscal and human perspective. AgeGuide conducts a tri-annual community needs assessment that informs our planning and program development processes. We assess the needs of older adults, their caregivers and families and use this information to create, improve and/or expand OAA services.



ADMINISTRATION

AgeGuide administers federal and state funding for Older Americans Act services that are available to any person aged 60 or older, their caregivers and families. These services are targeted to older adults in greatest social and economic need. AgeGuide closely monitors service delivery to ensure that funded partners provide quality outcomes and funding is spent appropriately. AgeGuide awards more than \$26 million annually in federal and state funding to more than 35 community-based service organizations. AgeGuide expends no more than the allowed 10% of administration funding to preserve maximum funding for direct service-related costs.

THE PLANNING PROCESS AND ITS OUTCOMES

Summary of the AgeGuide's Planning Process and its Outcomes

In FY24, AgeGuide prepared for the FY2025-2027 Area Plan Cycle by engaging in a 5-step planning process to assess the needs of older adults, caregivers, and their families. The steps, activities, and analysis are outlined below.

Five Step Planning Process

Step 1: *Assess the needs of Older Adults, Caregivers, & Their Families*

Step 2: *Evaluate the Existing Service System*

Step 3: *Determine Availability of Resources to Meet Needs and Alternative Approaches Available*

Step 4: *Support Area Plan Initiatives and Service Priorities*

Step 5: *Modification and Refinement*

Step 1: Assess the needs of Older Adults, Caregivers, & Their Families

Community Stakeholders and Partners

AgeGuide enlisted the assistance of the Board of Directors, Advisory Council, staff, and the following community stakeholders to help develop the Area Plan, which is our guide to distribute federal and state funding to deliver Older Americans Act services to older adults, people with disabilities, and caregivers.

<p>Advocate Good Shepard Advocate Health Aurora American Society on Aging Aurora Township Senior Citizens Service Committee Aetna Better Health Member Advisory Council American Association of Retired Asians (AARA) American Association of Retired Persons (AARP) Association for Individual Development Alzheimer’s Disease Advisory Committee Alzheimer’s Association Greater Illinois Chapter AMITA Health, Saint Joseph Hospital Elgin Aurora Community Resource Team Barrington Area Council on Aging Blue Cross Blue Shield Stakeholders Care for the Underserved Catholic Charities, Archdiocese of Chicago Catholic Charities, Diocese of Joliet Chicago Food Justice Rhizome Network Chicago Hyde Park Village Chicago Metropolitan Agency for Planning Coalition of Limited English-Speaking Elders Community Services Council of Will Co. Continuity of Care Networks Downers Grove Township</p>	<p>Dorr Township Dundee Township DuPage Hunger Network The DuPage Federation Ela Township Elgin Human Services Council Fox Valley Community Services Gail Borden Public Library Geneva Township Senior Center Glen Ellyn Senior Center Greater Chicago Food Depository Grundy Co. Senior Provider Group Grundy Co. Health Dept. Hanul Harvard Senior Center Healthcare and Snr Advisory Council (Rep Hass) Illinois Aging Together Illinois Association of Area Agencies on Aging Illinois Coalition on Mental Health and Aging Illinois Cognitive Resource Network Illinois Economic Security Project Illinois Family Caregiver Coalition Illinois SNAP Advocates Illinois State Medicaid Policy Institute on Family Caregiving Illinois State Tax Credit Coalition Kane Co. Health Department Kankakee Co. Health Dept. Kankakee Co. YMCA Kankakee Senior Provider Group Kankakee Mental Health Council</p>	<p>Kendall Co. Senior Provider Group Kendall Co. Health Dept. Kinship Navigator Task Force Lake Co. Health Dept. and Community Health Center Metropolitan Asian Family Servs Metropolitan Mayors Caucus McHenry Co. Dept. of Health McHenry Co. Task Force on Aging Milton Township Northern Illinois Food Bank Open Safe Illinois Coalition Oswego Senior Center Pembroke Township Riverwalk Adult Day Center SAGE Second Baptist Church, Joliet Spanish Community Center Senior Services Associates, Kane, Kendall & McHenry Cos. Senior Services Coalition Lake Co. Senior Services of Will County Senior Advisory Committee (Senator Villa) Senior Advisory Council (Rep Ness) TRIADs United Way of Greater McHenry Co. United Way of Kankakee and Iroquois Co. USAgging Waukegan Township Will Co. Health Dept. Will Grundy Medical Clinic</p>
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Step 2: Evaluate the Existing Service System

Needs Assessment Activities

Methodology & Design

In planning for the Fiscal Year (FY) 2025-2027 Area Plan, AgeGuide completed an extensive Needs Assessment of the community to inform service design and delivery throughout the preceding three-year planning period. AgeGuide took into consideration older adults with low incomes, and those with greatest economic and social need with particular attention to low-income minority older adults and those with limited English proficiency. In addition, AgeGuide prioritized diversity, equity, inclusion, and access (DEIA) to examine the ease at which diverse older adults can access services. To apply this inclusive lens, AgeGuide utilized a template from an award-winning needs assessment model as well as input and guidance from the AgeGuide DEIA Steering Committee and Soar Strategies, our DEIA consultants. The goal was to develop survey and interview instruments to best capture the input of communities of color, non-English speakers, and LGBTQ+ communities. The listening session and survey questions were designed to gain insight on the impact of accessibility of services, healthcare access, and income. Service categories were based on Older Americans Act programs and included:

- Caregiving Support
- Food (Nutrition)
- Housing
- Information
- Social Connectedness
- Transportation

Listening Sessions

In 2023, AgeGuide held 17 community listening sessions, which included over 600 participants, a 130% increase over our previous needs assessment sessions. Overall, AgeGuide spent a total of 26 hours listening to the community. We hosted 4 listening sessions in each of the largest counties, 2 in the next largest, and 1 in smaller counties. We also met with stakeholders both region-wide and in Grundy County. We went into communities to connect with our target audiences - those with the greatest social & economic need. We met at churches, township senior centers, restaurants, and other community sites to reach Limited English-Speakers and people from specific racial and ethnic groups. In addition, AgeGuide held 5 specific listening sessions to capture input from non-English speaking older adults. AgeGuide contracted with Northern Illinois University, Center of Governmental Studies to analyze the data gathered from the listening sessions and surveys. After all the data is compiled, AgeGuide will publish a Community Needs Assessment Findings Report and host a virtual findings presentation on March 6, 2024.

Surveys

AgeGuide also designed and distributed a survey in 2023 to inform the three-year planning process. The survey was specifically constructed to be inclusive and equitable to capture results from our diverse region. The survey was translated into the six most common languages spoken in our region after English. We partnered with diverse community leaders and the Coalition for Limited English-Speaking Elderly (CLESE) to distribute surveys. As a result, over 150 participants completed the translated versions of the survey. Overall, the survey captured input from 1,137 older adult participants, and 76 stakeholders totaling 1,213. This is a 164% increase over the previous needs assessment survey collection.

Participant demographics were as follows:

Survey Respondents Characteristics	
94%	Aged 60+
55%	Live Alone
6%	Veterans
22%	Caregivers
78%	Female
30%	Non-White (12% Asian American, 9% Black, 7% Hispanic/Latino, <1% Native American/Alaska Native, 1% More Than 1 Race)
21%	Speak a Language Other Than English
2%	LGBTQ+

Between the listening sessions and the survey, AgeGuide received over 1,810 responses to the Needs Assessment.

Results

Findings from our community needs assessment indicate that stakeholders, older adults, and caregivers rank healthcare, income, food, and housing as the most important needs. A summary of preliminary findings follows:

Healthcare

More than one-third (35%) of older adults have experienced a challenge in paying for dental or vision care. Stakeholders think one of the biggest challenges related to healthcare for older adults is not being able to pay for medications (66%).

Stakeholders and older adults mention there is a need for assistance with navigating Medicare. Older adults comment that the cost of healthcare is a challenge and that Medicare costs keep going up. Stakeholders state there is a need for dental and vision coverage for older adults. More than one-third (34.6%) of older adults have experienced a challenge in

paying for dental or vision care. 16.4% of older adults have gone without some medication in the last 12 months (8.9%, less than once a month; 4.5% once a month; 1.3% once a week; 1.7% more than once a week).

Income

Almost all (97%) stakeholders think one of the biggest challenges related to income for older adults is not having enough money saved for retirement. Almost half of older adult respondents said they do not have enough money saved for retirement and almost one-third do not have access to retirement planning services or a retirement account.

Many older adults face challenges with debt as 22.5% of older adults have experienced debt repayment challenges.

Food

68.5% of stakeholders believe one of the biggest challenges related to food is the cost. 42.3% of older adults surveyed said they experienced a challenge with the cost of food. Older adult focus group participants also said that the rising cost of food has been a challenge. More than one-half of older adults said they used at least one food assistance program in the last 12 months.

Stakeholders expressed concern that with SNAP funding cuts and the prices in grocery stores “skyrocketing”. Some older adults are not getting enough food. In fact, 10.8% of older adults reported going without food in the last 12 months (5.5%, less than once a month; 2.9%, once a month; 1.3% once a week; 1.1% less than once a week). One-half (49.6%) of older adults reported they usually eat less than three meals a day.

Housing

45% of older adults indicate they have experienced a challenge with housing costs. Most often cited challenges include the high cost of housing including rent, property taxes, lack of affordable housing, accessibility challenges of existing homes, and lack of subsidized housing.

Older adults and stakeholders indicate subsidized housing is insufficient. They say there are long wait lists, and it sometimes takes several years to get subsidized housing. The majority (88.3%) of older adults agree with the statement “I prefer to live in my home for as long as I can.”

Caregiver Support

More than one-half of stakeholders identify financial challenges (57.3%), lack of affordable home care (54.7%), and caregiver stress (50.7%) as the biggest challenges related to caregiving.

In terms of caregiving demographics, 21.7% of older adults report providing unpaid assistance or care to a family member, friend, or someone who has a health condition or disability. 27.1% of older adults receive assistance or care because of a health condition or disability. 40.7% receive care from a relative and 27.1% receive care from a professional caregiver. 68.0% receive care less than 20 hours per week.

Accessibility

Overall, older adult focus group participants are satisfied with the organization providing aging assistance services. The majority (89.6%) of older adults and caregivers agree (61.3%, strongly agree; 28.3% somewhat agree) they are treated fairly and equitably by the organization providing aging assistance services. Stakeholders state that agencies need more diverse staff that look like the clients, speak the language of the clients, and understand the clients' culture.

Information

More than one-half (52.2%) of older adults get information about services and events from family, friends, and neighbors. 38.8% get information from a senior service agency and 36.7% get information from a senior center.

Stakeholders think one of the biggest challenges related to information for older adults is that information is only available online (56.2%). Stakeholders also believe there isn't enough awareness of available services. Older adults report that increasing awareness of the available community services and resources is an extremely important need. They suggest information about services should be distributed in print format since "not everyone is tech savvy."

Social Connectedness

Physical limitations were one of the biggest identified barriers to social connection. 46.8% of those older adults who identify with a physical/mobility impairment have experienced social isolation and lack of connection to others. Stakeholders mention some older adults are "scared to go out" and do not have technology. According to survey responses, the majority of older adults leave their home often or sometimes to do activities asked about in the survey.

Transportation

More than one-half (52.0%) of older adults and caregivers and 41.1% of stakeholders identify car expenses, such as gas and insurance as a challenge. Respondents state that the currently available transportation options are not adequate; not available in all areas, not reliable, not accessible, and there are not enough drivers/vehicles. Many of the older adults report they rely on family members for transportation.

The majority of older adults have never missed a medical appointment (79.7%) or been unable to participate in activities (71.7%) in the last 12 months because of transportation issues.

Stakeholder and older adult focus group participants mention that transportation is a particular need in rural areas. Wheelchair accessible transportation was also cited as a significant need.

Other Challenges

Stakeholders, survey respondents, and focus group participants comment that older adults or caregivers face the following challenges:

- Lack of knowledge on how to use technology
- Mental health awareness/acceptance
- Inability to fill out forms on their own or lack of assistance with forms needed to apply for services

For more detailed findings, please see the full Community Needs Assessment Findings Report at www.ageguide.org under "Publications".

