

**NEW YORK STATE OFFICE FOR THE AGING**

2 Empire State Plaza, Albany, NY 12223-1251

Andrew M. Cuomo, Governor

Corinda Crossdale, Director

An Equal Opportunity Employer

**PROGRAM INSTRUCTION**

**Number 15-PI-22**

**Supersedes**

**Expiration Date**

**DATE:** December 10, 2015

**TO:** Area Agencies on Aging Implementing NY Connects Prior to April 1, 2014

Local Departments of Social Services  
NY Connects Coordinators

**SUBJECT:** Application Procedures for NY Connects: Choices for Long Term Care Program for the Period 10/1/15 to 9/30/16.

.....  
**ACTION REQUESTED:**

Complete the attached application for the NY Connects Program for the Period 10/1/15 to 9/30/16.

**RESPONSE DUE DATE:**

**Applications and original signed cover page must be sent to NYSOFA by Friday, January 15, 2016. Applications and original signed cover page received earlier will be processed upon receipt.**

**Electronically submit the signed Signature Page in PDF, completed Budget, and Subcontractor Budget (if applicable) to: Celeste.Farhart@aging.ny.gov**

**If unable to electronically submit the signed Signature Page in PDF, mail one (1) signed original cover page via US Postal Service to:**

Celeste Farhart  
Bureau of Programs, Services, and Systems Integration  
NY State Office for the Aging  
2 Empire State Plaza, 4<sup>th</sup> floor  
Albany, NY 12223

**BACKGROUND:**

NY Connects is an essential component of the State's efforts to rebalance the long term services and supports (LTSS) system so that people can live independently and remain at home and in their communities.

NY Connects complies with federal statute as prescribed by the 2006 Reauthorization of the Older Americans Act and is statutorily mandated through the New York State Elder Law §203(8).

The core functions of the NY Connects program include the provision of Information and Assistance (I&A) and Options Counseling on LTSS for older adults and individuals of all ages with disabilities, as well as their caregivers; upholding an active local Long Term Care Council (LTCC); and an ongoing Public Education campaign to promote the program.

NY Connects is being expanded geographically and enhanced functionally through the Balancing Incentive Program (BIP), authorized under section 10202 of the Patient Protection and Affordable Care Act of 2010 (ACA). As a result of the implementation of BIP, the populations being served by NY Connects have been broadened and new partners added to fully adopt the required No Wrong Door/Single Entry Point structural reform. As is currently required, entities administering and operating NY Connects must adhere to a set of prescribed State Program Standards, which were updated in December 2014 (14-PI-16) to reflect program updates and incorporate requirements related to BIP.

**PURPOSE OF FUNDING:**

The purpose of this funding is to support local programs in the delivery of the original core functions of NY Connects that includes the essential components of I&A, Options Counseling, Application Assistance, Public Education and the continued engagement of Local LTCCs. These funds may also be used to support enhanced functions of NY Connects as specified in the prescribed State Program Standards contained in 14-PI-16. Though closely aligned and sharing the same goals, this is a separate and distinct funding stream from the BIP federal funds available to those Area Agencies on Aging (AAAs) administering NY Connects prior to April 1, 2014.

**BUDGET DIRECTION:**

The NY Connects Allocation Schedule and the NY Connects Program Budget are included in this packet. The Supporting Budget Schedule pages contained within the Program Budget form automatically calculate the total for each section and populate the totals to the Summary Budget. The local NY Connects program budget, as part of the grant application, must be consistent with the Standard Assurances and Program Workplan and adhere to the following:

1. Funds are to be used solely for NY Connects purposes. Local programs are to include personnel costs whenever feasible. It is understood that the fiscal allocation is not intended to cover the total cost of program operations. As a result, a county may individualize its NY Connects budget to include the appropriate operating expenses of its choice.
2. Along with contracts entered into under this program, personnel costs for county agencies other than the AAA are to be listed in the grants and/or consultants section of the budget (e.g. LDSS) (In Supporting Budget Schedule Section 7). Please provide a brief description of the various titles being funded. Include what their role is related to the NY Connects functions and/or administrative tasks associated with supporting the program.

