

**ElderSource**  
**Planning and Programs Committee Agenda**  
**February 17, 2022**  
**11:00 AM**

I. Old Business

A. Minutes

- December 16, 2021

B. ElderSource Programs

- Programs Report
- Community Services Report
  - SHINE
  - HelpLine

II. Updates

A. 2023 – 2025 Area Plan Development Update

B. Needs Assessment Update

**Programs Committee Minutes**  
**10688 Old St Augustine Rd**  
**Thursday December 16, 2021**  
**11:00 AM**  
**Via Zoom**

**Present**

Dr. Sandy Robinson - Chair  
Barbara Greene  
Dr. Lauri Wright  
Grady Williams  
Ray Parkhurst  
Elizabeth Gunn

**Staff**

Linda Levin, CEO  
James Lee, CFO  
Janet Dickinson, Planner  
Terika Scatliffe, Program Compliance Manager  
Sherry Holmes, Administrative Assistant

**Absent**

Darryl Banks  
Joseph Francis-Zimmerman  
Vivile Dietrich

**Meeting Called to Order**

Dr. Sandy Robinson called the meeting to order at 11:03 AM.

**Approval of Minutes**

A motion to approve the October 21, 2021 minutes was made by Grady Williams and seconded by Dr. Lauri Wright. Motion was unanimously approved.

**Introduction to New Leadership**

Linda Levin, CEO informed the group that ElderSource did a small reorganization and Nancy Tufts has moved over to a new position at the agency to help develop and launch programs for caregivers. She is now working with Tameka Gaines Holly and Kyle Sanchez. This was an opportunity to streamline and combine programs with Fiscal and it is now the Fiscal and Program Compliance Department. James Lee is over this area and will be participating in meetings. Terika Scatliffe, has been promoted to Program Compliance Manager. Terika has taken on the work related to programs and services under contract with providers. Janet Dickinson, Planner, is reporting to Tameka Gaines Holly. Dr. Robinson welcomed Terika to a larger role and thanked James for his participation. Elizabeth Gunn, Board President, was recognized and thanked for participating in today's meeting.

**Programs Report**

Terika Scatliffe, Programs Compliance Manager reviewed the Programs Dashboard with the committee:

- APS remains consistent.
- Expenditures for General Revenue remain consistent as well. Providers are adding clients to help with spending down.
- Title Transfers were requested to assist with projected deficits in the meals program.
- Allocations have been received for American Rescue Plan Act.

**American Rescue Plan Act (ARPA) /Emergency Home Emergency Assistance for the Elderly (EHEAP)**

Terika Scatliffe informed the committee that we have received allocations for ARPA EHEAP, page 6 of meeting packet shows the breakdown for each provider. This information has been shared with the providers and they have made us aware of how they will allocate their funding. Clay County has declined their allocation as they do not think they would be able to use it all. Those funds are being redistributed to another County. Clay County will still participate in the three year EHEAP contract but not the ARPA EHEAP. ElderSource has sent this information to the Department of Elder Affairs (DOEA) and we are awaiting our contract.

**Motion**

A motion to accept the American Rescue Plan Act (ARPA) proposal for EHEAP allocations as presented with Clay County declining funds was made by Lauri Wright and seconded by Ray Parkhurst. Motion passed unanimously.

**Surplus Deficit**

Terika Scatliffe, Programs Compliance Manager, briefly reviewed the programs with the committee.

*Alzheimer Disease Initiative (ADI)*

Providers are adding clients and increasing services to lower our current surplus. There are no concerns with spending out funding.

*Community Care for the Elderly (CCE)*

Providers are adding clients and increasing services to lower our current surplus. There are no concerns with spending out funding.

*Home Care for the Elderly (HCE)*

The program is within the 1% allowance of the contract. There are no concerns with spending out funding.

*Local Service Programs (LSP)*

The program is within the 1% allowance of the contract. There are no concerns with spending out funding.

*Respite for Elders Living in Everyday Families (RELIEF)*

The program is doing very well and is within the 1% for the PSA.

