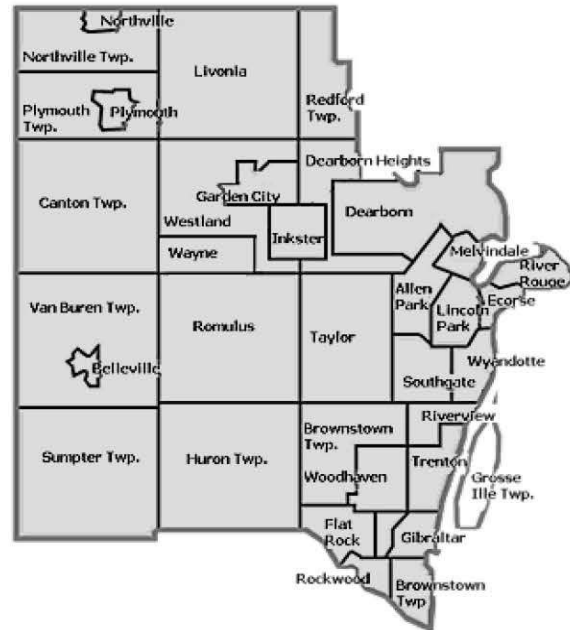


2027-2029 Multi Year Plan
FY 2027 ANNUAL IMPLEMENTATION PLAN
THE SENIOR ALLIANCE, INC. 1-C



Planning and Service Area
Serves all Wayne County
(Excluding areas served by Region 1-A)

The Senior Alliance, Inc. 1-C

3200 Greenfield, Suite 100
Dearborn, MI 48120
734-722-2830

1-800-815-1112 (SE Mich only)
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Jason Maciejewski, CEO
<https://thesenioralliance.org>

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Executive Summary

Instructions

Please include in the Executive Summary a brief description of the following:

- A. The history of your Area Agency on Aging (AAA) and Planning and Service Area (PSA) including mission statement, vision, and primary focus for the next three years**
 - B. How the AAA used data from assessment of unmet needs and the perspectives of older adults, family caregivers, service providers, and the public to inform and develop the multi-year plan. (OAA 1321.65(b)(3), OMA 400.586(y))**
 - C. The AAA's Strategic/Long-Term Plan**
 - D. Awards and Accreditations received by the AAA**
- Please review demographic data for the PSA provided in the *Document Library* and confirm accuracy with the AAA's Regional Aging Representative for inclusion in the demographic data chart.

1. Provide a brief history of your AAA and PSA including the mission statement, vision, service population, and primary focus for the next three years.

The Senior Alliance is a 501 c(3) non-profit organization founded in 1980 that is a designated Area Agency on Aging (AAA) for Planning and Service Area (PSA) 1C, which is comprised of 34 communities in southern and western Wayne County. The Senior Alliance mission is assisting people to thrive as they live, age, and grow. The Senior Alliance vision is leading our community toward a healthy future where all have the opportunity to engage, connect and contribute. The Senior Alliance's organizational foundation is built upon enabling access to the network of home and community-based long term supports and services available through Older Americans Act and Older Michiganians Act funding.

The Senior Alliance is focused on expanding access to high quality services, ensuring equity in service delivery, and advocating for the needs of older adults, caregivers, and individuals living with disabilities in our service area. The Senior Alliance is committed to serving older adults with the greatest economic and social needs. For the FY 2027-2029 Multi Year Plan period, The Senior Alliance will continue to focus efforts on reaching older adults and caregivers in Arab American and Hispanic/Latino communities.

The Senior Alliance serves approximately 251,000 older adults age 60+ residing in PSA 1C according to the 2024 American Community Survey. The Senior Alliance serves a community with a notable Arab American community, especially in Dearborn and Dearborn Heights. An estimated 3,733* older adults in PSA 1C (1.5% of the region) do not speak English, with 63% of them living in Dearborn and Dearborn Heights. Many Spanish-speaking older adults are proficient in English, but a significant number of Arabic-speaking adults have limited or no English proficiency.

**Data is based on U.S. Census Bureau 2019–2023 American Community Survey estimates.*

2. Describe how the AAA used data from the assessment of unmet needs and the perspectives of older adults, family caregivers, service providers, and the public to inform and develop the multi-year plan. [See OAA §1321.65(b)(3); OMA 400.586; Operating Standard for AAAs C-2(4).]

The Senior Alliance reviewed data, service usage, and input from Advisory Council and community members to inform and develop the FY 2027-2029 Multi Year Plan. The Senior Alliance relies on a variety of data and information sources that provide detail on residents in Planning and Service Area (PSA) 1C, including supports they may have in place, if they are or have an informal or paid caregiver, medical conditions, veteran status,

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unmet needs, and other information that can help understand the variety of individuals living in the PSA. The data is used to plan and prioritize services that meet the unique needs of individuals living in PSA 1C.

The following data sources were used to inform The Senior Alliance FY 2027-2029 Multi Year Plan:

- The Senior Alliance 2024 Older Adult Community Needs Assessment - conducted by Institute of Gerontology at Wayne State University
- The Senior Alliance 2026 Annual Input Survey
- The Senior Alliance Information & Assistance FY 2025 top caller needs:
 - In-home health care
 - Home delivered meals and food assistance
 - Transportation
 - Housing
 - Medicare/Medicaid assistance
- Community Health Needs Assessments:
 - Wayne County
 - Dearborn
 - Trinity Health Livonia

3. List all awards and accreditations received by the AAA.

The Senior Alliance has received the following awards and accreditations in recent years :

- NCQA 3-Year Accreditation for MI Choice Care Management for Long Term Services & Supports
- USAgings Aging Innovations and Achievement Awards:
 - 2023 Aging Achievement Award for *Inside The Senior Alliance* Podcast
 - 2024 Aging Innovations Award for Medicare Assistance in The Community
 - 2025 Aging Innovation Award for Halal Congregate Meal Program
 - 2026 Aging Achievement Award for Caregiving Haven
- Crain's Detroit Business Best Places to Work in Southeast Michigan: awarded seven consecutive years 2019-2025

4. Does your AAA have a Strategic/Long-Term Plan? Yes No

Please describe your Strategic/Long-Term Plan and how it informed the development of the MYP.

Demographic Data for PSA

Population	Census (most current data available)	AAA Population Served Last Fiscal Year (NAPIS)
Total Population 60+ (%)	23.90	2.55
Race/Ethnicity 60+ (%)		
a. Black/African American	9.70	19.84
b. Asian	3.48	1.25
c. White	82.79	62.41
d. Hispanic/Latino	2.96	1.17
e. Other	4.03	0.61

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Total 60+ Population in Rural areas (%)	0.00	0.37
Total 60+ Population at Poverty Level (%)	10.16	29.43
Total 85+ Population (%)	8.32	24.58
Total 60+ Non-English-Speaking Population (%)	12.12	0.13

Public Feedback

The Michigan Department of Health and Human Services (MDHHS) recognizes the importance of local collaboration, including consultation on the complete multi-year plan (MYP), for each AAA with the county/local unit of government to encourage and foster collaboration between Older American Act (OAA) programming and services provided by other non-OAA resources.

MDHHS also has an established relationship working directly with Federally Recognized Sovereign Tribes in Michigan (Tribes). As part of this work, MDHHS recognizes the importance of Tribal notification and consultation of the complete MYP for each AAA with a Tribe in the PSA to encourage and foster collaboration between Title III and Title VI programming (as required by the final rule for implementing OAA services). For AAAs without a Tribe in the PSA, MDHHS strongly encourages engagement with and targeting of elders and organizations within the PSA, such as Tribal health clinic or other Tribal affiliated organizations, to capture feedback.

Instructions

-The AAA will hold at least one public hearing on the FY 2027-2029 MYP in the PSA. Hearing(s) must be made accessible to all. Persons need not be present at the hearing(s) to provide testimony. E-mail and written testimony must be accepted for at least a 30-day period beginning when the summary of the MYP is made available. *Note - Additional testimony received after the MYP has been submitted to the ACLS Bureau can be forwarded to the AAA's Regional Aging Representative no later than July 31, 2026.

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

-The AAA is required to upload a copy of the official notice and/or press release(s) for a public hearing using the link in the *Budget and Other Documents* tab.

-AAA will describe the strategy/approach employed to encourage public attendance and testimony on the MYP, describing all methods used to gain public input and any impacts on the MYP; and how the AAA factored the accessibility issues of the service population and others in choosing the format of the meeting.

- AAAs will describe how the agency involved the Policy and Advisory Boards with encouraging and promoting participation at the public hearings(s). and if a representative from either the Policy and/or Advisory Board attended the hearing(s).

Please provide answers to the questions below:

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1. Did the AAA hold at least one public hearing on the MYP in your PSA? Yes No
2. Was the meeting held in an accessible facility or virtually following AAA requirements? Yes No
3. Did the AAA send an official notification of the complete MYP to your county/local government and Tribes within the PSA for review and consultation? Yes No
4. Was the Notice of Public Hearing(s) sent at least 30 days in advance of the scheduled hearing(s)? Yes No
5. Did the hearing notice include accessibility information for participants seeking to attend either in person or virtually? Yes No
6. Did a representative from either the Policy and/or Advisory Board(s) attend the hearing(s)? [See OAA 1321.63(a)(2)(3)(4)(5).] Yes No

7. Describe how your agency involved the Policy and/or Advisory Boards in encouraging and promoting participation to capture public feedback.