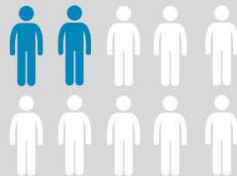
DEMOGRAPHICS OF PSA02

AGEGUIDE'S EIGHT COUNTY REGIONAL POPULATION IS RAPIDLY GROWING

735,864

OLDER ADULTS

25% of the State's
population of older
adults reside in
PSA02



8%

INCREASE

in the population of
older adults in
PSA02 from 2017 to
2022



Within the eight counties:

28 %

of older adults are age 75+ (206,769)

21%

of older adults age 60+ are minorities (160,300)

LIVING ALONE

149,005



20% of older
adults age 60+ are
living alone.

POVERTY

45,731



6% of older adults
age 60+ live at or
below the poverty
line.

Step 3: Determine Availability of Resources to Meet Needs and Alternative Approaches Available to Meet Needs

AgeGuide will continue to perform the following activities to weigh the need and to identify resource availability:

- Continue to seek input from stakeholders (service providers, older adults, older adults with disabilities, family caregivers and relatives raising children, Advisory Council/Board, and other constituents).
- Review alternative approaches to improve the efficacy and effectiveness of OAA service provision and delivery in our service area.
- Determine the appropriateness of a service in helping older adults in greatest economic and social need (i.e., older adults with one or more of the characteristics in the regional funding formula), most at risk of loss of independence, or most in need of protection of their basic rights.
- Gauge the adequacy of funds to support a level of service that addresses the need effectively and at an acceptable cost.
- Assess the ability of other service providers or systems to address unmet needs.

Step 4: Support for State & Local Initiatives

Staff assembled and reviewed the data derived from the FY24 needs assessment process to form the foundation for the FY25-27 Area Plan. Information garnered from Steps 1, 2, and 3 of these activities and from the individual counties was thoughtfully compiled into a regional perspective to arrive at the following area plan initiatives and service priorities.

Statewide Initiatives

Three statewide initiatives will be prioritized for the FY2025-2027 Area Plan period. The initiatives were chosen to be included based on input and feedback received from older adult community members and caregivers, challenges and priorities raised by the Aging network, community stakeholders, and community needs and priorities identified by IDoA. The AAA must provide a detailed planning, delivery, and/or monitoring plan that meets each Statewide Initiative. Additionally, the plans are required to include how the program development and funded service activities will continue to be targeted to those in “greatest economic and social need.”

Initiative #1: Increase statewide visibility of the Aging Network to connect Illinoisans with supports and services that encourage independence, dignity, and quality of life as we age.

The mission of the AAAs as defined by the Older Americans Act is in part to:

“Be the leader relative to all aging issues on behalf of all older persons in the planning and service area. This means that the area agency shall proactively carry out, under the leadership and direction of the State agency, a wide range of functions related to advocacy, planning, coordination, inter-agency linkages, information sharing, brokering, monitoring and evaluation, designed to lead to the development or enhancement of comprehensive and coordinated community-based systems in, or serving, each community in the planning and service area. These systems shall be designed to assist older persons in leading independent, meaningful and dignified lives in their own homes and communities as long as possible.” (45 CFR 1321.53)

To build upon the mission statement, IDoA has selected increasing public visibility as a Statewide Initiative with a focus on raising awareness and sharing information about the availability of aging services and supports. Due to the impacts of the COVID pandemic, as well as the changing ways that individuals and communities consume media and communicate, it has become increasingly difficult to reach the targeted populations that would benefit from OAA- funded programs. A dedicated statewide initiative to increase the visibility of the available programs and services throughout Illinois will increase both the awareness, as well as the utilization of much needed and sought after services.

AgeGuide’s strategy to increase visibility of the Aging Network includes:

1. Begin funding IIIB and IIIE Public Education Services to support grantee efforts to increase visibility of aging services in the community.
2. Expand the reach of AgeGuide’s media presence and outreach to more older adults, caregivers, kinship families and professionals with information about services through digital ad campaigns, newspaper ads, opinion pieces, press releases, social media, newsletters, blog posts, YouTube videos, and monthly podcasts (The Age Guide).
3. Improve access to information at both AgeGuide’s level and at the grantee level through translated program materials and delivery of culturally appropriate, accessible services.

4. Pilot new and innovative ways to interact and connect with people looking for services through digital marketing and technology solutions.
5. Participate in local community-based activities such as fairs, meetings and conduct presentations.
6. Continue funding Targeted Outreach to increase access of Limited English Proficient older adults, caregivers, and kinship families to our aging network services.
7. Host advocacy events, site visits, and legislative aide trainings to help older adults collaborate in aging-related advocacy efforts with federal and state legislators.
8. Host AgeGuide's annual Aging Summit to highlight aging issues, share potential solutions and advocacy strategies.
9. Collect and analyze Information and Assistance data to ensure that we are increasing our reach to target populations.

Initiative #2: Drive continuous quality assurance and improvement activities that emphasize person-centered and trauma informed services while maximizing effectiveness of services delivered through the Aging Network.

As the lead agencies in the state and local areas, it is a duty of the State Agency on Aging (IDoA) and the AAAs to ensure the programs and services provided directly and through the community partner network are delivered utilizing person-centered and trauma informed methods. Over time, Illinois has experienced significant changes in population, including an unprecedented increase in the percentage of older adults in our population. There has also been a significant increase in the number of older adults within racial and ethnic minorities, sexual and gender minorities, and minority religious populations.

Access to accurate, comprehensive, and timely data is vital to make informed decisions about community needs and service prioritization at the local, regional, and state levels. A focus on effectiveness and accuracy of services and programs will ensure maximization of the return on investment for funding and will ensure we are meeting the directives provided through the Older Americans Act and the Administration for Community Living's priorities.

AgeGuide's strategy to drive continuous quality assurance and improvement activities includes:

AgeGuide completes continuous monitoring of service performance. Staff review the performance and spending of grantees quarterly to ensure they are meeting quarterly targets and on track to fully expend their grant funding. AgeGuide reviews service performance, including both program performance, variances and plans to remedy underperformance, as well as fiscal reporting. AgeGuide program, grants and fiscal staff meet to discuss trends in services, underperformance of 20% or more below the performance standard for the quarter, and disparities in spending. AgeGuide identifies follow-up actions, as needed, based on this assessment including meeting with grantees who are 20% or more below the performance standard to collaborate in addressing the issues that caused the underperformance. AgeGuide staff have created comprehensive training materials and resources for grantees to support their work to ensure accurate reporting and appropriate service delivery. AgeGuide staff work with grantees to ensure client demographics and program performance are entered into the AgingIS database. AgeGuide collects demographics each year on all services to ensure we are serving at least the incidence rate of the target populations as required by our grant agreements. Grantees who consistently do not meet their performance measures are placed on conditional status and receive more intensive support from AgeGuide to rectify conditions assigned to their grant renewal. AgeGuide conducts an on-site program and fiscal monitoring every three years as

required by the IDOA's 500 Standards. Review of audit reports are completed on an annual basis by AgeGuide staff to ensure sound fiscal practices.

Initiative #3: Increase public awareness and knowledge of caregiver needs, as well as resources and services available throughout the state of Illinois to promote increased caregiver engagement in person-centered, trauma informed, and evidence-based programs and services.

Throughout 2023, IDoA partnered with the AAA network to facilitate twenty in-person Caregiver Roundtables across the state of Illinois, along with three virtual roundtables to hear from informal family caregivers about the needs and challenges they face, both met and unmet, and explore additional support that can enhance the caregiving journey.

Conversations so far have both articulated the need for these services and the need to increase visibility for these resources. Across sessions, attendees discussed caregiving from a holistic lens cutting across systems including healthcare, transportation, community supportive services, and individual (both caregiver and care receiver) needs, values, and preferences.

Training and education across the domains that fall in the scope of caregiving are also needed for family caregivers and paid caregivers, including better understanding of chronic and terminal diseases, navigating healthcare systems including palliative care and hospice, physical caregiving (how to lift, transfer, bathe, groom, etc.), available caregiver resources, available resources for older adults, and caring for the caregiver.

In FY25-FY27, AgeGuide will utilize this Statewide Initiative as its Local Initiative, as allowed by the IDoA. This initiative supports AgeGuide's caregiver outreach in follow-up to our local initiative for FY22-FY24.

AgeGuide's strategy to increase public awareness of caregiver services and supports includes:

1. AgeGuide will begin funding IIIE Public Education services to increase public awareness of services and engage new caregivers and Grandparents Raising Grandchildren (GRG) clients.
2. AgeGuide and our grantees will increase awareness of services to Kinship Families through service on the Kinship Navigator Steering Committee, attendance of the Kinship Navigator Task Force, and increased connection with local child/family serving organizations.

3. AgeGuide will continue participating in the IL Caregiver Coalition to develop comprehensive advocacy and awareness of caregiver services across the state.
4. AgeGuide will continue to host its annual Caregiver Seminar in November to educate the public on topics surrounding caregivers and kinship families.
5. Promote the regionwide availability of Tailored Care (TCare) which is an evidenced-based assessment tool that pinpoints a caregiver's unique areas of stress and develops targeted interventions for the caregiver.

AgeGuide's Service Priorities

These are the services that AgeGuide provides or funds for older adults and their caregivers in the PSA, from the many services that are allowed under the funding provisions of the Older Americans Act. The following list does not indicate the relative importance of one service over another, but rather service priorities designed to address the issues of aging holistically.

Title III-B Supportive Services

Aging and Disability Resource Network Access Package

- **Information & Assistance (I&A):** Provides individuals with current information on long term services and support and connects people with resources that can help them such as accessing transportation, benefits, utility assistance, homemaker services etc.
- **Public Education:** A service for older adults that provides the public and individuals with information on resources and services available to the individuals within their communities.
- **Options Counseling:** Person centered, interactive, decision support process to make informed choices about long-term services and supports.
- **Flexible Community Services:** Financial assistance for the purchase of various services such as medical care and supplies, environmental and material aids-such as rent/mortgage, food, minor home modifications, and community access services such as transportation, not otherwise covered by insurance or other programming. FCS services are available for people aged 60+ or persons 18-59 with a disability.

Other Supportive Services

- **Targeted Outreach:** Outreach focusing on minority and Limited English Proficient older adults and caregivers to facilitate the use of existing services and benefits.

- **Legal Services:** Includes arranging for and providing assistance in resolving civil legal matters, protecting legal rights, providing legal advice, community legal education and research concerning legal rights and responsibilities by an attorney at law or a person under the supervision of an attorney.
- **Transportation:** Assistance with scheduling and providing door to door, curb to curb, fixed and/or unfixed route transportation service including volunteer transportation.
- **Friendly Visiting:** Regular in person, virtual visits and/or phone calls by volunteers to socially isolated older adults to provide companionship and social contact with the community.

Community Connection Collaboratives: An intentional bundling of three services designed to support older adults in gaining or maintaining their health while fostering social connections.

- **Education:** Group-oriented lectures, classes, or workshops provide individuals with opportunities to acquire knowledge and skills suited to their interest and capabilities.
- **Health Screening:** Assist individuals in identifying, detecting, and evaluating their health needs or potential needs.
- **Recreation:** Group activities which foster the health and social well-being of individuals.

Title III-C Nutrition Programs

- **Congregate Meals (C-1):** Meal served to an older person, in a center or at a restaurant, strategically located to maximize access by older persons within a community and to promote socialization among older persons. **Grab and Go options** are also available for older adults who are not able to stay for the meal.
- **Home Delivered Meals (C-2):** Meal served to older persons who are homebound due to physical or mental impairment and unable to adequately provide their own meals.
- **Emergency Shelf-Stable Meals:** Meals provided to congregate, and home delivered meal participants to ensure that each participant has a minimum of five days of shelf-stable meals in the event of emergencies, weather-related conditions, etc.
- **Food Box Option:** AgeGuide began a pilot bi-monthly grocery delivery program in March of 2024. The program targets Lake County home-bound clients who can cook culturally appropriate meals for themselves. The program has proven extremely popular and addresses the need for food choice and flexibility.