3. For NY Connects staff to attend relevant conferences, indicate specific information about the conference including the type and sponsor and/or title of the conference, the names of staff attending, their role in NY Connects and why it is appropriate to allocate the costs to NY Connects (In Supporting Budget Schedule Section 4).

4. Contract/consultant costs are allowable in the NY Connects budget. Include type of contract and description in the budget. When utilizing a contractor, please list the name of the contractor and dollar amount in Section 7 of the Supporting Budget Schedule and also complete a corresponding budget (Contractor Budget Schedule) for each contractor identified. When completing the Contractor Budget Schedule, funds should be appropriated to the budget categories provided in the form.

5. Advertising and promotional materials in the form of informational brochures and educational materials are acceptable expenses. However, the cost of "give aways" may not exceed \$500 for the Period 10/1/15 to 9/30/16.

6. Public Education and Outreach costs are to be itemized (In Supporting Budget Schedule Section 6). Please provide a brief explanation of the activity and how it relates to NY Connects.

7. Reimbursement for technology or related technology costs associated with building or maintaining local directories of long term care services is not permitted under this funding stream as a result of the development of the State NY Connects Long Term Care Resource Directory. Costs such as personnel to update the resource listings in the State NY Connects Long Term Care Resource Directory will continue to be allowable charges to NY Connects funding.

8. All Information Technology (IT) costs are to be itemized and explained sufficiently to determine that only the IT costs attributable and allocable to NY Connects activities are charged to NY Connects funding. While it may be appropriate for NY Connects funding to pay for some client data reporting software, charging the full cost to NY Connects is not allowable. Client data is used to report on activities carried out under every funding program administered to the AAAs by NYSOFA. Therefore, it is reasonable and expected to see a substantial portion of the client data reporting software costs charged primarily to Title III as well as CSE, EISEP, SNAP, CSI, etc. in amounts commensurate with each program's use of the client level data. AAAs are free to charge as much of the client data software costs to local overmatch (i.e., not required match under any federal or State program). Use of overmatch is left entirely up to AAA discretion. In this context, IT costs for client data software includes such things as the number of licensing user fees, staff titles and associated costs, licensing agreement amount, maintenance costs, reporting upgrading fees, subscription fees, module costs and/or NY Connects website costs not related to the local resource directory (In Supporting Budget Schedule Section 6).

9. Information Technology subscription and licensing user fees associated with the NY Connects program must be allocated so that only the portion of the costs attributable to NY Connects are charged to NY Connects. Indicate the names, job titles and the total allocated cost of expenses (In Supporting Budget Schedule Section 6). Once the statewide client data base system is implemented, no associated IT system costs can be charged to this grant.

10. Allowable costs must be incurred by the AAA during the Program Year period of October 1, 2015 to September 30, 2016. Reimbursements for program year extensions are not permitted.

11. Allowable costs must be incurred by the AAA and paid before reimbursement claims may be submitted to NYSOFA. However, each program year, a NY Connects program may request an advance of up to 25 percent of its grant award, subject to formal notification by NYSOFA of grant approval.

12. **CLAIMING:** It is NYSOFA's policy to withhold 25 percent of the AAA's NY Connects allocation contingent on satisfactory completion of all reporting requirements for the contract period. NYSOFA will release the hold on the 25 percent of the allocation upon satisfactory completion of all reporting requirements for the contract period. At that time, the AAA will be reimbursed for any remaining claims for allowable expenses up to the full amount of the allocation.

**REPORT SUBMISSION:**

The following reports and documents are required for the NY Connects Program for the Period 10/1/15 to 9/30/16. Quantitative data submissions and reports are due the month following the close of the quarter.

**January 31, 2016**

- Quantitative Report
- LTCC meeting minutes and related reports

**April 30, 2016**

- Quantitative Report
- Qualitative Report
- Long Term Care Reform Log
- LTCC meeting minutes and related reports

**July 31, 2016**

- Quantitative Report
- LTCC meeting minutes and related reports

**October 31, 2016**

- Quantitative Report
- Qualitative Report
- Long Term Care Reform Log
- LTCC meeting minutes and related reports
- Revisions to MOUs, policy and procedures, as appropriate

**NEXT STEPS:** To request advance or reimbursement payments under this grant, Area Agencies should utilize the State vouchering procedures and forms issued via 08-PI-03, dated February 1, 2008, replacing the State Aid Voucher with the Claim for Payment form. The Qualitative and Quantitative reports with instructions will be sent under separate cover and a subsequent conference call is planned to explain the reporting requirements.