The Senior Alliance held our public hearing during our June 8, 2026 Advisory Council meeting. We encouraged Advisory Council members to invite members of the public, including elected officials and senior centers.

8. Please provide a description of the use of U.S. Mail and electronic means for MYP distribution.

To announce the public hearing and comment period for the MYP, The Senior Alliance sent out a press release to regional, local, and community-specific publications, as well as sent reminders via email in our e-newsletters and posted on our social media and website.

9. Please provide a summary of oral and written testimony received, and its impact on the development of the MYP.

During the public hearing, Advisory Council members and members of the public were highly engaged and expressed a strong interest in the status of the Home Delivered Meals program. Discussion focused on the program's current operations, future growth, and any changes affecting service delivery. Questions were also asked about the Friendly Reassurance program, including its purpose, who conducts the calls, and the procedures followed in the event of an emergency. Similar questions were raised regarding the Medication Management program, specifically concerning how the service is provided, who is responsible for delivering it, and the protocols in place for the service.

10. Describe the AAA's approach to ensure the MYP was shared with the aging network, family caregivers, service providers and the public.

The MYP was shared via email with senior centers, aging network partners, service providers, elected officials, and program participants. In addition, the MYP was made available to the public through our website and was announced on our social media channels.

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Access Services

Access services may be provided to older adults directly through the AAA without a direct service provision request. These services include Care Management; Care Transition Coordination & Support; Case Coordination and Support; Disaster Advocacy and Outreach Programs; Information and Assistance; Options Counseling; Outreach (with specific attention to underserved populations); and Transportation. If the AAA is planning to provide any of these access services directly during FY 2027-2029 MYP cycle, complete this section.

Instructions

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

Care Management

<u>Starting Date</u>	10/01/2026	<u>Ending Date</u>	09/30/2029
<u>Total of Federal Dollars</u>		<u>Total of State Dollars</u>	\$503,822.00

Geographic area to be served

PSA 1C

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

GOAL

Provide quality Care Management services throughout the entire Planning and Service Area 1C.

ACTIVITIES

Care Management clients will receive comprehensive assessment and the desired level of assistance with coordination of services most appropriate to their needs and wishes. Enrollment continues on an ongoing basis.

Program quality will be monitored on an ongoing basis. As necessary, program improvements will be made.

Staff training will be identified through quality activities and training will be provided , as needed.

Case Coordination and Support

<u>Starting Date</u>	10/01/2026	<u>Ending Date</u>	09/30/2029
<u>Total of Federal Dollars</u>	\$323,172.00	<u>Total of State Dollars</u>	\$130,671.00

Geographic area to be served

PSA 1C

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

GOAL

Provide quality Case Coordination and Support services throughout the entire Planning and Service Area 1C.

ACTIVITIES

Clients who do not currently need a nursing facility level of service but are at-risk of needing that level of

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care will receive support to prevent or slow a further medical or functional decline. Program quality will be monitored on an ongoing basis. As necessary, program improvements will be made.

Staff training will be identified through quality assurance activities and trainings will be provided , as needed.

Information and Assistance

<u>Starting Date</u>	10/01/2026	<u>Ending Date</u>	09/30/2029
<u>Total of Federal Dollars</u>	\$96,620.00	<u>Total of State Dollars</u>	\$43,412.00

Geographic area to be served

PSA 1C

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

GOAL

The Senior Alliance will provide quality Information and Assistance services to the entire Planning and Service Area (PSA) 1C through the continued engagement and increased partnerships with community-based organizations, local governments, health care entities, community focal points, and local senior centers to gain relevant and up-to-date information on the needs of the community.

ACTIVITIES

The Senior Alliance Information and Assistance Department staff will provide up-to-date information to the entire PSA 1C by offering appropriate resources and referrals.

Outreach

<u>Starting Date</u>	10/01/2026	<u>Ending Date</u>	09/30/2029
<u>Total of Federal Dollars</u>	\$40,868.00	<u>Total of State Dollars</u>	

Geographic area to be served

PSA 1C

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

GOAL

Ensure all areas of the Planning and Service Area (PSA) 1C receive information about programs and services available through The Senior Alliance and its vendors.

ACTIVITIES

Information and education about programs and services will be published and dispersed in a wide variety of formats throughout the PSA 1C.

Maintain an ongoing relationship with community focal points, including senior centers and senior housing units, within the PSA 1C in order to effectively distribute information and support community dwelling older adults, caregivers, individuals living with disabilities, and their families.

Transportation

<u>Starting Date</u>	10/01/2026	<u>Ending Date</u>	09/30/2029
<u>Total of Federal Dollars</u>	\$85,818.00	<u>Total of State Dollars</u>	

Geographic area to be served

PSA 1C

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

GOAL

Residents of the PSA 1C will have improved options to access non-emergency medical transportation, housing transitions, benefits application, and enrollment appointments.

ACTIVITIES

The Senior Alliance will provide ride-of-last-resort transportation to medical visits, pharmacies, and governmental offices that clients are otherwise unable to access and/or afford.

In collaboration with the Information and Assistance Department, Transportation Department staff will identify additional community resource options to meet the growing need for transportation services.

Options Counseling

<u>Starting Date</u>	10/01/2026	<u>Ending Date</u>	09/30/2029
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<u>Total of Federal Dollars</u>	\$1,000.00	<u>Total of State Dollars</u>	
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Geographic area to be served

PSA 1C

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

GOAL

The Senior Alliance will provide quality Options Counseling services to the entire Planning and Service Area (PSA) 1C through the continued engagement and increased partnerships with community-based organizations, local governments, health care entities, community focal points, and local senior centers to gain relevant and up-to-date information on the needs of the community.

ACTIVITIES

The Senior Alliance staff will provide Options Counseling program participants with unbiased, person-centered options and resources for long term supports and services.

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Direct Service Request

Because this is the beginning of a multi-year cycle, all requests to provide services directly must be included in the MYP for approval.

It is expected that in-home, community, nutrition, caregiver, and kinship caregiver services will be provided under contracts with community-based service providers, but when appropriate, AAAs can request to provide these services directly. Direct service provision requests must be approved by the Commission on Services to the Aging (CSA).

Direct service provision is defined as “providing a service directly to a senior, such as preparing meals, doing chore services, or working with seniors in an adult day setting.” Direct service provision by the AAA may be appropriate when, in the judgment of the ACLS Bureau: A) provision is necessary to ensure an adequate supply; B) the service is directly related to the AAA’s administrative functions; or C) a service can be provided by the AAA more economically than any available contractor, and with comparable quality.

Prior to adding requests for direct service provision, please have a conversation with the AAA's Regional Aging Representative to discuss ACLS Bureau and CSA criteria for approval to determine the best course of action.

Instructions

Select the service from the list and enter the information requested pertaining to basis, justification, and public hearing discussion for all Direct Service Request for FY 2027-2029. *If you think you may wish to provide a service directly at any time during the multi-year cycle, even if it's not in year one, please submit the request with your MYP.

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

Medication Management

Total of Federal Dollars \$37,881.00

Total of State Dollars

Geographic Area Served PSA 1C

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

GOAL

Support older adults with Medication Management services throughout Planning and Service Area 1C.

ACTIVITIES

Person-centered plans will be developed to support individuals in taking medications, as prescribed. Individuals having difficulty affording medications will be offered resources to make medications more

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affordable.

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

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

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

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

A
C

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

A Request for Proposals (RFP) was issued by the agency for Medication Management services in Fiscal Years 2027-2029. No successful bids were received in response to the RFP. The Senior Alliance will maintain the current Medication Management services, as has been done during the 2026-2026 Multi-Year Plan cycle.

The Medication Management program provides a comprehensive, in-home review of all medications an individual is taking. The in-home review of all medications is essential in identifying situations where an older adult is taking medications incorrectly or does not understand medication instructions. It also provides an opportunity to identify at-risk situations, such as when a person has not filled a prescription for a medication that the physician thinks is being taken as prescribed.

Medication Management services are offered to adults aged 60 and older who are at-risk of medication errors due to cognitive decline, confusion, historical difficulty in managing medications, trouble in obtaining medications, complex medication regimens, or recent changes in prescribed medications.

Through the Medication Management program, The Senior Alliance provides staff to assist older adults in effectively taking medications as prescribed by:

1. Addressing barriers for successful medication regime, such as finding programs to assist in paying for medications.
2. Assisting older adults in accessing transportation or medication delivery programs when getting to the pharmacy interferes with taking medications appropriately.
3. Communication with the physician and/or pharmacist (as necessary) to support the individual; and
4. Developing and applying effective medication management systems.

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

Discussion at the June 8, 2026 public hearing included questions about how the Medication Management service is provided, who is responsible for delivering the service, and the protocols in place for the service.

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Friendly reassurance

Total of Federal Dollars \$22,000.00

Total of State Dollars

Geographic Area Served PSA 1C

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

GOAL

Provide a point of social contact for isolated older adults in PSA 1C.

ACTIVITIES

Place up to five phone calls per week to participants, providing a social contact.

Increase the number of program participants through outreach to older adults and their caregivers participating in other programs offered through The Senior Alliance .

Provide information on the program through outreach to Community Focal Points, local elected leaders and other agencies providing services to older adults.