Title III-D Health Promotions Programs

- **Health Promotions Programs:** Evidence-based programs are multi-week, education-based workshops that promote better health and wellness among older people. Strategies employed within these programs build life skills emphasizing self-care and management. These programs also promote

socialization, reduce isolation through group classes and exercise activities. Only programs that are accepted as highest-tiered evidence-based programs by any operating division of the U.S. Department of Health and Human Services (HHS) can be considered under Title III-D. This includes programs listed on ACL's Aging and Disability Evidence-Based Programs and Practices.

Title III-E Family Caregiver Support Program Services

The National Family Caregiver Support Program serves family and friends who care for persons aged 60 and over or people with Alzheimer's disease at any age. The program also supports grandparents and other non-parent relatives over 55 who are caring for children under 19 or adults 19-59 years old with a disability.

Caregiver Resource Center Services (CRC)

- **Public Education:** A service for caregivers that provides the public and individuals with information on resources and services available to the individuals within their communities.
- **Case Management/Assistance:** Provides Tailored Caregiver Assessment and Referral (TCARE) assessments for caregivers to develop a care plan and determine if Respite and/or Gap-Filling services might be needed. Also, helps caregivers obtain access to other services and resources available in their communities.
- **Respite:** Provides temporary, substitute supports or living arrangements for care receivers to provide a brief period of relief or rest for primary caregivers.
- **Gap-Filling:** Provides flexible funding and includes emergency response services and items not covered by insurance nor paid by any other means.

Caregiver Counseling Center Services (CCC)

- **Counseling:** Provides advice, guidance, and life coaching to an individual caregiver or relative raising children. Counseling assists with role identity, permission to seek help, decision-making and solving problems relating to their caregiving roles.
- **Caregiver Training:** Provides education to caregivers either individually or in a group. Caregiver training is designed to inform caregivers about self-care skills and/or to instruct them in skills to care for the care receiver.
- **Support Groups:** Provides for the organization of one or more group settings to provide advice, guidance, and support to caregivers on an ongoing basis.

Alzheimer's Disease and Related Dementias (ADRD) Services

- **ADRD Supportive Gap:** Financial assistance for persons of any age with dementia (diagnosed or undiagnosed), and/or their caregivers, for services and supports such as respite, assistive technology, home modifications, and other eligible services.

2023 TAILORED CARE SUPPORT

BY THE NUMBERS

CAREGIVER ACTIVITY IN ALL 8 COUNTIES

2,703 TOTAL ASSESSMENTS

1,898
CASES
CREATED

496
FOLLOW
UPS

1,060
CARE
PLANS

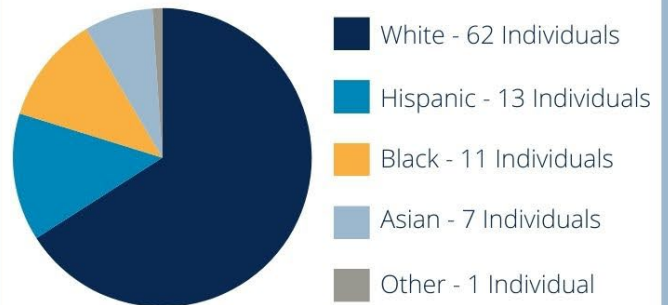
DEMOGRAPHICS FOR ALL 8 COUNTIES

Caregiver by Race



Caregiver Employment by Race

94 Caregivers Working Full Time



Caregiver by Gender

F E M A L E

75% - 1,232 Individuals



M A L E

25% - 404 Individuals



OUTCOMES FROM THE TCARE PROGRAM

Stress Burden

Negative state of mind from the caregiving situation



LOWERED
13%

192 Individuals

MAINTAINED

81% 1,156 Individuals

Depression

Conditions associated with the elevation or lowering of a person's mood



LOWERED
14%

194 Individuals

MAINTAINED

80% 1,140 Individuals

Uplifts

Positive outcomes that the caregiver gets after care plan



ELEVATED
8%

113 Individuals

MAINTAINED

80% 1,150 Individuals

Title III-B and Title VII Elder Rights Services

- **Long Term Care Ombudsman:** Resident-directed advocacy program which protects and improves the quality of life for Long-term Care facility residents by working to resolve problems related to the health, safety, welfare, and rights of individuals.
- **Adult Protective Services (APS):** Provides investigation, intervention, and follow-up services to victims of alleged abuse, neglect, or financial exploitation of persons 60 years of age and older and persons 18–59 years of age with a disability. Title VII funding supports APS programs through funding for Fatality Review Teams, Multidisciplinary Teams and staff training needs.

Projected Units & Persons		
Service Definition	FY25 Projected Persons	FY25 Projected Units
Title III-B Access Services		
Options Counseling	955	2290
Information and Assistance	47180	84876
Outreach	370	370
Transportation	2045	25775
Public Education	6200	62
Title III-B In Home Services		
Friendly Visiting	457	14400
Title III-B Community Services		
Education	1771	17320
Health Screening	1345	3690
Recreation	1800	9043
Legal Assistance	1354	8965
Flexible Community Services	320	320
Title III-B/Title VII Ombudsman		
Ombudsman	33309	33309
Title VII Elder Abuse Community Services		
Elder Abuse	N/A	N/A
Title C-1 Community Services		
Congregate Meals	8300	133500
Title C-2 In Home Services		
Home Delivered Meals	8600	1,150,000
Title III-D Health Promotions		
Health Promotions Programs	305	3940
Title III-E Assistance Services		
Case Management	12896	20370
Information and Assistance	875	875
Public Education	2400	24
Title III-E Counseling/Training/Education		
Counseling	824	2340
Support Groups	320	1003
Training and Education	642	1716
Title III-E Respite		
Respite	788	20010
Title III-E Supplemental Services		
Gap Filling	787	787
ARD Supportive Gap Filling	105	105

AgeGuide Direct Services and Waiver Justification

AgeGuide proposes to continue its provision of Title III-B/E Information & Assistance, Title III-B Education and Title III-D Health Promotion & Disease Prevention and requests Direct Service Waivers to directly provide these services in FY25-27.

Title III-B/ Title III-E Information & Assistance

AgeGuide provides a variety of region-wide Information & Assistance activities to help older adults, family caregivers, persons with disabilities, and kinship families connect with local services and resources. AgeGuide and its network serves as a visible, accessible, consumer-focused, integrated access point where individuals of all ages, incomes, and disabilities can receive information and assistance, assessment of needs, options counseling, referral assistance in completing benefits applications, and follow-up to ensure that referrals and services are accessed.

AgeGuide intends to continue to perform the following activities:

- Maintain a staff person who is a certified Aging and Disabilities Community Resource Specialist (CRS A/D).
- Assist individuals requesting information and resources through phone calls, email, chat and in-person assistance.
- Connect individuals through warm transfers to AgeGuide's network of funded partners when more in-depth assistance is needed and offer additional resources as necessary.
- Assist with applications for IDoA's Benefit Access program and provide objective insurance counseling and assistance to Medicare-eligible individuals, their families, and caregivers through the Senior Health Insurance Program (SHIP).
- Respond to inquiries from family caregivers and kinship relatives requesting training, education, and supportive services.
- Utilize a client software system, iCarol, to collect and maintain information on client demographics and needs to support reporting, quality assurance, and needs assessment activities.
- Maintain an information and assistance resource directory in iCarol which supports the public Illinois Aging Services resource website (<https://www.agingis.com/csdpublic/>).
- Provide updated information on services and resources through AgeGuide's website (www.ageguide.org), its monthly e-newsletter, The Aging Report, its AgeGuide Listserv, podcast (The Age Guide), and social media platforms.
- Attend vendor fairs to promote information about home and community-based services available through our regional Aging Network.

- Produce region-wide resource materials in multiple languages and accessible formats promoting Aging Network services for distribution across the eight-county region at senior centers, hospitals, faith-based organizations, libraries, etc.

AgeGuide Direct Service Waiver Justification:

At the county level, AgeGuide funds eight Aging and Disability Resource Network Information & Assistance (I&A), Outreach and Options Counseling partners and eight Caregiver Resource Center Access Assistance partners. However, AgeGuide determined that it should provide Information & Assistance directly as organizations, businesses, and government entities consider Agencies on Aging the most efficient and manageable place to start. AgeGuide has also demonstrated that it is effective in meeting the needs of caregivers through its delivery of caregiver information and its representation of the regional caregiver partner network. AgeGuide's 800 number and website continue to be an effective means of access in our area for statewide and federal initiatives. The Elder Care Locator (USAging) and the IDoA Helpline direct callers seeking information to AgeGuide. Many of these calls are then connected to the ADRN partners and Caregiver partners as they continue to be the primary entities for coordination of services and resources to support older adults, caregivers, and kinship families in their communities. This creates "no wrong door" access to long-term support service information and assistance for older adults, their families, and persons with disabilities with a special emphasis on caregivers and kinship families. AgeGuide continues to be in an essential position to provide Information & Assistance services as it is a well-known and respected organization whose only interest is to represent the aging network across all eight counties. AgeGuide can offer regional information, as well as information about services provided in the other PSAs.

Projected number of persons: 4,235; Projected units: 4,375

AgeGuide is seeking continued approval for FY2025-2027 and is requesting \$225,000, shared among Title III-B and III-E funds to support region-wide Information & Assistance activities.

Title III-B Education Service – Tech and Education

According to Karina Alibhai, a Social Connectedness Fellow, and the Samuel Centre for Connectedness in British Columbia, the use of technology by older adults has immense potential to support older adults in living and aging well by addressing their physical, mental, and social challenges. Moreover, a 2016 study identified eight different technologies that have been applied to ease social isolation. Social management systems, peer support chat

rooms, and social network sites were included in the list of technologies being successful in reducing social isolation among older adults.

In FY20, AgeGuide piloted programming in Grundy County, funded by AgeGuide with Social Isolation General Revenue Funds, that produced positive effects on reducing social isolation through technology use. T-Mobile and the Morris Public Library collaborated to provide free tablets to socially isolated older adults who agreed to attend 3 tutorial classes provided by the library staff so they can use the technology to interact and connect with their family, friends, and other community resources to reduce their social isolation and loneliness. In FY21, AgeGuide expanded this program regionwide. In response to the COVID-19 pandemic, the three tutorial sessions were presented virtually. In FY25, this program will continue to be delivered virtually combined with in-person tablet delivery. A warm handoff provides an opportunity for orientation and instruction from a trusted community organization which acclimates the participant to the technology. The tutoring organization will provide one-on-one sessions and are available in multiple languages.

The Impact of the Services:

Through FY22-FY24, AgeGuide has demonstrated the ability to reach marginalized communities, locate those with limited accessibility, availability and/or affordability of internet services, and those with limited digital experience or skills. Specifically, through the Tablets to Seniors program, written testimonials revealed participants have gained connections to their friends, family, community, and health care providers. They have nurtured continued learning, developed hobbies and interests, and pursued idle curiosities. Working alongside trusted community partners has been the cornerstone of the program whether these organizations conducted the tutoring or connected the participants to the virtual tutoring organization. These participants would not have been identified by AgeGuide's current network as very few have been sought out or have been connected to aging services prior. Through this program, they have gained healthy aging resources, developed digital skills, confidence, and knowledge, and decreased the risk of social isolation.

Participants will have multiple ways to engage in training on how to use their tablets including intergenerational or "teen tutors", assistance from their local library's "Device Advice" technology education programming, and through the virtual technology coaching provider for a specified timeframe. The AgeGuide Welcome packet contains the AgeGuide designed handout that includes screenshots of their device as a reference on tablet basics and getting started on Google, email (Gmail), social media, internet safety and more. Also included are the county resource guides and the State of Illinois Social Isolation Questionnaire.

Projected Number of Persons: 60; Projected Number of Units: 210

AgeGuide is seeking continued approval for FY2025-2027 and is requesting \$25,000 for III-B Tech and Education activities.