**PROGRAMS AFFECTED:**

Title III-B

Title III-C-1

Title III-C-2

Title III-D

Title III-E

CSE

WIN

Energy

EISEP

NSIP

Title V

HIICAP

LTCOP

NY Connects

**CONTACT PERSON:** Michael Gunn

**TELEPHONE:** 518-474-6139

**EMAIL:** [Mike.Gunn@aging.ny.gov](mailto:Mike.Gunn@aging.ny.gov)

**NEW YORK STATE OFFICE FOR THE AGING  
GRANT APPLICATION COVER PAGE – 15-PI-22**

**NY Connects Program for the Period 10/1/15 to 9/30/16**

**Program and Budget Period: 10/1/15 to 9/30/16**

Area Agency on Aging: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_)

Contact person: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: (\_\_\_\_)

The Area Agency on Aging agrees to comply with all applicable State and Federal laws and regulations as well as all of the conditions included in its Annual Implementation Plan and this application for funding as approved by NYSOFA.

\_\_\_\_\_ Title: \_\_\_\_\_  
Name of person authorized to enter into agreement  
with the New York State Office for the Aging

\_\_\_\_\_ Date: \_\_\_\_\_  
Signature of person authorized to enter into  
agreement with the New York State Office for the Aging

**NY CONNECTS STANDARD ASSURANCES**  
**Program Period: October 1, 2015 to September 30, 2016**  
**15-PI-22**

The Area Agency on Aging (AAA), as grantee, understands that this Grant Agreement represents the completed grant application of the AAA, as approved by the New York State Office for the Aging (NYSOFA), and the AAA agrees to comply with New York State and Federal laws and regulations that are applicable to this Grant Agreement and to comply with the following requirements that govern the AAA's use of grant funds for the activities funded under this grant.

The AAA agrees that the Program Work Plan and Budget, included in this Grant Agreement as approved by NYSOFA, are part of this Grant Agreement and shall not be modified without the written consent of NYSOFA.

The AAA shall furnish NYSOFA required supportive documentation for any such changes by utilizing the forms and procedures included in 05-PI-09 Modification Procedures for Grant Applications, dated June 15, 2005 and in accordance with any updates thereafter.

1. The AAA agrees to fulfill the reporting requirements of NYSOFA under this Grant Agreement. This includes submitting the required NYSOFA/NY Connects reports (the NY Connects Qualitative and Quantitative reports) within appropriate time frames.
2. The AAA agrees that the Grant Agreement may not be assigned by the AAA or its right, title or interest therein assigned, transferred, conveyed, or disposed of without the prior consent, in writing, of NYSOFA.
3. The AAA agrees to submit Form AC3253-S CLAIM FOR PAYMENT for reimbursement of expenses incurred in the conduct of this Grant Agreement on a quarterly basis.

The AAA will submit to NYSOFA the final voucher for expenses incurred in the conduct of this Grant Agreement as soon as possible and no later than forty-five (45) days after the ending date of the grant period.

4. The AAA agrees that state vouchers submitted for reimbursement of expenses incurred in the conduct of this Grant Agreement will not include any expenses which have been, or will be, reimbursed from other sources (e.g., other state or federal funds).
5. The AAA agrees to use the funds obtained under this Grant Agreement only for items of expense that are applicable to the activities set out in its applicable Program Work Plan(s) and Budget(s). Allowable items of expense shall be reasonable, allocable and necessary to carry out the activities described in the specific Grant Agreement.
6. The AAA agrees to comply with NYS branding, design, logo and tagline requirements relative to NY Connects marketing and outreach to maintain consistency throughout the state. The AAA agrees that any products and public information materials on the work of this program will give due recognition to the fact that the program is supported with funds

from NYSOFA and such recognition will be in the form which is submitted and approved by NYSOFA. If NY Connects Expansion and Enhancement funds are also utilized to produce such materials, then the materials developed for public distribution through this agreement must also include the following attribution and disclaimer: "This document was developed under grant CFDA 93.778 from the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. However, these contents do not necessarily represent the policy of the U.S. Department of Health and Human Services, and you should not assume endorsement by the Federal Government."