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

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

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

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

A

C

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

The Senior Alliance is requesting to provide Friendly Reassurance as a direct service during FY 2027-2029 based on the outcome of the FY 2027-2029 Request for Proposals process. A Request for Proposals (RFP) was issued by the agency for Friendly Reassurance services in FY 2027-2029 and there were no bids to provide this service throughout the entire Planning and Service Area 1C. The Senior Alliance is requesting to continue to provide Friendly Reassurance services, as was done during the 2023-2026 Multi-Year Plan cycle.

Friendly Reassurance calls are routinely placed by Title V Senior Community Service Employment Program (SCSEP) personnel. SCSEP participants receive training and experience with data collection, record keeping, telephone etiquette and how to handle emergencies on the phone while rotating through

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their Friendly Reassurance experience. SCSEP participants have access to Information & Assistance and Medicare Counseling program staff to assist with resources for Friendly Reassurance program participants .

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

Discussion at the June 8, 2026 public hearing included questions about how the Friendly Reassurance service purpose, who conducts the calls, and procedures followed in the event of an emergency.

Long Term Care Ombudsman

Total of Federal Dollars \$29,125.00 Total of State Dollars \$265,636.00

Geographic Area Served PSA 1C

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

GOAL

The Long Term Care Ombudsman (LTCO) will advocate for residents in long-term care setting by educating long-term care providers and caregivers on multi-disciplinary approaches to quality person-centered care.

ACTIVITIES

Conduct outreach activities to resident councils, providing education on person-centered planning.

Provide information and training on quality of care to long-term care staff.

Build and maintain relationships with local academic institutions to engage students who are interested in advocacy and elder rights protection.

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

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

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

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

A
C

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

A Request for Proposals (RFP) was issued by the agency for Long Term Care Ombudsman services in FY 2027-2029. No bids were received in response to the RFP.

The Senior Alliance will maintain the current Long Term Care Ombudsman (LTCO) Program, as was done

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during the 2023-2026 Multi-Year Plan cycle. The LTCO is an independent voice, co-located at The Senior Alliance's office. The LTCO is provided resources including use of secure information technology tools and immediate access to Information & Assistance staff, Medicare Counseling staff, and Community Care Department staff. The Senior Alliance has significant experience with volunteer recruitment and management to assist the LTCO.

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

None.

Congregate Meals

<u>Total of Federal Dollars</u>	\$398,344.00	<u>Total of State Dollars</u>	\$21,982.00
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Geographic Area Served PSA 1C

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

As part of its direct service delivery, The Senior Alliance will provide data management services through the implementation of a new software system, ServTracker. This system will enhance the agency's ability to efficiently document, coordinate, and monitor congregate meal services while improving data accuracy, reporting capabilities, and overall service delivery. The implementation of ServTracker will support streamlined, compliant reporting processes and strengthen The Senior Alliance's capacity to effectively serve older adults and caregivers throughout the service area.

The Senior Alliance is currently completing its multi-year Request for Proposal (RFP) process. However, the following nutrition services are anticipated to continue operating largely unchanged throughout the FY 2027–2029 Multi-Year Plan period:

- Liquid meal supplement program
- Halal meal program
- Congregate nutrition services

Should additional direct service components be required during FY 2027, The Senior Alliance will work closely with the Regional Aging Representative and the State Unit on Aging Nutrition Specialist to ensure appropriate implementation, oversight, and compliance with program requirements.

Any changes to direct service delivery will be communicated to the Commission on Services to the Aging through the annual implementation update process.

GOALS

Ensure the effective planning, coordination, and potential implementation of Congregate Meal services as a direct service model during FY 2027–2029 in alignment with Older Americans Act requirements and state nutrition program standards.

OBJECTIVES

Based on the results of the FY 2027–2029 Request for Proposals process, The Senior Alliance will collaborate closely with the Regional Aging Representative and the State Unit on Aging Nutrition Specialist to develop, implement, and monitor high-quality Congregate Meal services that meet

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regulatory requirements, support participant needs, and promote program effectiveness and compliance throughout the MYP.

ACTIVITIES

1. Provide ongoing support and technical assistance for congregate meal enrollment activities.
2. Utilize ServTracker to document assessments, enrollments, service delivery, and reporting activities to ensure accurate data management, program compliance, and continuity of care.

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

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

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

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

A

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

The Senior Alliance has determined that the following nutrition program functions will be managed directly by the AAA:

1. Participant assessments
2. Data maintenance and enrollment in the new software system (ServTracker)
3. Wait list management
4. Monthly voluntary contribution letters and related contribution processes

This approach is intended to centralize key administrative functions, improve consistency across nutrition program operations, and enhance operational efficiency for the nutrition provider. By streamlining administrative processes, the provider will be better positioned to focus resources on service delivery and more effectively meet the nutritional needs of older adults.

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

None.

Home Delivered Meals

Total of Federal Dollars \$2,077,172.00 Total of State Dollars \$1,090,382.00

Geographic Area Served PSA 1C

The Senior Alliance, Inc.

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

The Senior Alliance is requesting approval to conduct Home Delivered Meals assessments during FY 2027–2029 and will be responsible for eligibility determination and enrollment processes for individuals applying to participate in both the Home Delivered Meals Program and the Liquid Nutrition Program.

As part of its direct service provision, The Senior Alliance will also provide data management services utilizing a new software system, ServTracker. This system will enhance the agency's ability to efficiently document, coordinate, and monitor client services while improving data accuracy, reporting capabilities, and overall service delivery. Implementation of ServTracker will support streamlined and compliant reporting processes while strengthening The Senior Alliance's capacity to effectively meet the needs of older adults and caregivers throughout the service area.

In addition, The Senior Alliance will directly manage the home-delivered meal waitlist, monthly voluntary contribution letters, and related administrative processes. This approach is intended to centralize key administrative functions, improve consistency across program operations, and allow the selected nutrition provider to focus more fully on service delivery and meeting the nutritional needs of older adults.

The Senior Alliance is committed to working collaboratively with its Policy Board, the selected nutrition provider, and community partners to implement a reimagined home-delivered meal program that is responsive to the needs of the region's aging population.

Should additional direct service components be required during FY 2027, The Senior Alliance will work closely with the Regional Aging Representative and the State Unit on Aging Nutrition Specialist to ensure appropriate implementation, oversight, and compliance with program requirements. Any changes to direct service delivery will be communicated to the Commission on Services to the Aging through the annual implementation update process.

GOAL

Support older adults at high nutritional risk throughout Planning and Service Area (PSA) 1C by providing access to Supplemental Nutrition Services, including Oral Nutrition Supplements, to help maintain health, independence, and overall well-being.

ACTIVITIES

1. Conduct comprehensive nutrition assessments to evaluate each individual's nutritional risk factors, functional limitations, and ability to safely consume solid foods.
2. Determine program eligibility and complete enrollment for individuals who qualify for the Liquid Nutrition Program based on assessed nutritional needs.
3. Coordinate and monitor distribution of oral nutrition supplements to enrolled participants to support ongoing nutritional stability and health outcomes.
4. Utilize ServTracker to document assessments, enrollment, service delivery, and reporting activities to ensure accurate data management, program compliance, and continuity of service.
5. Explore additional private-pay nutrition program opportunities that could expand service options and support the long-term sustainability of nutrition services.

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

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

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

A

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

The Senior Alliance is requesting approval to provide certain services directly in order to ensure continuity, quality, compliance, and efficient coordination of services throughout the planning and service area. This request is based on operational, fiscal, and programmatic considerations that support the agency's ability to effectively meet the needs of older adults and caregivers.

Specifically, the implementation and management of the ServTracker data management system is considered an administrative and program support activity necessary to fulfill the Area Agency on Aging's responsibilities related to service coordination, documentation, monitoring, reporting, and oversight. As the designated Area Agency on Aging, The Senior Alliance is responsible for ensuring accurate data collection, program accountability, compliance with state and federal reporting requirements, and effective oversight of funded services. Direct management of the ServTracker system will allow the agency to standardize reporting processes across congregate locations, improve data integrity, strengthen monitoring capabilities, and reduce duplication and inefficiencies associated with decentralized data management practices.

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

Discussion at the June 8, 2026 public hearing included questions about the program's current operations, future growth plans, and any changes affecting service delivery.

Supplemental Nutrition Services - Oral Nutrition Supplements

Total of Federal Dollars \$183,420.00

Total of State Dollars

Geographic Area Served PSA 1C

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

The Senior Alliance is requesting approval to conduct assessments to determine eligibility and need for oral nutritional supplements during FY 2027–2029. The Senior Alliance will be responsible for all associated eligibility determination and enrollment processes. In addition, The Senior Alliance will provide data management services utilizing ServTracker, a new software platform that will support nutrition program operations, reporting, and oversight.

Currently, The Senior Alliance provides a monthly liquid nutrition distribution program, which meets the requirements of Bureau of Aging, Community Living, and Supports Operating Standards for Service Programs for Supplemental Nutrition Services – Oral Nutrition Supplements. The liquid nutrition program is available for eligible nutrition program participants at high nutritional risk.

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

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Direct provision by The Senior Alliance enables more consistent oversight of a critical service for older adults with significant nutritional needs. Centralized management supports uniform eligibility determinations, streamlined enrollment, and improved coordination across service components, reducing administrative fragmentation and increasing overall efficiency.

With integrated data systems such as ServTracker, The Senior Alliance can further strengthen reporting, enhance planning, and support continuous quality improvement.

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

None.

Caregiver Case Management

Total of Federal Dollars \$34,980.00

Total of State Dollars

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Geographic Area Served PSA 1C

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

GOAL

Provide quality Caregiver Case Management services throughout the entire PSA 1C.