*Nutrition Services Incentive Program (NSIP)*

No concerns with spending out.

*Emergency Home Energy Assistance Program (EHEAP)* No concerns with spending out.

*Coronavirus Consolidated Appropriations Act (CCAA)* No concerns with spending out.

**Older Americans Act (OAA) Programs**

This report reflects where our providers are with spending. Terika informed the group that we were waiting on the title transfers during this time and these numbers are composed of both surplus and deficits and will even out. (see attach report)

- Title IIIB (*Support Services*): Waiting to receive title transfers from DOEA, no concerns with spending out
- Title IIIC1 (*Congregate Meals*): Waiting to receive title transfers from DOEA, providers overspent
- Title IIIC2 (*Home Delivered Meals Programs*): Projecting to be overspent
- Title IIIE (*Care Giver Support Program*): Waiting to receive title transfers from DOEA.

Dr. Robinson questioned the decreased in spending from 2019 to 2021 with Title IIIB. Terika explained that we do expect an increase in expenditures as the providers were given different ideas and resources to try and adjust this. Linda Levin noted that they had a lot of money come in due to COVID and Senior Centers and Adult Day Cares were closed. Terika noted that title transfers also had a role in this. Dr. Robinson asked if this is happening across the nation with this particular funding. Linda noted that this is being seen across Florida and across the nation. People are overwhelmed by the funding. A lot of people came off the wait list during this time frame. Linda noted workforce issues where-, providers were losing staff, not able to replace them and not able to deliver services. Dr. Robinson asked if we had the ability to move money around if some providers are not spending. Terika responded that we do have a process to do that.

### **Veterans Directed Care Program**

There are currently 70 active Veterans and 13 in process. James Lee noted that the Veterans Administration Medical Center in Gainesville is trying to get our Veterans count up to 80. We also have Veterans from the VA Medical Center in Orlando.

### **No Wrong Door**

Terika acknowledged these programs funded through the ADRC No Wrong Door Grant:

- GetSetUp currently has 48 seniors.
- Uniper has 274 seniors.
- Phone System Avaya has assisted with smoother interactions between ElderSource and other PSAs throughout the State.
- Internet/Mifis staff continues to use this as some individuals have low bandwidth.
- Chat functionality is available during Helpline hours.
- Volunteer Database is up.

COVID Vaccination Call Downs have started and we are still working on this.

This contract is spent out.

Florida Blue Foundation Funded – TCARE a three year grant funded through the Florida Blue Foundation and we are allowed to carry forward the funds.

Linda Levin noted that the DOEA went live with the new eCirts database and the providers are having to transition to using this new format from the old State database. This has impacted Renee Knight's staff and soon James's staff will be impacted as well when it comes to billing and payments. Staff are currently working between three systems to eventually get to one.

### **ADRC Report**

Renee Knight reviewed the report with the committee. The report detailed information on the following:

- Helpline
- Intake & Screening Team
- Medicaid Eligibility Team
- SHINE/SMP/MIPPA

### **Area Plan**

Janet Dickinson, Planner updated the committee on how she will be preparing for the 2023-2025 Area Plan. Janet noted that every three years a new Area Plan is completed and between those years we do an update. A part of the process is informing the Advisory Council, Programs Committee and the Board of our actions for completing the Plan. The full Area Plan is due the last day of September 2022. Public hearings will begin in mid-March through mid-May 2022. Janet reviewed the Area Plan Activities Timeline in detail (see attach report). Sherry Holmes, Administrative Assistant will send out a copy of the 2023-2025 Area Plan Activities Timeline to members of this committee.