7. The AAA agrees to operate the NY Connects program in accordance with the most recent NY Connects State Program Standards and State NWD Operating Protocols and Business Rules.

8. The AAA agrees to work in partnership with the Local Departments of Social Services (LDSS) and State contracted Independent Living Centers (ILCs) and/or other Community Based Organizations (CBOs) serving individuals with physical disabilities; and work in concert with the Office for People With Disabilities (OPWDD) and Office for Mental Health (OMH) Specialized No Wrong Doors (NWDs), plus any other NY Connects partner agencies to fulfill the requirements of the NY Connects Program.

9. The AAA agrees that the NY Connects staff shall participate in all State mandated trainings, as frequently as necessary to perform core functions, and improve, refine and/or update skills to perform those functions.

10. The AAA agrees that the NY Connects I&A Specialist(s) will conduct individualized, person-centered screening utilizing the State-designated screening tool to guide the delivery of long term services and supports options and possible services and supports to meet identified needs. Screening will consist of a preliminary evaluation of the individual's general social, medical and financial status and the availability of informal (e.g., caregiver) and formal (i.e., existing services) supports.

11. The AAA agrees that the NY Connects phone is answered in such a manner to indicate that the caller has reached NY Connects.

12. The AAA agrees the NY Connects program will have signage that provides "visibility" for individuals who may choose to walk-in and meet with someone in person.

13. The AAA agrees to provide and document outreach and public education activities for populations of all ages needing LTSS including the private pay, those eligible for publicly funded services, and minority low-income, frail, vulnerable and limited English proficiency (LEP) populations as identified in NYSOFA's Equal Access and Targeting Policy in 12-PI-08.

14. The AAA agrees to recruit membership for the NY Connects Local Long Term Care Council (LTCC) in collaboration with the local operating agency (if different), Specialized NWDs covering AAA Planning and Services Area (PSA), and State contracted ILC or CBO as well as any other partners. The AAA will maintain a current NY Connects LTCC

Membership Roster which must include contact information, organization and target population(s) represented.

15. The AAA agrees to work with health care systems, including but not limited to hospitals, health homes, medical homes, and other health care providers as well as other service systems, as appropriate, through public education activities, collaboration, and referrals to NY Connects in efforts to support consumers' ability to remain successfully in the most appropriate and least restrictive environment.

16. The AAA agrees to identify long term services, supports and providers within its Planning and Service Area which meets NYSOFA's Inclusion/Exclusion Policy and adds, maintains and updates listings to the Statewide NY Connects Long Term Services and Supports Resource Directory.

17. The AAA agrees to maintain a data collection process in accordance with state requirements.

18. The AAA agrees to maintain an effective NY Connects infrastructure related to purpose and function in all core functions.

19. If the Grantee fails to comply with the terms and conditions of this Grant Agreement and/or with any laws, rules, regulations, policies or procedures affecting this Grant Agreement NYSOFA may terminate the Grant Agreement immediately, upon written notice of termination to the Grantee.

**NY Connects 2015-2016 Workplan – 15-PI-22**

<b>GOAL 1: To engage in planning and collaboration in order to support and improve access to an integrated long term services and supports delivery system.</b>	
<b>Deliverable:</b>	<b>Metric:</b>
1. During the grant period (October 1, 2015 – September 30, 2016), NY Connects staff will assist in streamlining access to services.	<p>a. Description of what assistance NY Connects program staff currently provides with regard to applying for publicly funded benefits and supports (e.g., application assistance for Medicaid, Supplemental Nutrition Assistance Program (SNAP), Low-Income Subsidy for Medicare Prescription Drug Coverage ("Extra Help"), Medicare Savings Program, etc.</p> <p>b. Number of units of application assistance.</p>
2. By September 30, 2016, the Long Term Care Council will meet a minimum of three times to identify gaps in services and supports, duplication, and accessibility issues as well as making recommendations for system improvements and actions to achieve.	a. Meeting minutes from a minimum of three (3) Long Term Care Council meetings.
3. During the grant period (October 1, 2015 – September 30, 2016), the NY Connects program will collaborate with critical pathways to support care transitions and linkages to long term services and supports upon discharge.	a. Description of key elements of referral process with critical pathways and local service providers.