ACTIVITIES

Caregiver Case Management clients will receive comprehensive TCARE assessment, an individualized care plan, and the desired level of assistance with coordination of supports to help the caregiver manage their role and identity as a caregiver. Enrollment continues on an ongoing basis.

Program quality will be monitored on an ongoing basis. As necessary, program improvements will be made.

Staff training will be identified through quality activities and training will be provided, as needed.

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

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The Senior Alliance is providing Caregiver Case Management services as Access Services for caregivers, using federal Title III-E and state funds as permitted by the fundable service matrix.

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

None.

Caregiver Education

Total of Federal Dollars \$80,000.00

Total of State Dollars

Geographic Area Served PSA 1C

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

GOAL

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Ensure all areas of the Planning and Service Area (PSA) 1C receive education and information about programs and services available for caregivers and older adults through The Senior Alliance and the social services network in PSA 1C.

ACTIVITIES

Education about caregiver programs and services will be presented, published, and dispersed in a wide variety of formats throughout the PSA 1C.

Maintain an ongoing relationship with community focal points, including senior centers and senior housing units, within the PSA 1C in order to effectively provide caregiver education to a wide audience.

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

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The Senior Alliance is providing Caregiver Education services as Access Services for caregivers, using federal Title III E and state funds as permitted by the fundable service matrix.

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

None.

Caregiver Information and Assistance

Total of Federal Dollars

Total of State Dollars

Geographic Area Served PSA 1C

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

GOAL

The Senior Alliance will provide quality Caregiver Information and Assistance services to the entire Planning and Service Area (PSA) 1C through the continued engagement and increased partnerships with community-based organizations, local governments, health care entities, community focal points, and local senior centers to gain relevant and up-to-date information on the needs of the community.

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The Senior Alliance is providing Caregiver Options Counseling services as Access Services for caregivers, using federal Title III E and state funds as permitted by the fundable service matrix.

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

None.

Caregiver Supplemental Services

Total of Federal Dollars \$60,000.00 Total of State Dollars \$157,918.00

Geographic Area Served PSA 1C

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

GOAL

Residents of the PSA 1C will have improved options to access non-emergency medical transportation, housing transitions, benefits application, and enrollment appointments.

ACTIVITIES

The Senior Alliance will provide ride-of-last-resort transportation to medical visits and governmental offices that clients are otherwise unable to access and/or afford. The transportation program is designed to help relieve caregivers by offering limited transportation, primarily for situations when no other options are available.

In collaboration with the Information and Assistance Department, Transportation Department staff will identify additional community resource options to meet the growing need for transportation services.

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The Senior Alliance is providing Caregiver Supplemental Services for Transportation as Access Services for caregivers, using federal Title III E and state funds as permitted by the fundable service matrix.

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

None.

2027–2029 MYP Goals

For each State Plan on Aging (SPoA) goal, AAAs are asked to identify the objectives and planned activities that will guide their work related to the goal during this multi-year cycle.

AAA may also enter goals, in addition to those corresponding with the SPoA goals.

The State Unit on Aging has identified the following four goals for their 2027-2029 State Plan on Aging (AAAs can type these in, under the Add MYP Goal tab, when creating their SPoA goals):

Goal 1 - Enhance access to services for older adults and caregivers to support their health, independence, and social connectedness.

Goal 2 - Promote collaborations and partnerships across MDHHS and other state departments, AAAs, Title VI Tribal grantees, and other agencies and organizations.

Goal 3 - Enhance pathways for accessing information, so that older adults and their support network, including those of greatest economic need and greatest social need, are aware of resources.

Goal 4 -Utilize language and messaging that celebrates aging and communicates the strength and value of older adults and those who provide care.

Instructions

Select the link entitled Add MYP Goal

Provide the title of goal in the MYP Goal tab. A narrative for each goal can be entered in this text box.

Objectives related to each goal can be entered in the Objectives tab and timeline, planned activities and expected outcomes for each objective can be entered in the Planned Activities tab.

This same process can be used to add additional,non-SPoAgoals.

-

MYP Goal

- A. Enhance access to services for older adults and caregivers to support their health, independence, and social connectedness.**

State Goal Match: 1

Objectives

The Senior Alliance is committed to enhancing access to services that support the health, independence, and social connectedness of older adults and caregivers throughout the Planning and Service Area (PSA). Through advocacy efforts, The Senior Alliance will work to promote increased appropriations and policy changes that address the evolving needs of older adults and caregivers. The Senior Alliance will continue to expand outreach, education, and data-driven service delivery strategies to increase the number of individuals served and improve awareness of available programs and supports. To ensure high-quality and accessible services, The Senior Alliance will strengthen and maintain a reliable vendor network capable of meeting the diverse needs of the community.

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Planned Activities

1. Secure a reliable and substantial vendor network to ensure older adults and caregivers receive quality services and supports throughout Planning and Service Area 1C.

Timeline: 10/01/2026 to 09/30/2029

Planned

1. Conduct responsible coordination and oversight of the vendor network to maintain compliance with Bureau of Aging, Community Living, and Supports, Michigan Department of Health and Human Services, and The Senior Alliance standards.

2. Identify vendor compliance issues as quickly as possible to maintain strong service partnerships and accountability.

Expected Outcome

The Senior Alliance will maintain an active network of vendors that will provide quality services to participants.

Progress

2. Provide and install DME items for Care Management Program participants to reduce fall risk, as funding is available.

Timeline: 09/30/2026 to 10/01/2029

Planned

1. The Senior Alliance staff will identify Care Management program participants who lack bathroom safety equipment.

2. The Senior Alliance will provide and install necessary bathroom safety equipment.

3. The Senior Alliance will provide Personal Emergency Response System units and offer enhanced Personal Emergency Response System units with fall detectors.

4. The Senior Alliance will identify Care Management participants who require assistance with transfers.

5. The Senior Alliance will provide necessary chair lifts.

Expected Outcome

With available funding, a reduced rate of falls in the bathroom due to the installation of assistive technologies.

Progress

3. Advocate on behalf of older adults for increased appropriations and policy changes that support older adults' and caregivers' health, independence, and social connectedness.

Timeline: 10/01/2026 to 09/30/2029

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Planned

1. Provide elected officials and stakeholders information on the experience of The Senior Alliance in operating nutrition programs, in-home programs, and community programs, as well as the general state of Medicaid long-term supports and services (LTSS) and home and community based services (HCBS).
2. Provide legislative updates to stakeholders and older adults on budget processes and policies impacting older adults and caregivers.
3. Support the advocacy efforts of Area Agency on Aging (AAA) stakeholders by providing legislative updates on budget processes and policy proposals involving older adults and caregivers.
4. Advocate for appropriations and policy changes that benefit older adults and caregivers in collaboration with the Silver Key Coalition, Area Agencies on Aging Association of Michigan (4AM), USAging, and Meals on Wheels America.

Expected Outcome

- Elevated awareness by elected officials of the impact and operations of The Senior Alliance nutrition programs results in increased nutrition program appropriations to address program offerings and projected demographic growth in the eligible population.
- Elevated awareness by elected officials of the impact and operations of the Medicaid long-term supports and services (LTSS) and home and community based services (HCBS) results in increased LTSS appropriations to address operating rates, waitlists, and projected demographic growth in the eligible population.
- Improved understanding of the positive fiscal and social impact of Medicaid HCBS will result in a move toward rebalancing the funding spent on LTSS in Michigan, so the percent of appropriations spent on HCBS at least meets the national average spent by individual states.

Progress

4. Increase the number of older adults and caregivers served through The Senior Alliance.
Timeline: 10/01/2026 to 09/30/2029

Planned

1. Develop data-driven procedures and report utilization to increase appropriate, specific interventions for older adults and caregivers.
2. Assess service delivery models to identify opportunities improve access to services and address gaps in services.
3. Conduct outreach and education to increase awareness of services available across Planning and Service Area 1C.
4. Foster and strengthen relationships across the aging network to improve access to services.

Expected Outcome

Older adults and caregivers across Planning and Service Area 1C will experience increased awareness, access, and utilization of services through improved outreach, collaboration, and data-driven service delivery strategies.

Progress

B. Promote collaborations and partnerships to strengthen the aging and caregiving networks.

State Goal Match: 2

The Senior Alliance, Inc.

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Objectives

The Senior Alliance will promote collaborations and partnerships that strengthen the aging and caregiving networks through continued engagement with community organizations, local governments, health systems, and advocacy groups. The Senior Alliance will foster collaborative partnerships that improve coordination, resource sharing, and access to services for older adults and caregivers. The Senior Alliance will continue to serve as a trusted resource for elected officials and community stakeholders by providing education, data, and insight on issues impacting older adults and caregivers.

Planned Activities

1. Foster and expand community partnerships and collaborative initiatives.

Timeline: 10/01/2026 to 09/30/2029

Planned

1. Participation in local and regional collaborative bodies and community planning initiatives.
2. Continued and expanded partnerships with local organizations and governments to provide community-based services, such as Information and Assistance, Outreach, and Medicare Counseling.
3. Partner with veterans' service providers to expand access to services and enhance referral partnerships.
4. Provide leadership to the aging and caregiving networks through information and resource sharing, data analysis, and advocacy efforts.
5. Serve as a resource and referral partner for elected officials, community leaders, and stakeholders on programs and services impacting older adults and caregivers.