### **Needs Assessment**

Janet Dickinson, Planner reminded the committee they selected the Health Planning - Council of Northeast Florida (HPCNEF) to conduct the Needs Assessment. Their Plan is broken up into different sessions where they will hold monthly meetings with points of contact to discuss how things are progressing and to get staff's input on the survey, focus groups and other things. They will be gathering information, doing profiles and doing an extensive literature review. They will also conduct 14 listening sessions to garner how and why the community feels about older adult issues. A regional survey will be conducted on a variety of topics. The timeline and anticipation for completion is by the end of May. This committee will be updated on the progress as we go along. Dr. Robinson told the group that this will tie into our DEI work and our upcoming strategic planning. Dr. Robinson thanked Terika and Janet for their updates and James for his work.

There was no further business for discussion and the meeting was adjourned.

**Meeting Adjourned at 12:02 PM**

**Minutes prepared by Sherry Holmes, Administrative Assistant**

APS High Risk Referrals remain consistent.

Monthly expenditures for State General Revenue contracts has decreased from November and December. This is to be expected as the Providers work to close out their 2021 OAA grants by December 2021.

Providers have received both their Title Transfer and program increase OAA amendments.

The American Rescue Plan contract between us and DOEA has been signed. Currently provider contracts are being completed to be sent out for execution and implementation.

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## Surplus Deficit

Program	Contract Amount	Projected S/D (Straight Line Projection)	Projected S/D (Based on current monthly spending)	Projected S/D (Based on Average Monthly Spending)	Comments
ADI	\$2,586,930.00	\$384,237.90	\$663,268.55	\$380,520.04	Providers currently are putting plans into place to add clients and increase services to lower our current surplus. No concerns with spending out at this time.
CCE	\$6,609,594.00	\$1,890,526.52	\$2,022,731.91	\$7,298,709.03	Providers currently are putting plans into place to add clients and increase services to lower our current surplus. No concerns with spending out at this time.
HCE	\$790,263.01	\$50,190.25	\$9,470.45	\$41,049.80	Sixth month of contract year. No concerns at this time.
LSP	\$400,000.00	\$46,028.10	\$31,055.45	\$46,028.10	Sixth month of contract year. No concerns at this time.
RELIEF	\$334,313.00	(\$22,829.94)	(\$111,053.63)	(\$22,829.94)	Sixth month of contract year. Watching expenditures closely get closer to contract goals.
OA3B	\$4,398,988.47	\$199,173.67	\$199,273.67	\$199,173.67	Contract has been completed. Received Title Transfers and contract increases from the Department. Currently making internal transfers to closeout grant to 100%.