<b>GOAL 2: To sustain and enhance a NY Connects program that serves individuals and caregivers in need of long term services and supports through the operation of core functions in a manner that supports their independence and self-determination.</b>	
<b>Deliverable:</b>	<b>Metric:</b>
1. During the grant period (October 1, 2015 – September 30, 2016), NY Connects will provide objective Information and Assistance about services and supports available to consumers and caregivers to meet their identified needs.	a. Number of units of I & A.
2. During the grant period (October 1, 2015 – September 30, 2016), NY Connects will provide Person-Centered Assistance/Options Counseling, as appropriate, to assist consumers and their caregivers in making informed choices to meet their identified needs.	a. Number of units of Options Counseling. b. Description of two case scenarios of Options Counseling, including a summary of the outcome of the Options Counseling.
3. During the grant period (October 1, 2015 – September 30, 2016), NY Connects will provide Public Education to promote recognition of NY Connects as an access point for comprehensive and objective long term services and supports information and assistance by the public.	a. Units of Public Education.
4. During the grant period (October 1, 2015 – September 30, 2016), staff will participate in training and educational opportunities that enhance their ability to provide up-to-date, comprehensive and objective information and assistance on long term services and supports.	a. Staff Training log.

**GOAL 3: To evaluate visibility, effectiveness of NY Connects in serving individuals and caregivers in need of long term services and supports, as well as the impact of NY Connects on the local system of long term services and supports.**

<b>Deliverable:</b>	<b>Metric:</b>
<p>1. By September 30, 2016, the NY Connects program will evaluate the effectiveness of the provision of Information and Assistance through the Customer Satisfaction Survey Tool provided by NYSOFA or a NYSOFA approved Satisfaction Survey.</p>	<p>a. Summary of the process for administering the Satisfaction Survey.</p> <p>b. Satisfaction Survey findings.</p> <p>c. How the Satisfaction Survey findings will be used to make improvements to the NY Connects program.</p>
<p>2. By September 30, 2016, the NY Connects program in collaboration with its partners and the Long Term Care Council will work to improve the long term services and supports system. This may include new or expanded services and supports, quality improvements, and/or new partnerships and collaborations resulting in easy access to services and supports by individuals and caregivers.</p>	<p>a. Reform Log.</p>

**NY Connects 2015-2016  
SUMMARY BUDGET**

**15-PI-22  
NY Connects  
Allocation Amount**

AAA: \_\_\_\_\_

Program Period: October 1, 2015 - September 30, 2016

	<b>Budget Category</b>	<b>Budget Amount</b>
1	Personnel	
2	Fringe Benefits	
3	Equipment	
4	Travel	
5	Maintenance and Operations	
6	Other Expenses	
7	Contracts and/or Consultants	
8	<b>Total Budget (Sum of Lines 1-7)</b>	
9	<b>State Funds Requested</b>	
10	<b>Local Funds</b>	

Note: Total budget amount on Budget Summary must equal total budget amount on last page.

\* The inclusion of local funding provided in support of NY Connects is optional.

## NY Connects 2015-2016 Supporting Budget Schedule

AAA: \_\_\_\_\_

**1. Personnel** - AAA salaries are listed here. ( DSS and other *county* partners' salaries are listed in the contract section, as applicable.)