Expected Outcome

- Older adults and caregivers will benefit from a stronger, more coordinated aging and caregiving network through expanded partnerships, collaborative leadership, and increased access to community-based services and resources.
- The Senior Alliance is a recognized as a resource for referrals, constituent concerns, service coordination, and local and regional data on older adult and caregiver needs.

Progress

- C. Enhance pathways for accessing information, so that older adults and their support network, including those of greatest economic need and greatest social need, are aware of resources.**

State Goal Match: 3

Objectives

The Senior Alliance will improve access to information and resources for older adults, caregivers, and stakeholders, particularly those with greatest economic and social need, through outreach, education, advocacy, and community partnerships. The Senior Alliance will increase awareness of aging-related issues, available services, and protections against elder abuse and exploitation while empowering individuals to make informed decisions and advocate for their needs.

Planned Activities

1. Provide information and education to older adults, caregivers, and stakeholders to raise awareness of resources and enhance access to information.

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Timeline: 10/01/2026 to 09/30/2029

Planned

1. Conduct outreach throughout Planning and Service Area 1C to increase older adults' and caregivers' knowledge of aging issues and awareness of resources, including targeted outreach to those of greatest economic and greatest social need.
2. Promote awareness and understanding of elder rights, justice, and protections for vulnerable adults within the community.
3. Increase understanding of long-term care services and supports through Long Term Care Ombudsman education and outreach efforts.

Expected Outcome

- Older adults, caregivers, and stakeholders in Planning and Service Area 1C will have increased knowledge of aging issues and awareness of resources, including how to access resources.
- Older adults, caregivers, and stakeholders in Planning and Service Area 1C will have an increased awareness about elder abuse and exploitation, including how to report suspected abuse and exploitation.
- Residents of licensed long-term care facilities and their family members will have an understanding of their rights and how to access support from a long-term care ombudsman.

Progress

2. Inform and empower older adults, caregivers, and stakeholders on policy issues impacting the lives of older adults in Planning and Service Area 1C.

Timeline: 10/01/2026 to 09/30/2029

Planned

1. Adopt an annual advocacy platform identifying areas of advocacy focus.
2. Produce a monthly advocacy newsletter that provides information to older adults, community focal points, local government officials, and other stakeholders on legislative and budget activities at the state and federal level.
3. Include episodes on advocacy topics in the agency's podcast series, *Inside The Senior Alliance*.
4. Provide regular advocacy updates at meetings of the agency's Advisory Council and Board of Directors.
5. Distribute advocacy action alerts to stakeholders on advocacy topics during key moments in the legislative process.

Expected Outcome

- Older adults, caregivers, and stakeholders in Planning and Service Area 1C will be better informed about issues of importance in aging and caregiving services and will be empowered to advocate on behalf of older adults.
- The Senior Alliance will be viewed as an informational resource and thought leader for aging and caregiving policy and budget information .

Progress

- D. Utilize language and messaging that celebrates aging and communicates the strength and value of older adults and those who provide care.**

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State Goal Match: 4

Objectives

The Senior Alliance will utilize inclusive, person-centered language and messaging that celebrates aging and recognizes the strength, contributions, and value of older adults and caregivers. Through education, outreach, and advocacy The Senior Alliance will work to reduce stigma surrounding aging while promoting dignity, independence, and choice. Efforts will focus on empowering older adults and caregivers with accessible information, meaningful engagement opportunities, and culturally responsive supports that ensure all individuals can fully participate in programs and services regardless of language or background.

Planned Activities

1. Empower older adults and caregivers by providing person-centered information, education, and support services.

Timeline: 10/01/2026 to 09/30/2029

Planned

1. Provide translation to ensure accessibility, including providing translated materials, utilization of language line when a translator is not present, and use translators at events in which attendees are non-English speaking.

2. Engage in outreach and education efforts that increase awareness of and access to services for older adults and caregivers in The Senior Alliance targeted communities, which include Middle Eastern and Northern African (MENA) communities and Hispanic and Latino communities.

Expected Outcome

1. Improved accessibility of programs and materials for individuals with limited English proficiency and diverse cultural backgrounds.

2. Increased confidence among older adults and caregivers in navigating services and supports.

3. Enhanced ability for older adults and caregivers to make informed, person-centered decisions that support independence and quality of life.

4. Increased knowledge of and access to services for individuals in The Senior Alliance targeted communities.

Progress

2. Advocate for the rights, dignity, and independence of older adults and caregivers through education, outreach, and advocacy efforts.

Timeline: 10/01/2026 to 09/30/2029

Planned

1. Conduct outreach and educational efforts that promote aging services, independence, and the value of older adults and caregivers within the community.

2. Advocate for policies, funding, and community initiatives that support the rights, dignity, and wellbeing of older adults and caregivers.

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Expected Outcome

1. Greater engagement in advocacy efforts that support older adults and caregivers .
2. Increased awareness of the value, rights, and contributions of older adults and caregivers.
3. Strengthened partnerships and collaboration with organizations serving older adults and caregivers.

Progress

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Supplemental Documents

SUPPLEMENTAL DOCUMENTS FOR SPECIAL APPROVAL

Select the supplemental document(s) from the Document Library only if applicable in FY 2027. Provide all requested information for each selected document. Completed documents can be uploaded to the *Budget & Other Documents* tab.

Document C: Proposal Selection Criteria - should only be completed if there are new or changed criteria for selecting providers (only if applicable).

Document D: Cash-In-Lieu-Of-Commodity Agreement (only if applicable).

Document E: Waiver of Minimum Percentage of a Priority Service Category (only if applicable).

***If you have any questions as to whether your AAA should complete any of these documents, contact your Regional Aging Representative.**

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Planned Service Array

Instructions

Complete the FY 2027-2029 MYP Planned Service Array for the PSA.

Indicate the appropriate placement for each ACLS Bureau service category and regional service definition. Unless noted otherwise, services are understood to be available PSA-wide.

***Prior to finalizing the Planned Service Array, AAAs should meet with their Regional Aging Representative to discuss goals for service delivery.**

Category	Services
Provided by Area Agency	<p>Access</p> <ul style="list-style-type: none"> • Care Management • Case Coordination and Support • Information and Assistance • Options Counseling • Outreach • Transportation <p>In-Home</p> <ul style="list-style-type: none"> • Friendly Reassurance • Medication Management <p>Community</p> <ul style="list-style-type: none"> • Long Term Care Ombudsman <p>Nutrition Services</p> <ul style="list-style-type: none"> • Congregate Meals • Home Delivered Meals • Supplemental Nutrition Services - Oral Nutrition Supplements <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Caregiver Case Management • Caregiver Education • Caregiver Information and Assistance • Caregiver Options Counseling • Caregiver Supplemental Services
Contracted by Area Agency	<p>Access</p> <ul style="list-style-type: none"> • Transportation *

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	<p>In-Home</p> <ul style="list-style-type: none"> • Assistive Devices & Technologies • Friendly Reassurance • Homemaking • Personal Care <p>Community</p> <ul style="list-style-type: none"> • Disease Prevention/Health Promotion • Legal Assistance • Prevention of Elder Abuse, Neglect and Exploitation • Senior Center Staffing <p>Nutrition Services</p> <ul style="list-style-type: none"> • Congregate Meals • Home Delivered Meals • Supplemental Nutrition Services - Oral Nutrition Supplements <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Adult Day Services • Caregiver Education • Respite Care <p>Older Relative (Kinship) Caregiver Services</p> <ul style="list-style-type: none"> • Kinship Caregiver Education • Kinship Caregiver Supplemental Services
<p>Participant Private Pay</p>	<p>Access</p> <ul style="list-style-type: none"> • Care Management • Transportation <p>In-Home</p> <ul style="list-style-type: none"> • Assistive Devices & Technologies • Chore • Home Care Assistance • Home Health Aide • Home Injury Control • Homemaking • Medication Management • Personal Care <p>Community</p> <ul style="list-style-type: none"> • Assistance to Hearing Impaired & Deaf Community

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	<p>Community</p> <ul style="list-style-type: none"> • Counseling Services • Health Screening • Home Repair • Legal Assistance • Vision Services <p>Nutrition Services</p> <ul style="list-style-type: none"> • Home Delivered Meals • Nutrition Counseling • Nutrition Education <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Adult Day Services • Caregiver Case Management • Caregiver Counseling • Caregiver Training • Respite Care <p>Older Relative (Kinship) Caregiver Services</p> <ul style="list-style-type: none"> • Kinship Caregiver Counseling • Kinship Caregiver Respite Care
<p>Funded by Other Sources</p>	<p>Community</p> <ul style="list-style-type: none"> • Counseling Services • Senior Center Operations <p>Nutrition Services</p> <ul style="list-style-type: none"> • Nutrition Education <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Caregiver Counseling • Caregiver Education • Caregiver Supplemental Services • Caregiver Training <p>Older Relative (Kinship) Caregiver Services</p> <ul style="list-style-type: none"> • Kinship Caregiver Counseling • Kinship Caregiver Education • Kinship Caregiver Training

* Not PSA-wide

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Program Development Spending Plan

AAAs may use up to 20% of their OAA Title III-B allocation for program development during the 12-month fiscal year.

If approved by the State Unit on Aging, AAAs may use service funds for program development and coordination activities. (OAA 1321.17)

Instructions

Please provide answers to the question(s) below:

Does the MYP budget reflect the use of Program Development funds?