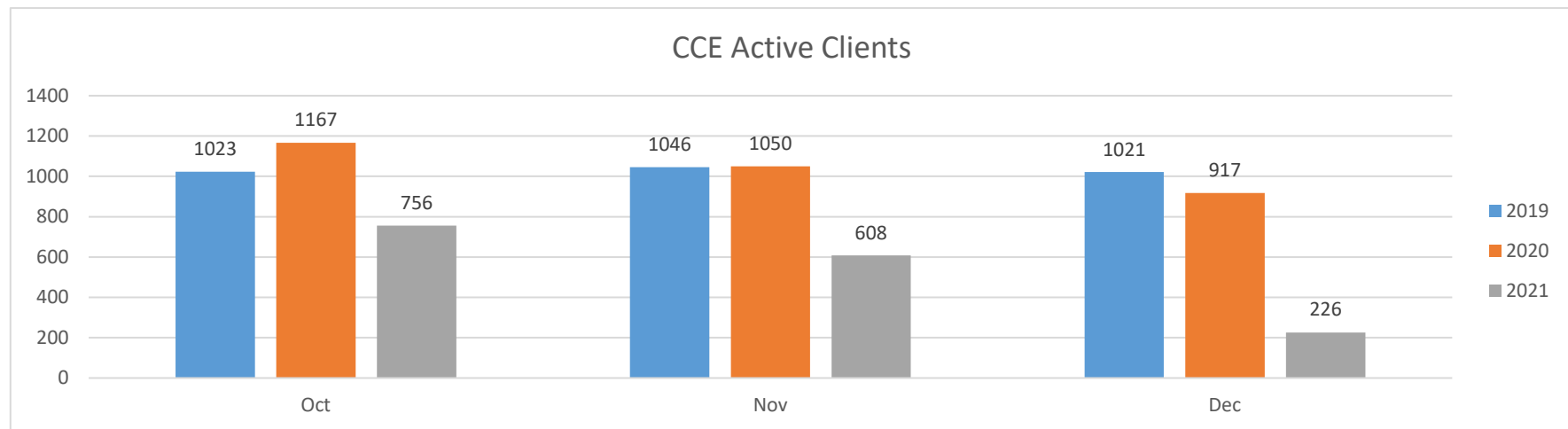
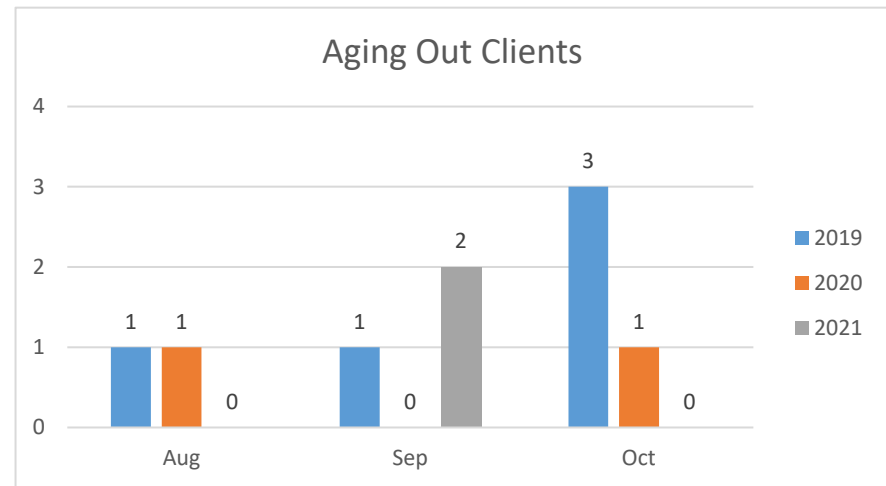
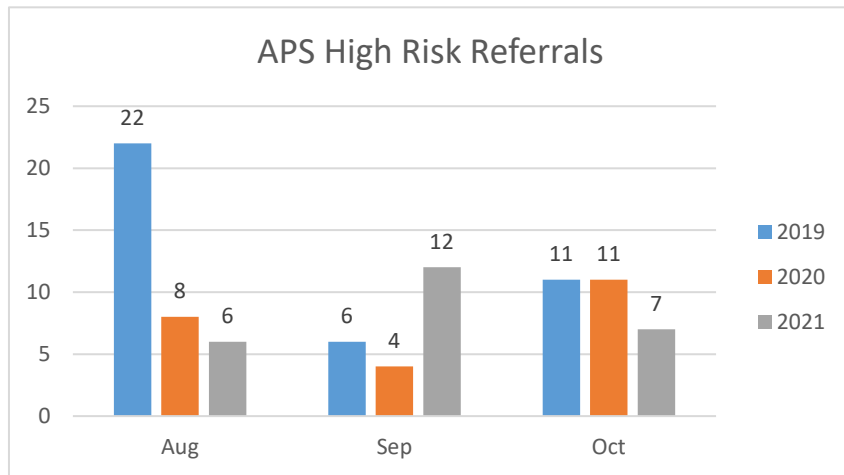


O3C1	\$1,896,772.87	\$204,325.30	\$204,325.30	\$204,325.30	Contract has been completed. Received Title Transfers and contract increases from the Department. Currently making internal transfers to closeout grant to 100%.
OA3D	\$196,232.40	\$0.00	\$0.00	\$0.00	Contract has been completed to 100%.
O3C2	\$2,274,728.27	\$128,243.22	\$128,243.22	\$128,243.22	Contract has been completed. Received Title Transfers and contract increases from the Department. Currently making internal transfers to closeout grant to 100%.
NSIP	\$537,311.58	\$90,572.94	\$90,572.94	\$90,572.94	Contract has been completed. Received Title Transfers and contract increases from the Department. Currently making internal transfers to closeout grant to 100%.
OA3E	\$1,282,260.82	\$334,609.82	\$334,609.82	\$334,609.82	Contract has been completed. Received Title Transfers and contract increases from the Department. Small surplus is expect by closeout.
EHEAP	\$447,684.00	\$309,650.31	\$80,620.40	\$27,740.94	No concerns with spending out.
CCAA	\$1,525,083.00	\$1,601,739.40	\$360,468.56	(\$326,001.82)	No concerns with spending out.