Title III-D Health Promotion Service:

AgeGuide proposes to continue to provide Title III-D direct service as it is a unique position to provide Title III-D Health Promotion activities more efficiently through its regional coordination and its active participation in statewide health aging collaborations. Providing and delivering evidence-based programs region-wide requires support for the training, program costs, and licensing fees. AgeGuide intends to continue to perform the following activities:

- Facilitate program coordination, supplying program materials in bulk, and distributing program resources for overall partner operations.
- Hold program licensing for Bingocize, Chronic Disease Self-Management Program (CDSMP), Diabetes Self-Management Program (DSMP), Tomando Control de su Salud (Spanish CDSMP), A Matter of Balance, Fit & Strong, Stress-Busting for Family Caregivers of Persons with Dementia (English and Spanish versions), National Diabetes Prevention Program and Stress-Busting for Family Caregivers of Persons with Chronic Illnesses.
- Retain Master trained staff in A Matter of Balance and Stress-Busting for Family Caregivers.
- Recruit and train additional leaders through grantees and professional partnerships.
- Monitor program fidelity to maintain program adherence ensuring quality assurance for all participants.
- Participate in statewide healthy aging initiatives and collaborations, the Illinois Falls Prevention Coalition, and Illinois Pathways to Health ACL grant.

AgeGuide Direct Service Waiver Justification:

Provision of these activities by AgeGuide is necessary to assure an adequate, equitable supply of health promotion programs across the region and to target these limited resources to better serve high risk populations.

To leverage the impact of available funding and reach the most participants, providers may operate these programs and receive training support under AgeGuide's licensing agreements. AgeGuide will focus heavily on recruiting and training additional leaders through our relationships with grantees and professional partnerships. AgeGuide will continue to assist our Title III-D funded providers in facilitating programs, providing support to all leaders in the areas of program fidelity, recruiting and retaining leaders, tracking, and preparing workshops, and completion of all required reports to retain licensure. AgeGuide will continue

to assist its funded providers in outreach and marketing of their Title III-D programs to overcome barriers in recruiting participants to their programs.

Projected number of persons: 45; Projected units: 300

AgeGuide is seeking continued approval for FY2025-2027 and is requesting \$60,000 for III-D Health Promotion Program Activities.

Step 5: Modification and Refinement

AgeGuide recognizes the need to both preserve and enhance effective programs and services funded today, and to look ahead to how its service design can evolve to be of the greatest benefit to its communities in the future. If there is a need for modification and/or refinement to a service, AgeGuide will take the following steps:

- Identify any modification or refinement by the applicable fiscal year and date submitted.
- Describe what intervention caused the AAA to change its Area Plan.
- Identify the modifications to the Area Plan because of the intervention.

In FY25, AgeGuide is proposing the following changes to its service design. These changes are informed by AgeGuide's Needs Assessment, IDOA's Caregiver Needs Assessment, and the Statewide Initiatives established by IDOA. These changes included:

1. Discontinuation of Title III-B Outreach to fund Title III-B Public Education.
2. Integrate Title III-B Telephone Reassurance activities into Title III-B Friendly Visiting.
3. Discontinuation Title III-B Counseling.
4. Modifications to Title III-B Service Shares, including increases for Title III-B Friendly Visiting, III-B Legal, and III-B Community Connection Collaboratives.
5. Baseline allocation for all Title III-D providers and utilization of the county funding formula to allocate the remaining funds.
6. Discontinuation of AgeGuide direct service Title III-E Music and Memory and Sing Along programs.
7. Discontinuation of Title III-E Alzheimer's Disease and Related Dementia funding for Stressbusters for Family Caregivers Programs.
8. Decrease Title III-E Alzheimer's Disease and Related Dementia funding for Supportive Gap services.
9. Adjust the Title III-E Caregiver Resource Center Service Share to increase III-E Assistance and decrease III-E Respite.

10. Adjust the Title III-E Caregiver Counseling Center Service Share to increase funding for III-E Training and Education and decrease III-E Support Groups.

Additional Services for Older Adults

AgeGuide receives funds outside of traditional Older Americans Act programs and these responsibilities fall into two categories: 1) Additional Services for Older Adults and 2) Special Projects – Public/Private Collaborations.

Adult Protective Services

AgeGuide is the Regional Administering Agency (RAA) for the IL Adult Protective Services (APS) program in PSA 02 under an Illinois Department on Aging (IDoA) grant. AgeGuide supports five Adult Protective Service Provider Agencies (APSPAs) who investigate reports of alleged abuse, neglect, exploitation, and self-neglect for adults 60+ and persons with disabilities ages 18-59. AgeGuide assists IDOA with quality assurance and compliance activities and support programs by providing technical assistance to program staff. Staff participate in the Illinois Adult Protective Services Advisory Council. APSPAs are paid directly by IDoA to conduct investigations and/or case management. AgeGuide funds APSPAs for Multi-Disciplinary Teams (M-Teams) activities, Fatality Review Teams, and training through Title VII funds. In FY25, AgeGuide anticipates \$61,503 in funding under this grant to perform the RAA activities.

Employment Programs

AgeGuide receives State Senior Employment Specialist Program (SESP) funding to assist seniors 55 and older with job referrals and coordination with National Able Network, State Employment Offices, and Workforce Boards. The Senior Community Service Employment (SCSEP) is a community service and work-based job training program for adults 55 and older. The program provides training for low-income, unemployed older adults. Eligible participants also have access to employment assistance through American Job Centers. This program can be used as a supplement to Social Security income or as an opportunity for socialization. In FY25, AgeGuide anticipates \$21,069 in funding.

Illinois Senior Farmers' Market Nutrition Program

The USDA Senior Farmers' Market Nutrition Program (SFMNP) awards grants to provide low-income seniors with \$50 worth of vouchers that can be exchanged for eligible foods at participating farmers' markets and roadside stands. Eligible older adults are 60+ years old with household incomes of no more than 185% of the Federal poverty income guidelines. AgeGuide has administered the SFMNP in Kankakee, Kendall, Lake, and McHenry Counties with the help of Catholic Charities Archdiocese of Joliet (Kankakee County), Oswego Senior Center, Kendall County Health Department, Senior Services Associates (Kendall County), Catholic Charities Archdiocese of Chicago, Avon Township, Fremont Township, Waukegan

Township (Lake County), Senior Services Associates and Harvard Senior Center (McHenry County). The purpose of SFMNP is to:

1. Promote the routine consumption of fruits and vegetables as a part of the daily diet.
2. Provide low-income older adults with access to locally grown fruits, vegetables, honey, and herbs.
3. Increase the domestic consumption of agricultural commodities through farmers' markets, roadside stands, and community supported agricultural programs.
4. Aid in the development of new and additional farmers markets, roadside stands, and community support agricultural programs.

The SFMNP and AgeGuide will work with senior network providers to distribute coupons to eligible older adults in Kankakee, Kendall, Lake, and McHenry Counties. Organizations collaborating with AgeGuide to distribute SFMNP coupons will receive a portion of \$1,000 to offset the cost of distributing coupons and manage reporting.

Medicare Assistance Activities

Medicare increasingly relies on the Senior Health Insurance Program (SHIP) and in Illinois, that is the Senior Health Assistance Program (SHAP), which funds local Medicare assistance efforts statewide.

SHIP uses a small professional staff and a large corps of highly trained volunteers to provide objective local assistance to Medicare enrollees and people approaching Medicare eligibility. SHIP staff help navigate Medicare enrollment, cost and benefit explanation, and the availability of financial assistance programs for low-income participants; along with many other questions related to Medicare and Medicaid. Funds provided by the Medicare Improvement for Patients and Providers Act (MIPPA) supplement SHAP funds and concentrate primarily on benefits for low-income Medicare enrollees.

Medicare enrollees and people approaching Medicare eligibility often need assistance on when and how to enroll; the choices they have for Part D drug plans, Medicare Advantage plans, and supplemental policies; the costs and benefits of various parts of Medicare; the availability of financial assistance for low-income participants; Medicare's relationship to other forms of health insurance; and sources of information and assistance about Medicare. All the Aging and Disability Resource Network (ADRN) providers in the eight counties of this region are both SHIP and SHAP/MIPPA sites. Funding for these activities varies from year to year.

Benefits Access Applications

AgeGuide and its Aging and Disability Resource Network (ADRN) grantees receive funding to assist older adults and persons with disabilities in completing Benefit Access Applications (BAA) through the Illinois Department on Aging. Benefit Access Applications are submitted to the Illinois Department on Aging for license plate discounts and Ride Free transit cards. AgeGuide and the ADRN grantees completed a total of 419 applications in State fiscal year 2023. The Illinois Department on Aging grants AgeGuide approximately \$87,100 for this grant based on a \$25/application rate. AgeGuide and the ADRN grantees received payment based on applications submitted until the grant is exhausted. AgeGuide and ADRN Grantees are required to be a SHAP site to receive this funding.

Senior Medicare Patrol (SMP)

With the leadership of a SMP coordinator and the support of the State Grantee, volunteers with the Senior Medicare Patrol (SMP) are working to ensure fewer people become victims of healthcare fraud. SMP is an ACL federal initiative that recruits and trains volunteers to help people recognize and report healthcare billing errors and potential fraud. The main message is to *“Protect, Detect, and Report”* Medicare and Healthcare fraud.

The Illinois SMP Program is administered by AgeOptions. AgeGuide has a direct service grant to partner in the delivery of the program in the counties we serve. These activities include training and hosting volunteers to provide outreach and education in our community, including presenting to groups, hosting exhibits at community events and senior fairs. In FY25, AgeGuide anticipates receiving \$20,000 in funding to perform the above activities. In FY24, AgeGuide received an SMP Special Project grant in the amount of \$7095 to run a digital marketing campaign in Spanish to increase awareness of SMP. AgeGuide plans to apply for the SMP Special Project funding in FY25.

Grandparents and Other Relatives Raising Children Program (Under 55 State Grant)

According to the Illinois Department on Aging, there are 211,919 children in Illinois under 18 living in a grandparent-headed household. One main reason for the increase in kinship families is substance abuse and alcoholism that has created a need for grandparents to step in and parent their grandchildren. Grandparents raising grandchildren over the age of 55 are eligible to receive OAA funded services. Unfortunately, those relatives under the age of 55 are not funded through the OAA services. Therefore, there are very few resources to assist them. In FY24, AgeGuide will continue to assist younger grandparents with financial assistance. If awarded funding in FY25, AgeGuide plans to continue our supportive efforts to this specific population in order to provide safe, stable, and loving homes for children being raised by grandchildren. Services such as counseling, legal assistance, respite, and gap-filling will be provided to Grandparents Raising Grandchildren under the age of 55 through this program. It is unknown at the writing of this document how much funding will be available. In FY24,

AgeGuide was initially awarded \$13,000 and an additional \$60,000 when a second round of the grant was made available.

Dementia Friendly Illinois

In FY24, AgeGuide received a Dementia Friendly Illinois grant from the Illinois Department on Aging. This funding replaces the previous Systems Development Grant funding and focuses solely on establishing Dementia Friendly Communities in our Planning and Service Area. AgeGuide supports this initiative through supporting local municipalities in becoming Dementia Friendly and offering online training for individuals and businesses to understand dementia and how to support persons when encountering them in various community sectors such as in public transportation, healthcare settings, restaurants, retail locations, etc. AgeGuide anticipates applying for this funding again in FY25 in the amount of \$30,000.

Special Projects – Public/Private Collaboration

Illinois Veterans Directed Care

The Veterans Directed Care (VDC) program in Illinois was created following the 2009 initiative to enable Veterans Administration Medical Centers (VAMCs) to provide home and community-based support services through the Veterans Directed Home & Community Based Service Program (VDHCBS), now nationally known as the Veterans Direct Care Program.

The program aims to provide eligible Veterans at risk of nursing home placement with the least costly and most beneficial services to meet their healthcare needs. VDC is a consumer-directed program that allows Veterans to develop a person-centered service plan that best fits their unique care needs and allows them to remain living in their homes and communities. AgeGuide's role is to provide Options Counseling/Case Management services and person-centered guidance in support to the Veterans for the VAMC (VA Medical Centers). AgeGuide works with the VDC Program Directors at the VAMC to provide tailored services and programs to meet Veterans' healthcare and social care needs.