Yes No

If yes, please describe how the funds will be used.

The Senior Alliance plans to use Program Development funds to support strategic activities and staff time dedicated to engaging with the community and older adults. These efforts will focus on identifying unmet needs, developing responsive resources, and strengthening the aging network through new and/or expanded programs. Planned activities for FY 2027-2029 include but are not limited to:

- Identifying ways to support increasing needs in community, including:
 - Researching and developing a redesigned home delivered meal program
 - Researching and developing a redesigned transportation program
- Improve NAPIS reporting, including implementing any new requirements
- Work on creating state-wide organizational collaboration for expansion of programs and support for older adults
- Developing grant applications and implementing successful grants to expand program reach and develop new programs to serve older adults and caregivers
- Management of funding fluctuations and identifying ways to leverage community support to maintain and/or adapt program delivery

Advocacy Strategy

Instructions

AAAs will describe the comprehensive strategy for FY 2027-2029.

Included will be descriptions on how advocacy efforts will improve the quality of life for older adults within the PSA. Additionally, AAAs will give updates on current advocacy efforts (OAA 1321.61(a)(b)(c)) (Operating Standard for AAAs C-6)

Instructions

Please answer the following questions:

Please describe the following:

1. How will the AAA monitor, evaluate, and comment on policies, programs, hearings, levies, and community actions which affect older individuals and family caregivers which the area agency considers to be aligned with the interests identified in the Act?

The Senior Alliance employs a structured and proactive advocacy approach to monitor aging and caregiving policies, programs, hearings, and community actions. The Senior Alliance develops an annual advocacy platform that identifies and prioritizes key issues affecting older adults, caregivers, and individuals living with disabilities. The advocacy platform is developed with input from the Advisory Council and is approved by the Board of Directors.

Staff track legislative and policy developments aligned with the advocacy platform and assess the potential impact on the community. The Senior Alliance engages in advocacy by submitting public comments, letters, and testimony; participating in hearings, town halls, and legislative events; and maintaining regular communication with elected officials and their staff.

The Senior Alliance collaborates with statewide and national partners, including Area Agencies on Aging Association of Michigan, Silver Key Coalition, and USAging, to evaluate policy trends and coordinate advocacy efforts.

To support and encourage public engagement, The Senior Alliance shares advocacy information at www.thesenioralliance.org/advocacy, on social media, and in its monthly newsletter, Colloquy, to ensure that stakeholders and the public can participate in the policy process. The Senior Alliance has easy to use tools on its website that allow individuals to send pre-written letters and emails to their state and federal elected officials.

2. How will the AAA solicit comments from the public on the needs of older individuals and family caregivers?

The Senior Alliance solicits input and comments from older adults and family caregivers through its Advisory Council, public hearings, listening sessions, surveys, and targeted outreach. The Senior Alliance collaborates with local community-based organizations, faith-based organizations, advocacy groups, and service providers to gather feedback from the individuals they serve.

3. How will the AAA represent the interests of older individuals and family caregivers to local level and executive branch officials, public and private agencies, or organizations?

The Senior Alliance staff has regular and ongoing communication with elected officials at the municipal, county, state, and federal levels. Communication methods include attending coffee hours, in-person meetings,

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email communications, and phone calls. At a minimum, The Senior Alliance meets annually with each state and federal legislator representing Planning and Service Area (PSA) 1C to provide information about older adults and caregivers needs, and to be a resource for aging and caregiving policy issues or for constituent cases.

The Senior Alliance maintains regular communication with municipal and county officials throughout PSA 1C. Municipalities receive annual updates on services available to older adults and caregivers, and The Senior Alliance collaborates with local partners to advance shared priorities.

The Senior Alliance maintains ongoing communication with decision-makers in community-based organizations and public and private agencies to advance advocacy efforts. This includes participating in policy discussions and coalitions and using data, community input, and lived experience to inform and strengthen its advocacy work.

4. How will the AAA consult with and support the State's Long-Term Care Ombudsman Program?

The Long-Term Care Ombudsman Program operates as a direct service at The Senior Alliance. Over the past several Multi Year Plan cycles, The Senior Alliance has issued Requests for Proposals for Long-Term Care Ombudsman services but has not received any successful bids. As a result, The Senior Alliance continues to support the program through staffing, administration, and training.

Because the Long-Term Care Ombudsman program is operated directly by The Senior Alliance under the oversight of the State Long-Term Care Ombudsman, the agency maintains close consultation with the State Long-Term Care Ombudsman. This includes working together to resolve issues, sharing relevant client and systems-level information, and supporting efforts to protect the rights and well-being of long-term care residents.

5. How will the AAA coordinate with public and private organizations, including units of general-purpose local government to promote new or expanded benefits and opportunities for older individuals and family caregivers?

The Senior Alliance works closely with public and private organizations throughout PSA 1C to raise awareness of services available and opportunities available to support older adults and caregivers. Awareness of available services and new community programs and benefits is achieved through close collaboration with the network of aging and caregiving service providers connected with The Senior Alliance, including nonprofit organizations, governments, senior and community centers, libraries, faith-based organizations, health care systems, and health collaboratives. The Senior Alliance conducts outreach through in-person meetings, sharing information at community events, participation in collaborative bodies, producing monthly email newsletters, and social media posts.

6. How will the AAA take a leadership role in the PSA to assist communities in targeting resources from all appropriate sources to meet the needs of older adults and family caregivers with greatest economic and social need, particularly low-income minorities?

The Senior Alliance uses data, community input, service utilization, and needs assessments to identify priority populations and service gaps within Planning and Service Area 1C and across broader regions. The Senior Alliance has a leadership role in assisting communities with identifying the needs of older adults and caregivers and providing strategic direction on how to support these needs.

The Senior Alliance convenes community partners, informs strategic planning efforts, and advocates for the equitable allocation of resources to ensure that individuals with the greatest economic and social need, particularly low-income and underserved populations, have access to critical services.

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In addition, The Senior Alliance supports communities in leveraging federal, state, local, and private funding opportunities to maximize resources and strengthen service delivery. This is achieved through sharing data on older adults, providing input on planning activities, identifying needs, and letters of support for initiative that will improve the lives of older adults and caregivers.

The Senior Alliance regularly participates in an advisory role representing the needs of older adults in local, county, and health systems' community health needs assessments.

7. How will the AAA work with other aging network providers, including other AAAs, in coordinated effort?

The Senior Alliance works in close coordination with other aging network providers by maintaining regular communication and partnerships. This includes participating in regional and statewide meetings and coalitions to align priorities, share best practices, and address emerging needs. The Senior Alliance is an active member organization of Area Agencies on Aging Association of Michigan, with CEO Jason Maciejewski currently serving as Chairperson of its Board of Directors and staff participating on several committees.

The Senior Alliance coordinates with other aging network providers, including Area Agencies on Aging, through ongoing communication, resource sharing, partnership development, and participation in regional and statewide coalitions. These efforts focus on aligning priorities, developing shared advocacy strategies, sharing best practices, addressing emerging needs, and strengthening service delivery across the aging network to support a coordinated and effective system for older adults and caregivers.

Planning and Service Area Aging Landscape

Constantly changing service demands make it essential for AAAs to carefully evaluate the potential, priority, targeted, and unmet needs of its service population for effective planning. All AAA PSAs are different, and it is important to understand the unique landscape of each and the impact on planning for service delivery.

Instructions

AAA's will provide for the CSA and ACLS Bureau a snapshot of the landscape of the aging services within the PSA by answering the following questions:

1. Describe notable changes in trends since the last MYP providing a picture of potentially eligible service population.

Since the last Multi Year Plan, the older adult population has continued to grow, increasing the number of individuals likely to need supportive services. Census data and population projections from Southeast Michigan Council of Governments (SEMCOG) suggest that Planning and Service Area (PSA) 1C was home to 174,741 individuals age 65+ in 2025. The 65+ population is projected to grow to 210,222 individuals in 2040, which is an increase of over 21%. If the entire 60+ population increases at the same rate, there will be 297,167 people eligible for Older Americans Act services in PSA 1C in 2040. Furthermore, the population of people age 85 and older is expected to grow even faster, at around 29.2%, to a projected total of 27,159 individuals in 2040.

There has been a noticeable rise in demand for home- and community-based services, including in-home personal care, homemaker services, caregiver support, nutritional programs such as home-delivered and congregate meals, and transportation. Additionally, increasing food insecurity is a noticeable trend over the past year, especially among lower income individuals. There is also an increasing preference among older adults to remain in their own homes and live independently in the way and space they choose for as long as possible.

2. Describe how the AAA coordinates a comprehensive system of aging services within the PSA.

The Senior Alliance coordinates a comprehensive system of aging services within Planning and Service Area (PSA) 1C through planning, community collaboration, resource coordination, and by providing funding and provider oversight. Through its Request for Proposal process, The Senior Alliance identifies needed services, contracts with qualified providers, and works to ensure services are available across the region in a way that responds to community needs.

Using community needs assessments, stakeholder input, service utilization data, and demographic analysis, The Senior Alliance identifies service gaps, demographic and service trends, and priority populations. This information helps guide planning and informs the development of strategies to strengthen the aging services network throughout PSA 1C.

The Senior Alliance supports coordination across programs by maintaining a strong Information and Assistance system and a regularly updated resource directory of services and supports available throughout the PSA. This helps older adults, caregivers, and professionals access accurate information and promotes strong connections across the aging network.