	Complete for Each Position (N)ame, (T)itle, (L)ocation	Annual Salary or Hourly Rate*	Hours worked on NY Connects Program per week	Total Hours worked per week	Chargeable to NY Connects		Narrative justification: For each position, provide a brief summary of duties related to each program.
					% of Time	Amount	
1	N						
	T						
	L						
2	N						
	T						
	L						
3	N						
	T						
	L						
4	N						
	T						
	L						
5	N						
	T						
	L						
6	N						
	T						
	L						
7	N						
	T						
	L						
8	N						
	T						
	L						
9	N						
	T						
	L						
10	N						
	T						
	L						
11	N						
	T						
	L						

**TOTAL NY Connects Personnel:**

\*Note: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget (although the actual salary or the hourly rate paid may be different than budgeted).

**2. Fringe Benefits-** Fringe Benefits should be directly proportional to that portion of personnel costs that are NY Connects related. Provide a clear justification if the expenses are not proportionally allocated.

**Fringe Benefit Rate %:** \_\_\_\_\_ **TOTAL Fringe:** \_\_\_\_\_



# NY Connects 2015-2016 Supporting Budget Schedule

AAA: \_\_\_\_\_

<b>6. Other Expenses: List specific item and cost.</b>			
Itemize all Public Education costs. Promotional materials (e.g. informational brochures) are acceptable expenses. The cost of "giveaways" cannot exceed \$500."			
Itemize all Information Technology (IT) costs and provide a justification. This includes such things as the number of licensing user fees, for whom and associated cost, licensing agreement amount, maintenance cost, and/or reporting upgrading fees. An itemized bill from the vendor will be accepted as documentation, as long as it breaks out the costs appropriately.			
			<b>NY Connects Expenses</b>
<b>Public Education:</b>			
<b>Information Technology:</b>			
<b>Other (Specify):</b>			
<b>TOTAL Other Expenses:</b>			
<b>7. Contracts/Consultants:</b> List each contractor or consultant and amount below. A copy of each contract or consultant agreement must be submitted to NYSOFA before reimbursement will be made. Complete and submit a Contractor Budget for each contractor that will receive 25% or more of your grant amount. For Consultants, please list unit rate (e.g., \$25 per hour) and Number of Units in the columns provided. (Note: If you hire a translator, language and/or sign interpreter, include the expense here.) DSS or other county partners' salaries are to be listed in this section.			
Contractor/Consultant and description of service <b>(List them individually)</b>	Unit Rate	# of Units (Consultant)	NY Connects Total
<b>TOTAL Contractors/Consultants:</b>			
<b>8. Total Budget: (numbers 1-7)</b>			
<b>9. State Funds Requested</b>			
<b>10. Local Funds: Describe below</b>			
<b>TOTAL Local Funds:</b>			

**NY Connects 2015-2016**  
**CONTRACTOR SUMMARY BUDGET**

**NY Connects  
Allocation  
Amount**

Contractor: \_\_\_\_\_

Program Period: October 1, 2015 - September 30, 2016

	<b>Budget Category</b>	<b>NY Connects Budget Amount</b>
1	Personnel	
2	Fringe Benefits	
3	Equipment	
4	Travel	
5	Maintenance and Operations	
6	Other Expenses	
7	Contracts and/or Consultants	
8	<b>Total Budget (Sum of Lines 1-7)</b>	

Note: Total budget amount on Budget Summary must equal total budget amount on last page.

**NY Connects 2015-2016  
Contractor Supporting Budget Schedule**

Contractor: \_\_\_\_\_

**1. Personnel** - Contractor salaries are listed here.

	Complete for Each Position (N)ame, (T)itle, (L)ocation	Annual Salary or Hourly Rate*	Hours Chargeable to NY Connects State Funding per week	Total Hours worked per week	Chargeable to NY Connects		Narrative justification: For each position, provide a brief summary of duties related to each program.
					% of Time	Amount	
1	N						
	T						
	L						
2	N						
	T						
	L						
3	N						
	T						
	L						
4	N						
	T						
	L						
5	N						
	T						
	L						
6	N						
	T						
	L						
7	N						
	T						
	L						
8	N						
	T						
	L						
9	N						
	T						
	L						
10	N						
	T						
	L						
11	N						
	T						
	L						
<b>TOTAL NY Connects Personnel:</b>							

\*Note: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget (although the actual salary or the hourly rate paid may be different than budgeted).

**2. Fringe Benefits-** Fringe Benefits should be directly proportional to that portion of personnel costs that are NY Connects related. Provide a clear justification if the expenses are not proportionally allocated.