Currently, Capt. James T. Lovell FQHC actively refers Veterans to the VDC program. Jesse Brown VAMC service area includes Veterans living in Northwest Indiana. AgeGuide partnered with the Northwest Indiana Community Action Agency (NWI-CAA) under a Hub and Spoke model to provide Options Counseling/Case Management services and person-centered guidance for Northwest Indiana Veterans. AgeGuide provides training, oversight, and administrative management, while the NWI-CAA delivers Options Counseling/Case Management for Veterans.

Quality of Life: In FY23, the program satisfaction survey responses showed that 95% of Veterans expressed satisfaction with the program overall. 100% reported that the program improved the quality of life of their primary caregivers. 100% of Veterans enrolled in the program said that VDC helps them remain safely in their home, and the services offered by VDC help the Veteran become more independent. Of the Veterans surveyed, 90% agree that VDC services prevented them from being admitted to a nursing facility.

Caregiver Seminar

During the FY22-FY24 Area Plan Cycle, AgeGuide began conducting annual Caregiver Seminars in celebration and to promote awareness of National Caregiver Month during November. Topics included “Moving Caregivers from ‘I Give Up’ to ‘I Got This,’ *The Caring Economy: Supporting Your Employees Who Care for Family*, in 2023, and in 2024, “*Kinship Care Supporting Kinship Families Through Collaboration*,” highlighting the resources available for kinship caregivers.

Based on the success of the Caregiver Seminars, AgeGuide will continue to host an annual Caregiver Seminar each fiscal year to assist with raising awareness for family caregiver support. Our goal for these seminars is to reach caregivers and professionals supporting caregivers to inform them of available services and supports.

Aging Summit

Our vision at AgeGuide is to enhance the quality of life for people on their aging journey. We do this by changing society’s narratives around aging. Narratives of dependency, loss, loneliness, and isolation must give way to the new realities of this active, engaged, connected, and vibrant lifetime as the average life expectancy rises to unprecedented heights. For the first time in history, people 65 and older outnumber children under 5. As a result, more generations of a family now live simultaneously than ever before. The impact of these population shifts ripples across every facet of society, especially in our healthcare systems, government, and economy.

In August 2024, AgeGuide will host its third Aging Summit, creating space for meaningful conversations around advancing economic resilience across the lifespan. The Aging Summit will be held at Northern Illinois University Naperville Campus on August 21, 2024, from 8:00 am to 3:30 pm. AgeGuide will bring together aging adults, caregivers, professionals, thought leaders, and community stakeholders who understand they have a vital stake in shaping the aging journey.

FY25 RESOURCES & FUNDING PRACTICES

AgeGuide Resources

Anticipated Older Americans Act, State General Revenue and Other Federal Funds

By authorization of the Older Americans Act (OAA), the Illinois Department on Aging (IDoA) provides funds to AgeGuide Northeastern Illinois from the Administration on Community Living (ACL), in the U.S. Department of Health & Human Services. These funds are to be used in the eight-county planning and service area that includes DuPage, Grundy, Kane, Kankakee, Kendall, Lake, McHenry, and Will Counties for the purposes described below:

Federal Older Americans Act Resources

Title III-B: Administration and Social Services, including IDoA determined set-aside for Ombudsman

Title III-C1: Administration and Congregate (Community Dining) Meals

Title III-C2: Administration and Home Delivered Meals

Title III-D: Evidence-Based Health Promotion and Disease Prevention

Title III-E: Administration and National Family Caregiver Support Program

Title VII: Administration and Adult Protective Services and Ombudsman Training and Support

Illinois State General Revenue Funds

- **Title III Match:** Administration and Home Delivered Meals, Information & Assistance, Friendly Visiting, or other Area Plan Services.
- **Home Delivered Meals:** Mandated IDoA-determined set-aside for Home Delivered Meals
- **Community-Based Services:** Information & Assistance, Transportation, or other community-based services, including special set-asides for state initiatives.
- **Caregiver Support Services:** Caregiver services including Assistance including Tailored Care (TCARE), Gap, Respite, Training & Education, Counseling, and Support Groups.
- **Ombudsman Services:** Mandated IDoA-determined set-aside for Ombudsman services.
- **Long Term Care Ombudsman:** Resolve problems related to the health, safety, welfare, and rights of individuals who live in Long-Term Care facilities.
- **Senior Health Assistance Program (SHAP):** Support and counseling for Medicare beneficiaries to enroll in Part D and other benefits.

- **Adult Protective Services (APS) Program Regional Administration Agency (RAA):** AgeGuide performs regional administrative agency responsibilities to support the Adult Protective Services
- **Senior Employment Specialist Program:** Advocacy and Active Referrals to Senior Community Service Employment Program (SCSEP) grantees in our planning and service area.
- **Illinois Grandparents and Other Relatives Raising Children (GRG):** Provides counseling, legal assistance, respite, and gap-filling services to grandparents and other relatives to support grandchildren and to provide safe, stable, and loving homes.

Other Federal Resources

- **Nutrition Services Incentive Program Funds:** Support for Congregate and Home Delivered Meals based on prior year count of meals served.
- **Medicare Improvements for Patients & Providers (MIPPA):** Outreach and assistance to Medicare beneficiaries to apply for benefit programs.
- **Senior Health Insurance Program (SHIP):** Health insurance counseling service for Medicare beneficiaries and their caregivers.
- **Senior Medicare Patrol (SMP):** Prevent, detect, and report Medicare and Medicaid fraud, waste, and abuse.

Federal & State Resources and Policy Implications

Federal and State resources affect public policies, which in turn affect the services that are available to address the needs of the community. The rapidly growing and diverse aging population create an increased demand for services provided under the Older Americans Act and the federal entitlement programs of Medicare, Medicaid, and Social Security. Planning for and serving our aging population is an investment in the well-being of all Americans because our services benefit people of all ages and abilities.

Current Budget for FY24

Source: USAging [USAging's appropriations chart](#).

At the time of publication of this report, Congress has not yet passed a budget for FY24. We are currently operating under a Continuing Resolution (CR). Current funding is continuing from the FY23 budget as follows.

Key Older Americans Act (OAA) funding levels from FY23:

- \$410 million for **Home & Community-Based Supportive Services**.
- \$1.1 billion for **Nutrition Services**.
- \$205 million for the **National Family Caregiver Support Program**.
- \$26.2 million for **Evidence-Based Health Promotion and Disease Prevention**.
- \$26.6 million for **Long-Term Care Ombudsman Program**.

Proposed Federal Budget for FY24

This is the budget that is currently proposed but not yet passed for the current fiscal year.

- Level funding of \$205 million for **OAA Title III-E National Family Caregiver Support Program**, \$5 million less than the Senate's level
- Level funding for **OAA Title III-C Nutrition Services**, \$48 million more than the President and Senate proposals.
- Level funding of \$26.3 million for **OAA Title III-D Evidence-Based Health Promotion and Disease Prevention**, the same as the Senate proposal.
- Level funding of \$26.6 million for **OAA Title VII Long-Term Care Ombudsman Program**, the same as the Senate proposal.

Impact of Federal Relief Funds Ending

From 2022-2024 AgeGuide received additional funding (\$10M) through Federal relief dollars from the American Rescue Plan Act (ARPA). These funds allowed us to invest in special projects, innovations, outcome data enhancements, and other much-needed service expansions to meet the needs of the growing aging population in our region. However, this funding will be ending in FY25. Without new investments from the state and Federal levels, we cannot maintain the level of service we have been providing.

When ARPA funds were initially allocated, Area Agencies on Aging and our funded partners were understandably concerned about the temporary nature of these funds and the risk of increasing the level of service for a limited time. However, we were promised that by investing these resources and showing impact and value we could expect permanent support for aging services after funding ran out. This would result in finally reversing the tide of the decade-long history of disinvestment. Trusting this guidance, AgeGuide and its funded partners hired needed staff, expanded services, and extended outreach to serve more older adults. We have expanded services to target populations including those older adults who live alone, are at or below the poverty level, are 75 years of age or older, speaking limited-English, and are minorities. If funding isn't maintained at current ARPA levels, older adults across our region and the state who have come to rely on Older Americans Act services will go unserved.

For over a decade, annual investments in federal aging services programs have not only failed to keep pace with the growth in the number and diversity of older Americans, but also suffered from indiscriminate cuts. Currently, Congress is in the middle of the 2024 fiscal year appropriation decisions, and it is essential we continue to invest in essential aging services.

Proposed State Budget for FY25

Source: Illinois Department on Aging, [State Budget Fiscal Year 2025](#).

Governor Pritzker released his FY25 Illinois budget priorities on February 21, 2024. The most current IDoA budget detail figures are from the Governor’s proposed IDoA budget for FY25.

The recommended fiscal year 2025 budget includes a \$21.1 million reduction in federal funds appropriations from the fiscal year 2024 budget due to exhausted COVID relief funding.

Funding Source (\$ thousands)	FY24 Budget	FY25 Governor's Proposed	Change From FY24 \$	Change From FY24 %
General Revenue Fund (GRF)	\$461,080	\$619,997	\$158,917	34%
Commitment to Human Services Fund	\$964,694	\$971,162	\$6,468	1%
Federal*	\$185,518	\$164,395	(\$21,123)	-11%
Other State	\$7,745	\$7,745	-	0%
Total *	\$1,619,037	\$1,763,299	\$144,262	9%

*Totals may not be exact due to rounding

The Governor’s proposed FY25 budget includes for following funding levels for aging services through the Illinois Department on Aging:

- \$104.4 million increase for the **Community Care Program** to accommodate caseload growth, utilization, and rate increase for in-home providers.
- \$3.0 million increase for the Home-Delivered Meals Program.
- Maintains funding for the **Adult Protective Services Program**.
- Maintains funding for unpaid family **caregivers**.

Illinois Department on Aging Notification – Federal and State Resources

The Illinois Department on Aging has informed AgeGuide of initial FY25 allocations. Allocations are based on Area Agency on Aging Letter **#25AP1**, which is IDoA’s allocation letter and is based on the Governor’s actual FY24 budget for IDoA. These allocations amounts are not finalized as the Governor’s budget proposal was just released on February 21st. In

addition, the Federal FY24 budget has not yet passed and the Federal FY25 budget has yet to be released.

AgeGuide estimates that \$11,590,650 Federal funds will be available for FY25 for services funded under Titles III-B, III-C, III-D, III-E and Title VII of the Older Americans Act as well as NSIP and MIPPA funding. This figure is based on projected FY25 grant awards from the U.S. Administration on Aging. This is a projected increase of \$159,389 compared to FY24 planning allocations.

In addition, AgeGuide projects a total allocation of \$16,215,469 State General Revenue Funds for services within this PSA in FY25.

In the charts below, the MIPPA, SHAP, & LTC Ombudsman allocations are based on FY24 funding levels.