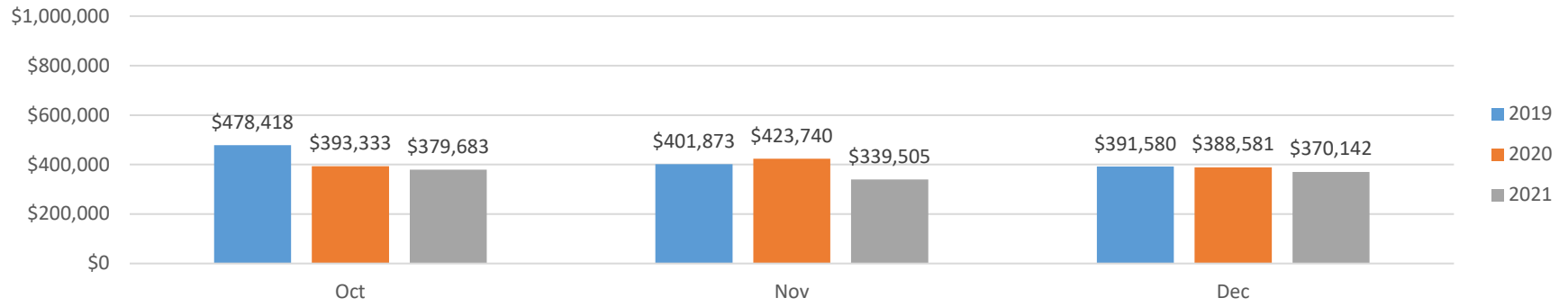


### Community Care for the Elderly

The primary purpose of the CCE program is to prevent, reduce or delay premature or inappropriate placement of older persons in nursing homes and other institutions. Additional purposes of the CCE program are to provide the following: 1) a continuum of services alternatives to meet the diverse needs of older people; access to services for elder most in need; and a local resource that will coordinate delivery of services for the frail elder/caregiver.