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The Senior Alliance monitors provider performance, compliance, and service quality to maintain a reliable and effective network of providers. Staff work closely with community-based organizations, local governments, advocacy groups, health care entities, and other aging network partners to align efforts, share information, and improve service delivery across the continuum of care.

3. Describe ways in which the AAA is informing, educating and advocating within their communities.

The Senior Alliance incorporates education, outreach and advocacy into all programs and services to help ensure individuals receive comprehensive information about services available throughout Planning and Service Area (PSA) 1C and how to access services. The Information & Assistance team provides information and education to older adults, caregivers, and stakeholders about resources for elder abuse prevention and fraud prevention via outreach efforts.

The Senior Alliance collaborates with community organizations, faith-based communities, local businesses, housing facilities, governments, and many other places where older adults and caregivers may find information. These collaborations are done in an effort to better support the community with resources as they organizations serve their communities and to build their engagement in advocacy efforts.

Advocacy is one of The Senior Alliance strategic values and is incorporated into all levels of the agency and the work conducted in the community. Staff work with elected officials from the local to federal levels to ensure the needs of older adults and caregivers are considered. Through outreach and education efforts, The Senior Alliance provides the public with knowledge and tools to be advocates for older adult needs.

4. Describe what home and community-based Medicaid services are available within the PSA.

(Examples: PACE, MI Choice Waiver, etc.)

The following home and community-based Medicaid services are available within Planning and Service Area (PSA) 1C:

1. MI Choice Waiver Agents:
 1. The Senior Alliance
 2. The Information Center
2. Programs for All Inclusive Care of the Elderly (PACE):
 1. PACE SE MI
 2. Huron Valley PACE
3. Adult Home Help: Michigan Department of Health and Human Services
4. MI Coordinated Health: various health plans

5. Describe other significant initiatives and grants leveraged by the AAA. (Examples: MI Options, SCSEP, MHEP, etc.)

1. Older Americans Act Title V Senior Community Service Employment Program (SCSEP): The Senior Alliance administers the program and places participants at The Senior Alliance and at other organizations in PSA 1C

2. MI Options:

1. Person Centered Options Counseling: long-term supports and services options counseling services
2. State Health Insurance Assistance Program (SHIP): Medicare counseling
3. Medicare Improvements for Patients and Providers (MIPPA): Medicare counseling and navigation support for low-income beneficiaries
3. Senior Medicare Patrol: The Senior Alliance conducts outreach and education to help Medicare beneficiaries avoid scams and fraud
4. Ralph C Wilson, Jr. Foundation grant for Caregiver Friendly Faith-Based Communities
5. Senior Project Fresh: lead agency for technical support and program promotion to provide funding to low-income older adults to purchase Michigan produce at participating farmers markets

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6. Livonia Community Foundation grant to provide rides for Livonia residents using The Senior Alliance Transportation program

7. IMPART Alliance grant to provide supports for direct care workers to help them with unmet needs that would otherwise prevent their ability to work.

8. ARPA Infrastructure grant to provide The Senior Alliance with infrastructure updates that help provide improved and expanded services to MI Choice participants.

6. a. Describe how the AAA addresses unmet needs by referring individuals to organizations such as Commissions/Councils on Aging, Departments on Aging, Health Care Organizations/Systems, Veterans Agencies, Tribal Organizations, Faith-based Organizations, Public Health, Mental Health, Community Action Agencies, Legal Assistance and Elder Rights Programs, etc.

The Senior Alliance addresses unmet needs by connecting older adults, caregivers, and individuals with disabilities to a broad network of community-based organizations and public systems throughout Planning and Service Area (PSA) 1C and across Michigan. Through Information and Assistance, Care Management, Options Counseling, and outreach functions, The Senior Alliance identifies needs that may fall outside of its funded services and provides referrals to appropriate community partners that can help address those needs. The Senior Alliance connects people with their local area agency on aging if they are outside PSA 1C.

Referrals are made to a wide range of organizations based on the individual's circumstances, preferences, and goals. These may include community action agencies, legal services programs, elder rights programs, housing resources, faith-based organizations, local aging commissions, municipal and county departments, health care organizations and systems, veterans' affairs resources, public health and behavioral health providers, and other nonprofit service providers. When appropriate, The Senior Alliance connects individuals with food assistance, utility assistance, transportation options, caregiver supports, benefits enrollment assistance, and other programs that help stabilize and support independent living.

The Senior Alliance maintains knowledge of available community resources through ongoing partner engagement, participation in coalitions and collaborative bodies, and regular updating of its resource information. Staff use person-centered practices to ensure referrals are responsive to the individual's needs and circumstances, and when possible, support warm handoffs and coordinated follow-up to improve access and reduce barriers. Through this coordinated referral approach, The Senior Alliance helps address unmet needs, strengthen community connections, and promote a more comprehensive system of support for older adults and caregivers.

6. b. How does the AAA foster relationships with these community partners?

The Senior Alliance fosters relationships with community partners through ongoing communication, collaboration, and participation in shared efforts to support older adults, caregivers, and individuals living with disabilities throughout Planning and Service Area (PSA) 1C and across Michigan. The Senior Alliance maintains active relationships through regular meetings, participation in coalitions and collaborative bodies, outreach activities, joint problem-solving, resource sharing, and coordinated service planning.

The Senior Alliance works closely with partners to share information, identify emerging needs, address service gaps, and improve referral pathways for individuals seeking assistance. The Senior Alliance also engages with community partners through public education efforts, resource sharing, and participation in events and initiatives that promote awareness of available services and supports.

A robust resource directory is maintained with over 1,335 unique records. The resource directory is available online for anyone to search for local and regional services. Partner agencies and individuals are encouraged to make use of the regularly updated and maintained resource directory.

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The Senior Alliance fosters strong relationships by serving as a reliable resource and connector within the aging and caregiving network. The Senior Alliance shares data and resources to partner agencies across the continuum of care to maximize impact and reduce redundancies. The Senior Alliance builds and maintains collaborative relationships that strengthen the overall system of care in PSA 1C through a commitment to improving outcomes for older adults and caregivers.

7. Describe how the AAA identifies veterans during intake and coordinates veteran-related support services and/or referral programs with appropriate veteran agencies.

The Senior Alliance identifies veterans during the intake and screening process conducted by the Information and Assistance team. Callers are asked questions to determine veteran status so staff can identify potential eligibility for veteran-related programs and services. Resources are provided to all relevant services to support veterans and their loved ones.

8. Describe services that address incidence of hunger, food insecurity, malnutrition, physical and mental conditions and/or self-direction. [See OAA 306(a)(16) (42 U.S.C. 3026(a)(16)).]

Services provided and supported through The Senior Alliance that address hunger, food insecurity, and malnutrition include Home Delivered Meals, Congregate Meals, Liquid Nutrition Supplement program, Senior Project Fresh, and a referral partnership with Gleaners Community Food Bank, which help older adults access nutritious meals, fresh produce, and healthy food.

The Senior Alliance provides all our callers and participants with resources including The Senior Alliance Service Network Resource Guide to connect individuals and caregivers with available community programs and supports. The Senior Alliance also has caregiver nutrition guides that provide information on how to nutrition for healthy aging and guidance on feeding older adults who need assistance.

In-home services, such as homemaking, meal preparation, and personal care services, help individuals remain safely in their homes while receiving assistance with daily activities and nutritional needs.

The Senior Alliance maintains a robust resource directory and internal resources that are used to provide individuals with nutrition resources including food banks, commodity food box programs, blessing box locations, and additional resources to help ensure nutrition needs are met.

9. Describe how the AAA or its subcontractors are maintaining the fidelity of the health promotion/disease prevention programs.

The Senior Alliance maintains the fidelity of health promotion and disease prevention programs through ongoing monitoring and assessment of subcontractors and service providers. Providers participate in regular assessments where The Senior Alliance staff reviews documentation such as service logs, licenses, certifications, and program tracking materials to ensure services are being delivered according to program requirements and standards. The Senior Alliance may also review participant satisfaction surveys, when available, to evaluate program quality and participant experience.

10. Describe how the AAA promotes health promotion/disease prevention programs to maximize community awareness and participation.

The Senior Alliance maintains a service network resource guide and an online resource database that includes information on health and wellness programs, disease prevention, and other community resources available throughout Planning and Service Area 1C. These tools help increase awareness of available programs and make it easier for individuals and caregivers to access services that support healthy aging and overall well-being.

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The Senior Alliance shares information about available programs during calls with individuals seeking assistance and provide referrals based on identified needs.

11. Describe Alzheimer's Disease and related disorders programs and education that the AAA offers and/or supports.

The Senior Alliance supports Alzheimer's Disease and related disorders programs through partnerships with organizations such as Alzheimer's Association. Through these partnerships, The Senior Alliance helps connect individuals and caregivers to education, support services, and community resources related to dementia and caregiving.

The Senior Alliance provides education and resources to caregivers of individuals living with Alzheimer's Disease and other dementias through its Caregiving Haven online resource. There are two Caregiver's Guides as part of Caregiving Haven that provide information and education on caring for a loved on with Alzheimer's Disease and other dementias, as well as additional resources available.