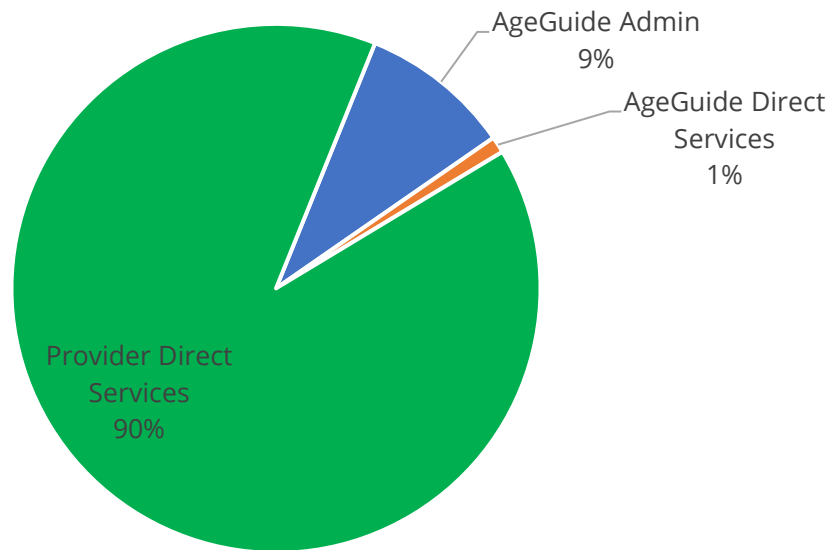
Title VII APS	\$34,071	LTC Ombudsman	\$591,127
MIPPA	\$123,406	SHAP	\$301,579
Title IIID	\$172,325	Title III Match	\$480,344
Title IIIB & VII Ombudsman	\$336,881	Ombudsman	\$525,929
NSIP	\$721,860	Caregiver Support Services	\$1,056,870
Title IIIE	\$1,394,508	Supplemental Community	\$2,778,700
Title IIIC2	\$2,615,621	Home Delivered Meals	\$10,480,920
Title IIIB	\$2,694,730	Total State	\$16,215,469
Title IIIC1	\$3,497,248		
Total Federal	\$11,590,650		

Dissemination of Federal and State Resources

AgeGuide Administrative Activities

The Older Americans Act restricts agency administration costs to 10% of the Title III allocation, per Letter 25AP1, and permits Area Agencies on Aging to provide “administratively related direct services” of advocacy, coordination, and program development.

FY2025 Projected Expenditures



AgeGuide receives Federal and State funding (\$1,467,084) from the Department of Aging strictly for the administrative function of the agency. The operational budget includes personnel, benefits, travel, equipment, supplies, occupancy, telecommunications, training and education, and miscellaneous costs in conformance with the Grants Accountability Transparency Act (GATA).

For FY25, the Illinois Department on Aging caps AgeGuide's use of "administratively related direct services" at \$3,789,044. The AgeGuide allocation for Title III administratively related direct service is \$1,150,000 and is 30.35% of the maximum cap for FY25 set by the Illinois Department of Aging.

AgeGuide's allocation for Title III-B Administrative Related Direct Service includes Advocacy (\$363,474), Coordination (\$380,298), and Program Development (\$406,228) activities and will be performed as a cost of supportive services proportionate with the requirements for administrative-related direct services.

See FY25 Resources & Funding Practices for more information.

Funding Allocation Process and Associated Policies & Practices

AgeGuide's funding allocation process applies to services funded under Titles III and VII of the Federal Older Americans Act and State General Revenue Funds provided by the Illinois

General Assembly. These funds are subject to regulations stipulated by Federal and State mandates.

Allocating Funds Across the Region: County Funding Formulas

Regional Funding Formula

AgeGuide’s regional funding formula determines the distribution of most of AgeGuide’s resources among the PSA’s eight counties. The funding formula has three purposes:

- To reflect the language and fulfill the intent of the Older Americans Act;
- To respond to changing populations and demographic factors in the region;
- To minimize disruption in existing services.

The formula uses five demographic measurements: each county’s population aged 60+ and 75+, its minority population aged 60+, its population aged 60+ with incomes at or below 100% of the federal poverty level, and its population aged 60+ who live alone. The formula’s sixth factor, known as Fixed Cost, gives additional weight to the counties with the smallest senior populations.

Each county’s formula share is the sum of these six factors, described in the table below.

Weight	Factor	Calculation
20%	60+ Population	20% of the county's percentage of the region's population aged 60+
20%	75+ population	20% of the county's percentage of the region's population aged 75+.
15%	Minority population	15% of the county's percentage of the region's minority population aged 60+. "Minority" includes all non-whites plus white Hispanics; in other words, everyone except non-Hispanic whites.
30%	Seniors below poverty	30% of the county's percentage of the region's population aged 60+ with incomes under 100% of the federal poverty level
10%	Living Alone	10% of the county's percentage of the region's population aged 60+ who live alone.
5%	Fixed Cost	5% of the county's percentage of the weighted population aged 60+ of counties whose population aged 60+ is no more than 4.0% of the region's total population aged 60+. Currently Grundy, Kankakee, and Kendall Counties qualify for this factor.

A county’s formula share determines its percentage of most federal and state funds that AgeGuide distributes. Some other funds are available on a regionwide drawdown basis, and some on the basis of applications for funding under specific terms based on additional funding received.

AgeGuide’s longstanding policy is that its funding formula uses the most current data and estimates from the U.S. Census Bureau. However, the formula is not updated once a fiscal year has begun, even if more recent demographic data becomes available. If more recent census data becomes available after this document is prepared, before the start of FY25, AgeGuide will make adjustments insofar as possible.

The method of determining the Regional Funding share remains consistent with that used in previous Area Plans. AgeGuide will continually assess the appropriateness of the changes in the factors during FY25-27 Area Plan Cycle.

FY25 Regional Funding Formula

County	60+ Population		75+ Population		Minority Population 60+		60+ Pop Below 100% Poverty		60+ Living Alone		Fixed Cost	Formula
	#	Share	#	Share	#	Share	#	Share	#	Share	Share	Share
DuPage	214,726	29.18%	62,014	29.99%	47,609	29.70%	12,791	27.97%	45,385	30.46%	0.00%	27.73%
Grundy	10,796	1.47%	2,996	1.45%	729	0.45%	586	1.28%	2,400	1.61%	33.33%	2.86%
Kane	105,861	14.39%	29,979	14.50%	26,227	16.36%	7,263	15.88%	21,685	14.55%	0.00%	14.45%
Kankakee	25,876	3.52%	7,793	3.77%	4,294	2.68%	2,730	5.97%	6,390	4.29%	33.33%	5.75%
Kendall	20,062	2.73%	5,380	2.60%	4,277	2.67%	882	1.93%	3,450	2.32%	33.33%	3.94%
Lake	152,529	20.73%	42,704	20.65%	35,189	21.95%	9,881	21.61%	31,380	21.06%	0.00%	20.16%
McHenry	68,899	9.36%	18,619	9.00%	6,821	4.26%	3,767	8.24%	13,505	9.06%	0.00%	7.69%
Will	137,115	18.63%	37,284	18.03%	35,154	21.93%	7,831	17.12%	24,810	16.65%	0.00%	17.42%
Region	735,864	100%	206,769	100%	160,300	100%	45,731	100%	149,005	100%	0.00%	100%
WEIGHT	20%		20%		15%		30%		10%		5%	100%

Data Sources: U.S. Census Bureau 2022 ACS 5-year estimates for 2022 for 60+, 75+, and Poverty
 ACL Special Tabulation from the American Community Survey 2016-2020 for 60+ Living Alone
 U.S. Census Population Estimates: 2021 County Characteristics for 60+ Minority

FY25: Health Factor Funding Formula

The Health Factor Funding Formula began as a special pilot formula for FY22-24 III-C Nutrition Services and III-D Health Promotion Services. The Health Factor Funding Formula uses all the factors described above in the Regional Funding Formula; and in addition, uses a “Health Factor” based on county-level health rankings. The Health Factor Funding Formula will continue to be used for FY25-27 for III-C Nutrition and III-D Health Promotion services.

County	60+ Population		75+ Population		Minority Population 60+		60+ Pop Below 100% Poverty		60+ Living Alone		Fixed Cost	Health Factor		Formula
	#	Share	#	Share	#	Share	#	Share	#	Share	Share	Quartile	Share	Share
DuPage	214,726	29.18%	62,014	29.99%	47,609	29.70%	12,791	27.97%	45,385	30.46%	0.00%	1	9.09%	27.22%
Grundy	10,796	1.47%	2,996	1.45%	729	0.45%	586	1.28%	2,400	1.61%	33.33%	1	9.09%	3.05%
Kane	105,861	14.39%	29,979	14.50%	26,227	16.36%	7,263	15.88%	21,685	14.55%	0.00%	1	9.09%	14.32%
Kankakee	25,876	3.52%	7,793	3.77%	4,294	2.68%	2,730	5.97%	6,390	4.29%	33.33%	4	36.36%	6.57%
Kendall	20,062	2.73%	5,380	2.60%	4,277	2.67%	882	1.93%	3,450	2.32%	33.33%	1	9.09%	4.10%
Lake	152,529	20.73%	42,704	20.65%	35,189	21.95%	9,881	21.61%	31,380	21.06%	0.00%	1	9.09%	19.87%
McHenry	68,899	9.36%	18,619	9.00%	6,821	4.26%	3,767	8.24%	13,505	9.06%	0.00%	1	9.09%	7.68%
Will	137,115	18.63%	37,284	18.03%	35,154	21.93%	7,831	17.12%	24,810	16.65%	0.00%	1	9.09%	17.19%
Region	735,864	100%	206,769	100%	160,300	100%	45,731	100%	149,005	100%	0.00%	11	100%	100.00%
WEIGHT	17.5%		20%		15%		30%		10%		5%	2.5%		100%

Data Sources: U.S. Census Bureau 2022 ACS 5-year estimates for 2022 for 60+, 75+, and Poverty
 ACL Special Tabulation from the American Community Survey 2016-2020 for 60+ Living Alone
 U.S. Census Population Estimates: 2021 County Characteristics for 60+ Minority
 2023 Illinois County Health Rankings report used for Health Factor

Ombudsman Funding Formula

AgeGuide uses a special formula to distribute Ombudsman funds among its eight counties. The formula is not adjusted during the fiscal year.

- 50% of funds are distributed according to the Regional Funding Formula, as described in the Regional Funding Formula section of this document;
- 50% of funds are distributed based on the county's total number of licensed Assisted Living facilities and Supportive Living units in each county in proportion to the totals of these beds and units in the eight-county region.

Since October of 2017, the Regional Ombudsman Programs were also required to visit residents aged 18+ in Medically Complex Facilities for Individuals with Developmental Disabilities (MC/DD).

County	Nursing Facility or Skilled Care	Intermediate Care Facility for Individuals with Developmental/Intellectual Disabilities	Sheltered care facilities	Assisted Living Facilities	Supportive Living Facilities	Medically Complex Facilities for Individuals with Developmental Disabilities	50% Based on Bed Count	50% of County Funding Formula	Ombud County Funding Formula
DuPage	5,508	64	479	3,262	371	156	0.149846	0.138632	28.85%
Grundy	265	0	0	60	160	0	0.007003	0.014318	2.13%
Kane	3,221	112	253	1,148	985	0	0.086890	0.072255	15.91%
Kankakee	989	112	79	326	167	0	0.026641	0.028727	5.54%
Kendall	184	0	0	173	87	0	0.005864	0.019714	2.56%
Lake	4,354	290	119	2,226	689	0	0.116173	0.100785	21.70%
McHenry	1,034	96	60	1,428	223	0	0.037641	0.038447	7.61%
Will	2,741	64	56	1,469	299	0	0.069941	0.087124	15.71%
Region	18,296	738	1,046	10,092	2,981	156	26772.50		100.00%

Data Source: IDPH Facilities Report

Allocating Funds by Service: Service Shares

Service Formula Shares

Once resources have been allocated to counties using the County Share Funding Formula, resources are then distributed to services using a Service Share Formula. The Service Share Formulas are developed to distribute resources within specific service categories.