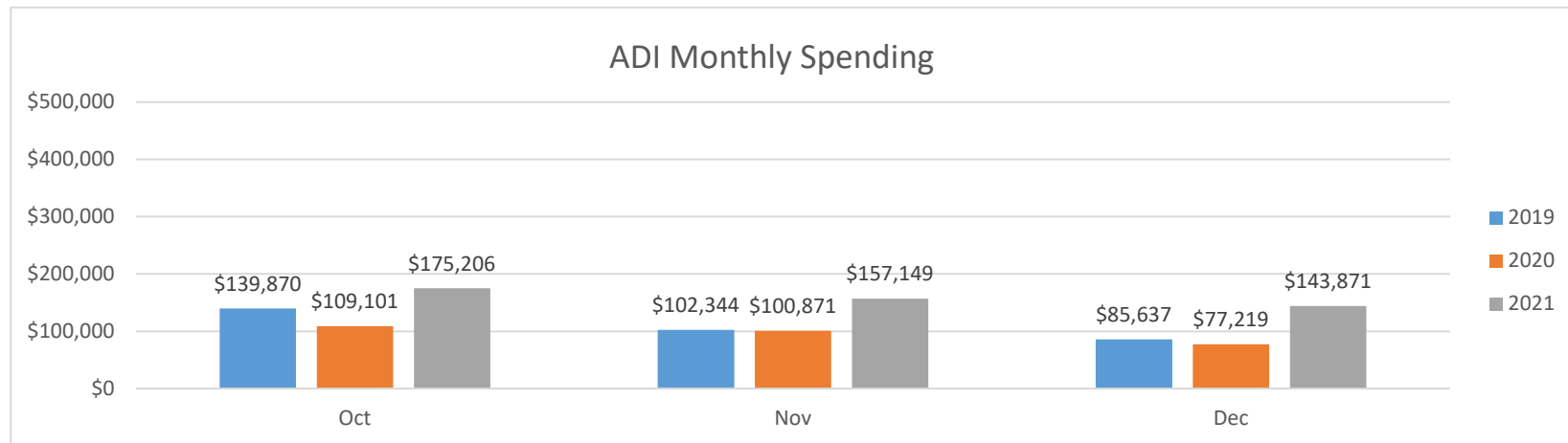
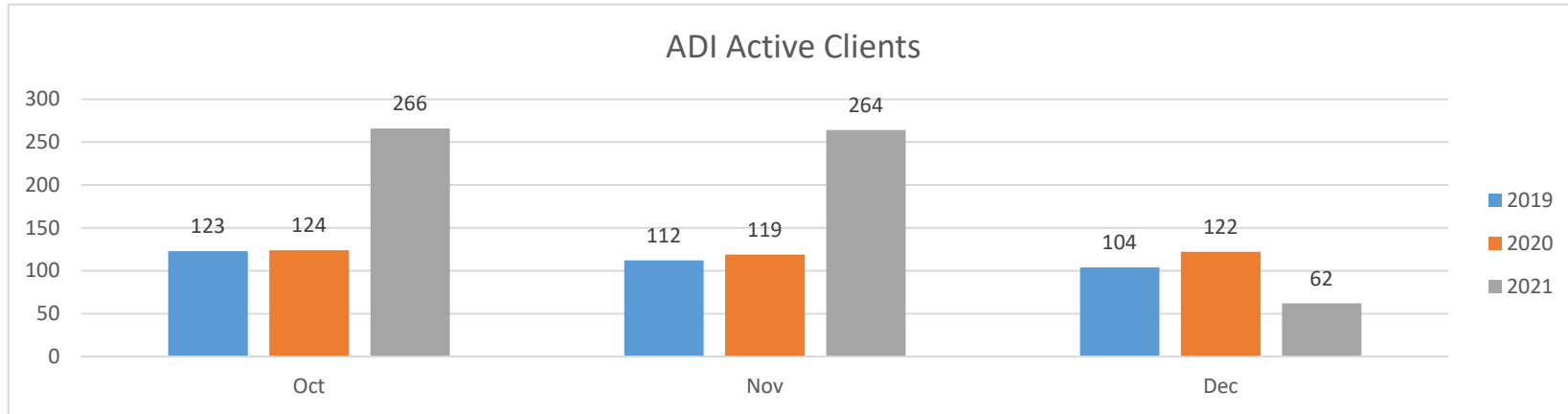