<b>Fringe Benefit Rate %:</b>		<b>TOTAL NY Connects Fringe:</b>	
-------------------------------	--	----------------------------------	--

# NY Connects 2015-2016 Contractor Supporting Budget Schedule

Contractor: \_\_\_\_\_

<b>3. Equipment:</b> List all equipment items whether purchased or leased. Provide a detailed description for all equipment with a unit cost of \$1,000 or more. For equipment with a unit cost of less than \$1,000, list the items and the total for these items under Miscellaneous Equipment.														
Item and Description	Quantity	Unit Purchase Price	Annual Rental Per Unit	Amount Chargeable to Program										
<b>Miscellaneous Equipment- List Items</b>														
	Enter total cost for misc.													
	<b>TOTAL Equipment:</b>													
<b>4. Travel:</b> List travel costs. Outline reason for travel and indicate the number of staff traveling. (e.g., staff to training, field interviews, advisory group meeting, etc.). Show the basis of computation (e.g., two people to 3-day training at \$X airfare, \$X lodging, \$X food).														
<b>Mileage:</b> _____ miles @ _____ per mile <b>Parking &amp; Tolls</b> <b>Public Transportation:</b> <b>Rental Vehicles (specify destination):</b> <b>Other Travel Costs (Specify):</b>														
<b>Reasons for Travel:</b>														
<b>TOTAL Travel</b>														
<b>5. Maintenance &amp; Operations:</b> In the space provided, detail each expense.														
<b>Equipment Maintenance and Repair:</b> <b>Postage:</b> <b>Printing &amp; Photocopying:</b> <b>Rent:</b>				<b>Program Expenses</b>										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 25%;">Monthly Rent</th> <th style="width: 25%;">% Charge to Prg</th> <th style="width: 25%;">No. of months</th> </tr> <tr> <td>NY Connects:</td> <td></td> <td></td> </tr> <tr> <td>  Location:</td> <td></td> <td></td> </tr> <tr> <td>  Owner:</td> <td></td> <td></td> </tr> </table>	Monthly Rent	% Charge to Prg	No. of months	NY Connects:			Location:			Owner:				
Monthly Rent	% Charge to Prg	No. of months												
NY Connects:														
Location:														
Owner:														
<b>Supplies:</b> <b>Telephone:</b> <b>Utilities:</b>														
<b>TOTAL M&amp;O:</b>														



New York State Office for the Aging  
 NY Connects - Local Assistance Program Allocations  
 Program year 10/1/15 to 9/30/16  
Allocation Schedule

15-PI-22

Area Agency  
On Aging

10/01/2015 - 09/30/2016

Albany	\$62,141
Allegany	43,289
Broome	59,348
Cattaraugus	48,177
Cayuga	44,685
Chautauqua	57,253
Chemung	45,384
Chenango	43,987
Clinton	44,685
Columbia	43,987
Cortland	43,289
Delaware	43,987
Dutchess	60,046
Erie	175,947
Essex	43,289
Franklin	50,969
Fulton	43,987
Genesee	43,987
Greene	43,987
Herkimer	43,987
Jefferson	45,384
Lewis	42,591
Livingston	43,987
Madison	43,987
Monroe	162,681
Montgomery	43,987
Nassau	177,344
Niagara	60,046
Oneida	60,744
Onondaga	154,304
Ontario	44,685
Orange	63,537
Orleans	43,289
Oswego	0
Otsego	43,987
Putnam	44,685
Rensselaer	0
Rockland	0
St. Lawrence	56,555
Saratoga	57,951
Schenectady	57,253
Schoharie	43,289
Schuyler	42,591
Seneca	0
Steuben	45,384
Suffolk	180,837
Sullivan	44,685
Tioga	43,289
Tompkins	43,987
Ulster	58,650
Warren	85,880
Washington	43,987
Wayne	44,685
Westchester	168,267
Wyoming	43,289
Yates	42,591
New York City	0
Seneca Indian Res	0
St Regis Indian Res	24,437
To Be Determined	60,744
Total Local Assistance	\$3,350,000