Service Categories

In an attempt to direct limited resources to the most needed services, AgeGuide's Advisory Council and Board of Directors established two service categories:

- 1. Mandatory Services:** These services are mandated by IDOA and must be funded in the region:
 - Aging and Disability Resource Network (ADRN) Access Services: Information & Assistance & Options Counseling
 - In-Home Services: (AgeGuide opts to fund Friendly Visiting to fulfill this requirement)
 - Legal Assistance
 - Congregate Meals
 - Home Delivered Meals

- Health Promotion and Disease Prevention
- Caregiver Services: Access Assistance, Supplemental Gap-Filling, Respite, Counseling, and Training & Education
- Ombudsman Services: Titles III-B, VII, and Illinois GRF, Ombudsman
- Adult Protective Services: Title VII Training, M Team, and Fatality Review Team
- Illinois GRF, Senior Health Assistance Program (SHAP)
- Medicare Improvements for Patients & Providers (MIPPA)

2. Optional Services: These services are not mandated by IDOA. AgeGuide opts to fund these services based on needs assessment outcomes:

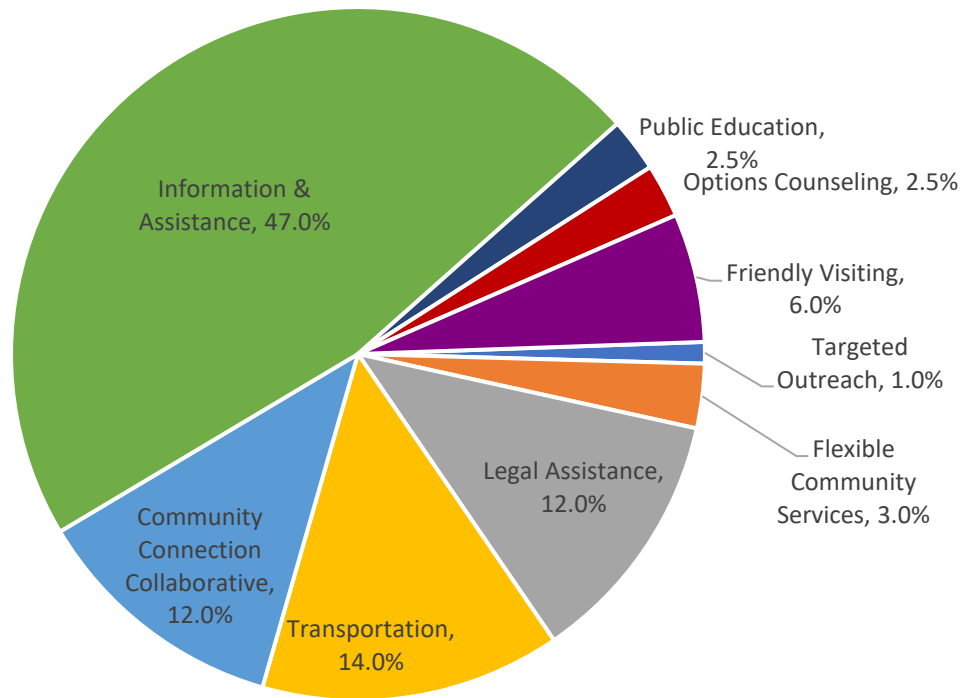
- Public Education
- Community Connection Collaborative: Health Screening, Education, and Recreation
- Targeted Outreach
- Flexible Community Services
- Transportation
- Specific Caregiver Services including Support Groups and Public Education

FY25-27 Service Share Formulas

AgeGuide has developed service share formulas for those specific Titles where funding may be used for multiple services. For III-C, III-D, and Ombudsman, no specific service share formula is used. For these funding sources, all available funding is devoted to those specific programs. Service Share Formulas have been developed for Titles III-B and Titles III-E.

1. III-B Service Share Formula

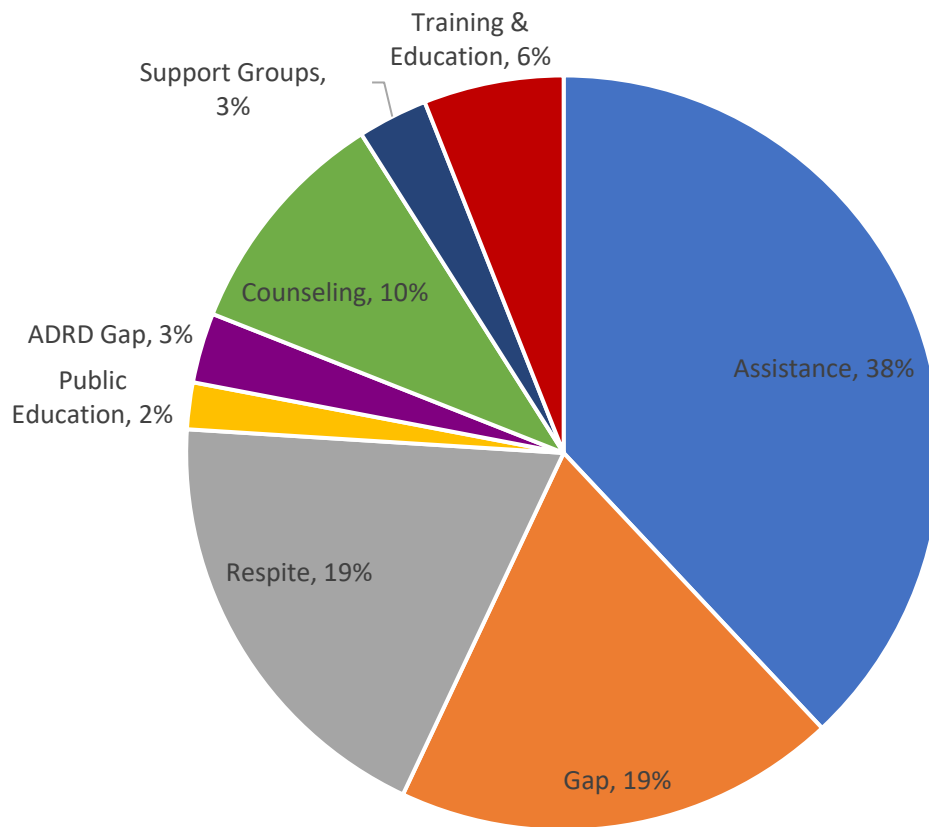
Funds from Title III-B are used for the following services: Legal Assistance, Transportation, Community Connection Collaborative (Education, Recreation, and Health Screening), Information & Assistance, Public Education, Friendly Visiting, Options Counseling, Targeted Outreach, and Flexible Community Services. Title III-B funding is allocated to these services using the following percentages for FY25:



2. Titles III-E Service Share Formula

Title III-E funds Family Caregiver Support Services, including 8 separate services: Assistance, Respite, Gap-Filling, Alzheimer’s Disease and Related Dementias (ADRD) Gap-Filling, Public Education, Individual Counseling, Training & Education, and Support Groups.

These 8 services are divided into 2 service bundles: Caregiver Resource Center and Caregiver Counseling Center. Title III-E funding is allocated to these programs according to the following percentages:



Service Allocation Principles

Adjustments to the funding allocations will be made at least annually, and within a fiscal year when necessary to reflect changes in the funds available to AgeGuide for service grants and contract awards. ***In addition to the general rule of distributing funds according to County Formula Shares and Service Shares, the following principles apply:***

Funding Levels

Each county has an established service delivery system in place. The distribution of available resources is designed to provide as little disruption to the existing system as possible and to accurately reflect the increases or decreases that may have occurred in the funding or service environment.

All Services are assigned a Service Share Funding Level.

- **Service Share:** the *percentage* of funding that is allocated to a specific service. A county's service share for a specific service is determined using the Service Share Formulas described above.

- **Service Share Funding Level:** the *dollar* amount allocated for a specific county and service. This is determined by multiplying a county's Service Share by the total funding amount available in the county.

In establishing Titles III, VII, and GRF service funding plans, AgeGuide considers the following criteria:

- The appropriateness of a service in helping older adults in greatest economic and social need (i.e., older adults with one or more of the characteristics in the regional funding formula), most at risk of loss of independence, or most in need of protection of their basic rights;
- The adequacy of funds to support a level of service that addressed the need effectively at an acceptable cost; and
- The ability of other service providers or systems to address those needs.

Fund Allocations Greater Than Fund Requests

In the event that allocations exceed the level of funds requested in a county, these excesses will be reallocated to the county's funded services within that title.

When Resources Increase

When AgeGuide resources increase, AgeGuide will evaluate the need in the region and may use one or all of the methods below to distribute the funding. These principles apply to Federal and State funds for III-B, III-C, III-D, III-E, and VII.

1. If services in a county are funded below the previous year's funding level, AgeGuide will prioritize new resources to fund each service fully.
2. When new funds are not sufficient to bring all services to at least the funding level from the previous year, AgeGuide will distribute any new funds to services in proportion to their share of the deficit.
3. When services are already funded at or above their previous year funding levels, additional funds will be distributed among the services according to the County Funding Formulas and the Service Share Formulas.
4. Identify and pilot new Special Projects or other services to meet the needs of the Region. For Congregate and Home Delivered Meal services, AgeGuide may award the funds to expand the delivery of shelf-stable, weekend, special diet, or other meals.
5. Allow service providers to submit applications for additional funding, including justification for why additional funding is needed.

When increasing allocations for a provider, AgeGuide will additionally consider the provider's current spending and program performance to ensure increases are allocated appropriately.

When Resources Decline

When resources decline, AgeGuide may use one or all of the methods below to distribute the funding. These principles apply to Federal and State funds for IIIB, IIIC, IIID, IIIE, and VII.

1. Reduce or remove one-time or special project funds before existing grants are reduced.
2. Identify areas of underspending, underperformance, or reduced need, and implement proportional reductions in funding.
3. Distribute the reduction in funding among all services according to the County Funding Formula and the Service Share Formulas.

Information on a Variety of Funding Opportunities

To cover the tremendous increase in service demand throughout the service area, AgeGuide will actively pursue other sources of funding. In August of 2022, AgeGuide was awarded a U.S. Administration for Community Living Nutrition Innovations grant. This is a three-year grant that ends July 31st of 2025. The purpose of this grant is to expand and enhance community dining opportunities by modernizing congregate dining to increase participation among older adults by utilizing a restaurant based congregate dining model that would increase participation by offering greater flexibility in meal choice and accessibility. If new sources of funds are received, AgeGuide's Board of Directors will determine the services, sub areas, and funding levels at that time.

Minimum Percentage Waiver Requests

IDoA requires that a minimum percentage of Federal Title III-B funds be set aside for the following services:

- Access Services: 33.1%
- In-Home Services: .04%
- Legal Services: 3.2%

Area Agencies on Aging that are unable to meet these minimum requirements are required to submit a waiver request.

This Public Hearing Document does not include a waiver request for the IDoA minimum percentage requirements. AgeGuide's FY25 funding plan exceeds the requirements for these services and therefore does not need to request a waiver from this requirement.

Home Delivered Meals (HDMs) Funding & Unmet Needs

AgeGuide and its Title III-C grantee agencies recognize and appreciate the increased support of the home-delivered meals program by the Illinois General Assembly. Since FY98, there has been a specific set-aside fund for the provision and expansion of home-delivered meals. This service has grown over the years and this additional funding has enabled our grantees to provide more meals to more people for a longer period of time in a broader service area. AgeGuide will advocate for continued, consistent funding to provide home-delivered meals for homebound older adults residing in the PSA who need meals. Consistent funding provides for stable programs that can focus on providing reliable, quality meal services, and offers peace of mind to home delivered meal participants that their meals will continue without interruption. Delays in receiving funds for home delivered meals strain the financial resources of providers and make operating consistently at full capacity challenging.

AgeGuide's priority is to use its services, especially home-delivered meals, to maintain the dignity and independence of all older persons in need. As such, AgeGuide and its funded partners will provide hot, cold, frozen, or emergency shelf-stable meals to homebound older persons residing in the eight-county region. In addition, AgeGuide funds three programs offering ethnic home delivered meals to service specific cultural communities. AgeGuide, in conjunction with its nutrition providers and care coordination units, will continue to closely monitor those areas of its planning and service area at risk of developing waiting lists.