12. Does the AAA administer a senior millage in the PSA?

Yes No

13. Are there any counties or townships in the PSA in which the AAA is working with the local officials to initiate potential senior millage? If yes, please describe:

Yes No

Greatest Economic and Greatest Social Need

In compliance with OAA regulations, AAAs are required to have a targeted focus on populations with Greatest Economic and Greatest Social Need. (45 CFR OAA 1321)

Instructions

AAAs will describe how the agency defines Greatest Economic and Greatest Social Need for the PSA; how the AAA educates its partners, services providers, and the public on OAA expectations; strategies for targeting priority populations; and how the Advisory Council is engaged, by providing answers to the following questions:

Please describe the following:

1. How the AAA defines Greatest Economic and Greatest Social need for the PSA.

The Senior Alliance defines greatest economic need as need resulting from an income level at or below 300% the Supplemental Security Income (SSI) rate.

The Senior Alliance defines greatest social need as need resulting from noneconomic factors that impact, threaten to impact, or contribute to an individual's or a group of individuals' ability to live independently.

2. How the AAA educates the public, its partners, and service providers on the Older Americans Act expectations regarding targeting older adults with greatest economic and greatest social need.

The Senior Alliance educates the public, partners, and service providers on Older Americans Act expectations through trainings, technical assistance, and ongoing communication. Expectations around targeting older adults with the greatest economic and social need are reinforced through provider contracts, monitoring, and program guidance. The Senior Alliance also shares this information through community outreach and events while using data and needs assessments to highlight priority populations.

3. AAA's strategy to target priority populations for greatest economic and greatest social need.

The Senior Alliance reviews service delivery in relation to socioeconomic data of the communities we serve to ensure services are provided equitably across the service region and in proportion to the specific communities' needs. Where underserving is identified based on greatest socioeconomic needs, The Senior Alliance conducts concentrated outreach efforts to increase service utilization and enrollment.

For FY 2027-2029, The Senior Alliance is targeting Arab American and Hispanic/Latino older adults to improve service utilization among these two historically underrepresentation demographics. Efforts include material translation, employment recruitment, targeted outreach, and identifying new community partnerships with local organizations.

4. How the AAA's Advisory Council assisted in targeting individuals with greatest economic and greatest social need. [See OAA § 1321.63(b)]

Advisory Council assists in targeting individuals with the greatest economic and social need by providing input on program planning, priorities, and service delivery.

Coordination to Serve Native American Elders and Family Caregivers

All Tribes have unique cultures and identities that should be honored and respected. AAAs should use this section to describe methods used for collaboration, sharing program information, opportunities for Tribal representation in various groups, connection with services beyond Title VI, and engagement with elders and organizations within and adjacent to the PSA.

Instructions

In compliance with the OAA, AAAs will describe the following:

Please describe the following:

1. Methods for collaboration on and sharing of program information and changes.

There is not a Federally Recognized Sovereign Indian Tribe within Planning and Service Area (PSA) 1C. American Indian Health and Family Services is a nonprofit health and community wellness center whose mission is to empower and enhance the physical, spiritual, emotional, and mental well-being of underserved populations in Southeast Michigan. Since there is no Federally Recognized Sovereign Tribe in PSA 1C, American Indian Health and Family Services is suggested to provide notifications.

The Senior Alliance engages with American Indian Health and Family Services about the availability services for older adults and caregivers, informs them of program changes, and invites collaboration on events and programs.

The Senior Alliance will explore outreach to Indigenous nonprofits serving Planning and Service Area 1C to build partnerships and identify opportunities for representation on The Senior Alliance Advisory Council and/or Board of Directors.

2. How services will be provided in a culturally appropriate and trauma-informed manner.

The Senior Alliance is committed to provide services in a culturally sensitive and trauma-informed manner. Staff participated in trauma-informed trainings in 2025, with specific trainings for all staff, management, and care managers.

The Senior Alliance is seeking staff trainings and workshops for cultural sensitivity and cultural competency related to serving Native Americans elders. We anticipate a training to be conducted in FY 2027.

3. Communication opportunities that service providers will offer to Title VI programs, such as participation in meetings, inclusion on email distribution lists, and presentation opportunities.

The Senior Alliance will continue to communicate with American Indian Health and Family Services to offer participation in meetings, invite them to be included on email lists, and for presentation opportunities. The Senior Alliance will instruct service providers to also communicate with American Indian Health and Family Services to offer participation in meetings, invite them to be included on email lists, and for presentation opportunities

4. Opportunities to serve on advisory councils, workgroups and boards. AAAs please note whether your policy and advisory boards have tribal representation.

The Senior Alliance does not have tribal representation on its policy board or advisory council. We continue to actively seek tribal representation on both the policy board and advisory council.

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5. How service providers will provide outreach to Tribal elders and family caregivers regarding Title III services for which they may be eligible.

The Senior Alliance and its service providers will provide outreach to the public, including to American Indian Health and Family Services, to reach Tribal elders and family caregivers regarding services and programs for which they may be eligible. Outreach will be conducted in culturally competent and sensitive manner.

6. Is there a Federally Recognized Tribe within your PSA?

Yes No

7. How Title VI programs may refer individuals for Title III services.

Title VI programs may refer individuals directly to The Senior Alliance and its service provider network for Title III services. The Senior Alliance communicates referral methods with American Indian Health and Family Services to ensure they are responded to and communicated with in a culturally appropriate manner.

8. Describe any current and future collaborative efforts with Tribe(s) within the PSA including any anticipated outreach efforts.

The Senior Alliance is seeking opportunities for collaboration with American Indian Health and Family Services, including future cultural competency workshops for staff and collaboration on events.

Expenditures by Service & Fund Category

	49.71%	50.29%	0.00%	0.00%	0.00%	100.00%
Services	Federal	State	Medicaid	Program Income	Local	Grand Total
Community Services	\$ 196,077	\$ 198,377	\$ -	\$ -	\$ -	\$ 394,454
Elder Abuse Prevention	\$ 12,947	\$ -	\$ -	\$ -	\$ -	\$ 12,947
Health Promotion: Evidence-Based	\$ 64,952	\$ -	\$ -	\$ -	\$ -	\$ 64,952
Legal Assistance	\$ 55,305	\$ -	\$ -	\$ -	\$ -	\$ 55,305
Ombudsman	\$ 62,873	\$ 198,377	\$ -	\$ -	\$ -	\$ 261,250
Grand Total	\$ 196,077	\$ 198,377	\$ -	\$ -	\$ -	\$ 394,454

FY 2025 AREA PLAN BUDGET

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 1C

Date: 5/19/2026 Rev No: 0
 Budget Period: 10/1/2026 to 9/30/2027

Area Plan Budget Overview

Area Plan Budget Summary	Federal/State Award	Other	Program Income	Cash Match	In-Kind Match	Grand Total
Administration	\$ 526,662	\$ -	\$ -	\$ 66,689	\$ -	\$ 593,351
Program Development & Coordination Activities	\$ 196,190	\$ -	\$ -	\$ -	\$ -	\$ 196,190
AAA RD/Nutritionist	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Services	\$ 8,602,205	\$ -	\$ 8,000	\$ 21,810	\$ 794,671	\$ 9,426,686
Total	\$ 9,325,057	\$ -	\$ 8,000	\$ 88,499	\$ 794,671	\$ 10,216,227

Administration Budget

Administration Revenue	Federal / State / Other Administration	Grand Total
Federal	\$ 365,667	\$ 365,667
Title III Administration	\$ 365,667	\$ 365,667
State	\$ 91,138	\$ 91,138
State Administration	\$ 64,046	\$ 64,046
State Merit Award (MATF) Administration	\$ 24,188	\$ 24,188
State Caregiver Support Administration	\$ 2,904	\$ 2,904
Grand Total	\$ 456,805	\$ 456,805

Administration Expenditures	Amount	FTEs
Salaries/Wages	\$ 354,050	5.00
Fringe Benefits	\$ 113,296	
Office Operations	\$ 126,005	
Total	\$ 593,351	

Services Budget

Fund Sources	Community Services	Grand Total
Federal	\$ 196,077	\$ 196,077
Title III-B Supportive Services	\$ 104,647	\$ 104,647
Title III-C1 Congregate Meals	\$ -	\$ -
Title III-C2 Home-Delivered Meals	\$ -	\$ -
Title III-D Preventive Health	\$ 64,952	\$ 64,952
Title III-E National Family Caregiver Support	\$ -	\$ -
Title VII-A Ombudsman	\$ 13,531	\$ 13,531
Title VII EAP Elder Abuse Prevention	\$ 12,947	\$ 12,947
Nutrition Services Incentive Program (NSIP)	\$ -	\$ -
State	\$ 198,377	\$ 198,377
State Access Services	\$ -	\$ -
State In-Home Services	\$ -	\$ -
State In-Home Services (Direct Care Worker Pay)	\$ -	\$ -
State Congregate Meals	\$ -	\$ -
State Home Delivered Meals	\$ -	\$ -
State Alternative Care	\$ -	\$ -
State Aging Network Services	\$ -	\$ -
State Caregiver Support	\$ -	\$ -
State Respite Care	\$ -	\$ -
State Merit Award (MATF)	\$ -	\$ -
State Nursing Home Ombudsman	\$ 30,220	\$ 30,220
Michigan State Ombudsman	\$ 168,157	\$ 168,157
State Care Management	\$ -	\$ -
Medicaid	\$ -	\$ -
Targeted Case Management	\$ -	\$ -
Program Income	\$ -	\$ -
Program Income	\$ -	\$ -
Local	\$ -	\$ -
Cash Match	\$ -	\$ -
In-Kind Match	\$ -	\$ -
Grand Total	\$ 394,454	\$ 394,454