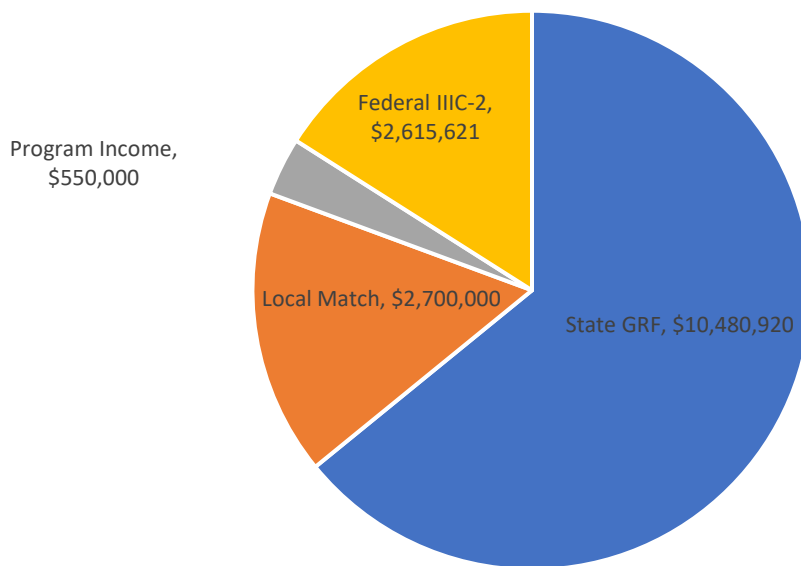
- In FY23, 1,124,556 meals were delivered to 8,440 homebound older adults in the PSA.
- Due to additional federal and state funding, there are currently no waiting lists in the PSA02 eight-county region.
- Should waiting lists occur, AgeGuide will work with the nutrition providers and care coordination units to address the waiting lists in these counties.
- Weekend meals are available to those clients most in need when assessed. Nutrition providers in DuPage, Grundy, Kane, Kankakee, Kendall, Lake, McHenry, and Will counties are providing weekend meals to those clients most in need.
- In FY25: 1,150,000 home delivered meals are projected to be provided to 8,600 homebound older adults in the PSA.
- Home delivered meals are many times the first contact older adults have with available services and support to enable them to live in their own homes, achieve better health, and feel less isolated. Nationally, the benefits of increased nutritional intake from home delivered meals translate into improved health.
- According to the 2023 Meals on Wheels America Fact Sheet:
 - For many home-delivered meal recipients, the person delivering the meal is often the only person they will see that day.

- Programs reported serving an average of about 50% more home-delivered meal recipients than before the pandemic.
- 77% of home-delivered meal recipients say the meals help improve their health.
- 85% of home delivered-meal recipients say the services help them feel more secure.
- 92% of home-delivered meal recipients say meals help them live independently.
- 64% of local programs are confident that they could serve more older adults, if the new participants came with more funding.

The home delivered meal program is a community effort bringing meal providers, volunteers, and other community organizations together to improve the quality of life for older adults and their caregivers. Research has shown that **daily** delivery of meals increases the overall improvement of health and helps older adults live independently. The home delivered meal program also represents an essential service for many caregivers, by helping them to maintain their own health and well-being.

Throughout the eight-county PSA, nutrition providers strive to develop a network of volunteers and staff to provide consistent delivery Monday through Friday. Continued adequate funding and consistent cash flow are critical to keep this extensive network operating to deliver meals and the many associated benefits of better health and improved quality of life.

Anticipated FY25 Home Delivered Meals Funding: \$16,346,541



FY24 Home Delivered Meals Status

County	Units Served YTD	Persons Receiving Meals	Waiting List
DuPage	88,720	1,684	0
Grundy	15,053	195	0
Kane	56,689	778	0
Kankakee	40,227	677	0
Kendall	18,763	241	0
Lake	50,823	737	0
McHenry	30,978	451	0
Will	81,498	1,161	0
Total	382,751	*5,922	0

*Unduplicated persons

FY25 Funding Projections

The following pages include:

1. Projected FY25 Area Plan revenues and expenditures
2. Projected FY25 service allocations by county

Older Americans Act allocations are based on Area Agency on Aging Letter #25AP1, which is the Illinois Department on Aging’s projected allocation letter for FY25. State General Revenue planning allocations are based on the Governor’s FY2 budget for Aging. MIPPA and other projected allocations are based on FY24 funding amounts. The United States House and Senate have not yet approved the President’s FY25 Federal Budget.

AREA PLAN FY2025
PROJECTED ALLOCATIONS: Letter 25AP1

REVENUES

FEDERAL ALLOCATIONS	
Title IIIB	\$2,694,730
Title IIIC-1	\$3,497,248
Title IIIC-2	\$2,615,621
Title IIID	\$172,325
Title IIIE	\$1,394,508
Title VII Elder Abuse	\$34,071
Title VII Ombudsman	\$177,595
Title IIIB Ombudsman	\$159,286
Nutrition Services Incentive Program (NSIP)	\$721,860
Medicare Improvement for Patients and Providers Act (MIPPA)	\$123,406
Carryover	\$504,533
STATE GENERAL REVENUE FUNDS (Governor's Budget)	
Title III Match	\$480,344
Community Based Services	\$2,778,700
Home Delivered Meals	\$10,480,920
Caregiver Support Services	\$1,056,870
Ombudsman	\$525,929
Long Term Care Provider Fund Ombudsman	\$591,127
Senior Health Assistance Program (SHAP)	\$301,579
TOTAL REVENUE	\$28,310,652

EXPENDITURES

AgeGuide Operations	
Federal & State Admin	\$1,467,084
Program Development, Coordination & Advocacy	\$1,150,000
AgeGuide Direct Services	
IIID: Health Promotion Direct Service	\$60,000
IIIB: I&A Direct Service	\$155,000
IIIE: I&A Direct Service	\$70,000
Provider Direct Services	
Title III-B Community Services	\$6,024,972
Title III-C1 Congregate Meals	\$1,936,933
Title III-C2 Home Delivered Meals	\$13,064,318
Title III-D Health Promotion Programs	\$112,325
Title III-E Caregiver Services	\$2,435,887
Title VII APS Services	\$34,691
Ombudsman Services	\$1,416,956
SHAP & MIPPA	\$382,486
TOTAL EXPENDITURES	\$28,310,652

**PUBLIC HEARING FY2025
PROJECTED ALLOCATIONS (LETTER 25AP1)**

Title Service	DuPage	Grundy	Kane	Kankakee	Kendall	Lake	McHenry	Will	Totals
IIIB Targeted Outreach	\$16,636	\$1,718	\$8,670	\$3,447	\$2,366	\$12,094	\$4,614	\$10,455	\$60,000
IIIB Flexible Community Services	\$49,907	\$5,155	\$26,012	\$10,341	\$7,097	\$36,282	\$13,841	\$31,364	\$179,999
IIIB Legal Assistance	\$199,628	\$20,618	\$104,047	\$41,366	\$28,387	\$145,130	\$55,363	\$125,458	\$719,997
IIIB Transportation	\$232,898	\$24,054	\$121,388	\$48,260	\$33,119	\$169,318	\$64,591	\$146,368	\$839,996
IIIB Community Connection Collaborative	\$192,015	\$25,436	\$103,071	\$44,743	\$32,666	\$141,301	\$57,769	\$122,996	\$719,997
IIIB Aging & Disability Resource Network (ADRN)									
IIIB <i>I&A</i>	\$781,875	\$80,753	\$407,517	\$162,017	\$111,183	\$568,425	\$216,840	\$491,377	\$2,819,987
IIIB <i>Public Education</i>	\$41,588	\$4,296	\$21,677	\$8,618	\$5,914	\$30,235	\$11,534	\$26,137	\$149,999
IIIB <i>Options Counseling</i>	\$41,590	\$4,295	\$21,676	\$8,618	\$5,914	\$30,235	\$11,534	\$26,137	\$149,999
IIIB Friendly Visiting or Telephone Reassurance	\$44,999	\$44,999	\$45,000	\$45,000	\$45,000	\$45,000	\$45,000	\$45,000	\$359,998
IIIC1 Congregate Meals	\$510,383	\$57,259	\$268,439	\$123,105	\$76,898	\$372,439	\$144,029	\$322,199	\$1,874,751
NSIP C-1 Congregate Meals	\$12,035	\$9,975	\$5,348	\$6,669	\$3,654	\$4,923	\$7,542	\$12,036	\$62,182
IIIC2 Home Delivered Meals	\$3,377,048	\$378,860	\$1,776,180	\$814,548	\$508,812	\$2,464,312	\$952,993	\$2,131,887	\$12,404,640
NSIP C-2 Home Delivered Meals	\$179,690	\$20,981	\$93,355	\$77,199	\$28,052	\$73,968	\$54,811	\$131,621	\$659,677
IIID Health Promotion	\$13,157	\$1,476	\$6,919	\$3,173	\$1,982	\$9,600	\$3,713	\$8,305	\$48,325
IIIE Caregiver Resource Center (CRC)									
IIIE <i>Assistance</i>	\$248,676	\$31,288	\$132,603	\$56,484	\$40,723	\$182,493	\$73,483	\$158,604	\$924,354
IIIE <i>Gap</i>	\$128,145	\$13,235	\$66,790	\$26,553	\$18,222	\$93,162	\$35,538	\$80,533	\$462,178
IIIE <i>Respite</i>	\$128,145	\$13,235	\$66,790	\$26,553	\$18,222	\$93,162	\$35,538	\$80,533	\$462,178
IIIE <i>Public Education</i>	\$6,250	\$6,250	\$6,250	\$6,250	\$6,250	\$6,250	\$6,250	\$6,250	\$50,000
IIIE <i>ADRD Gap</i>	\$20,794	\$2,148	\$10,838	\$4,309	\$2,957	\$15,118	\$5,767	\$13,069	\$75,000
IIIE Caregiver Counseling Center (CCC)									
IIIE <i>Counseling</i>	\$67,918	\$7,014	\$35,398	\$14,073	\$9,658	\$49,375	\$18,835	\$42,683	\$244,954
IIIE <i>Support Groups</i>	\$19,222	\$1,985	\$10,018	\$3,983	\$2,733	\$13,974	\$5,331	\$12,080	\$69,326
IIIE <i>Training & Education</i>	\$41,007	\$4,235	\$21,373	\$8,497	\$5,831	\$29,811	\$11,372	\$25,771	\$147,897
VII Adult Protective Services									
VII <i>M Team</i>	\$3,000	\$0	\$3,000	\$3,000	\$0	\$3,000	\$3,000	\$3,000	\$18,000
VII <i>Fatality Review Team</i>	\$3,674	\$0	\$3,674	\$0	\$0	\$0	\$0	\$0	\$7,348
VII <i>ANE Training</i>	\$2,590	\$269	\$1,350	\$537	\$368	\$1,883	\$718	\$1,628	\$9,343
Ombudsman (IIIB, VII, GRF, LTC)	\$408,183	\$30,168	\$225,183	\$78,344	\$36,192	\$306,985	\$107,662	\$222,239	\$1,414,956
SHAP & MIPPA	\$106,047	\$10,952	\$55,273	\$21,975	\$15,080	\$77,098	\$29,412	\$66,649	\$382,486
TOTAL - ALL SERVICES	\$6,216,943	\$721,264	\$3,297,779	\$1,500,960	\$942,684	\$4,492,228	\$1,784,966	\$3,924,856	\$25,317,567

Outstanding Leadership

Board of Directors

Gregory Thompson,
Chairperson of the Board

Earl Ball

Greg Barry

Bruce Conway

Ralph Feese

Gary Ford

Monica Guilhot-Chartrand

Lou Ann Johnson

Jack Kreger

Warren Kronberger

Bette Lawrence-Water

Gregory Lind

Andrew Love

Ken Maurice

Debra Mayconich Baron

Katie Monahan Brooks

Kristin Murphy

Constance Sherman

Mike Steiner

Advisory Council

Ireatha Jones,
Chairperson of the Advisory Council

Jennifer Agne

Lore Baker

Holly Blastic

Jennifer Brasfield

Beverly Burge

Mary Kay Furiasse

Renee Kroplewski

Mary McCann

Sharon McNeil

Dr. Tania Schwer

Stephanie Tintner

RaeAnn VanGundy

Myra Valera

AgeGuide Northeastern Illinois does not discriminate in admission to programs or in treatment of employment in programs or activities, in compliance with the Illinois Human Rights Act, the U.S. Civil Rights Act, Section 504 of the Rehabilitation Act, the Americans with Disabilities Act of 1990; the Age Discrimination Act, the Age Discrimination in Employment Act, and the U.S. and Illinois constitutions. If you feel you have been discriminated against, you have a right to file a complaint with the IL Department of Aging. For information, call 800-252-8966 (Voice/TDD), or contact AgeGuide at 630-293-5990 or 800-528-2000 or visit www.ageguide.org.



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