### CCE Monthly Expenditures



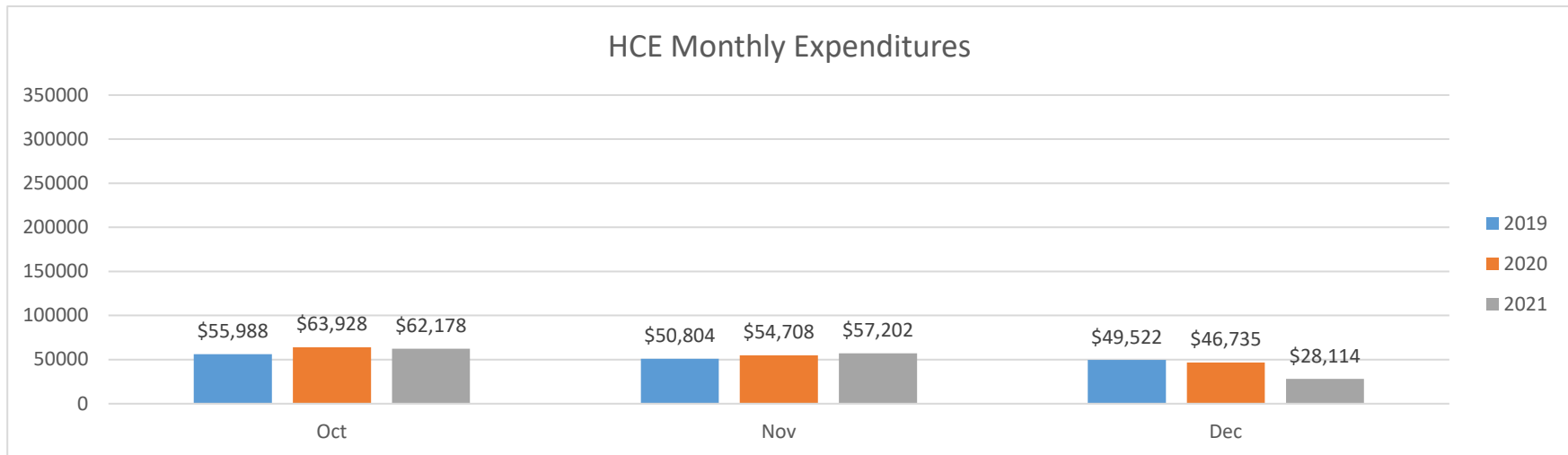
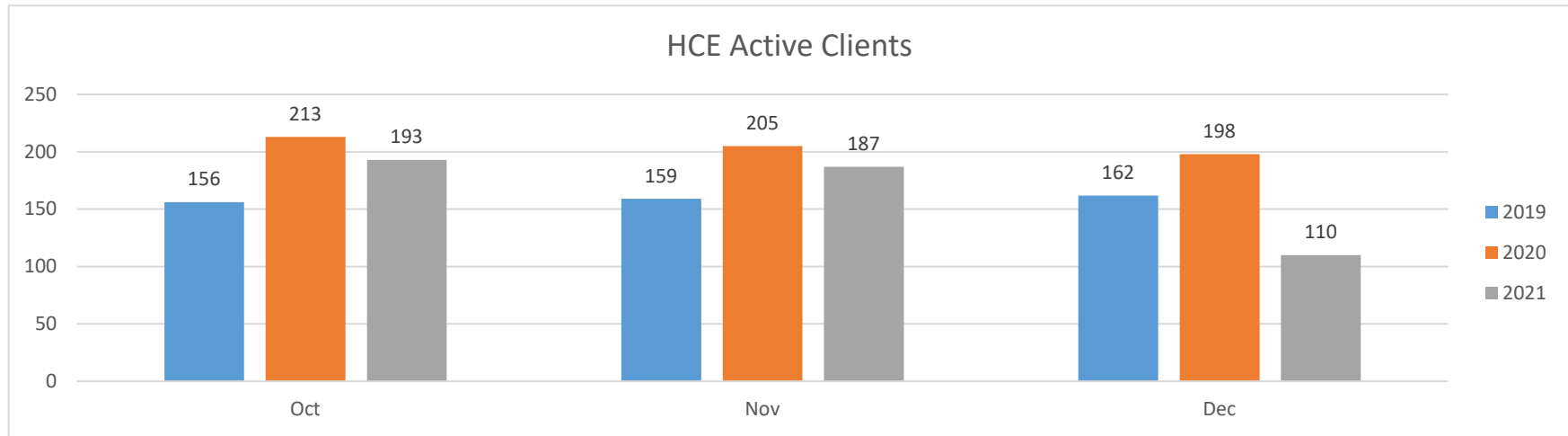
### Alzheimer's Disease Initiative (ADI)

The purpose of the ADI is the following: to address the special needs of clients with Alzheimer's Disease (AD) or related memory disorders, as well as their caregivers; and to find through research the cause, treatment and ultimately a cure for AD or related memory disorders.



## Home Care for the Elderly

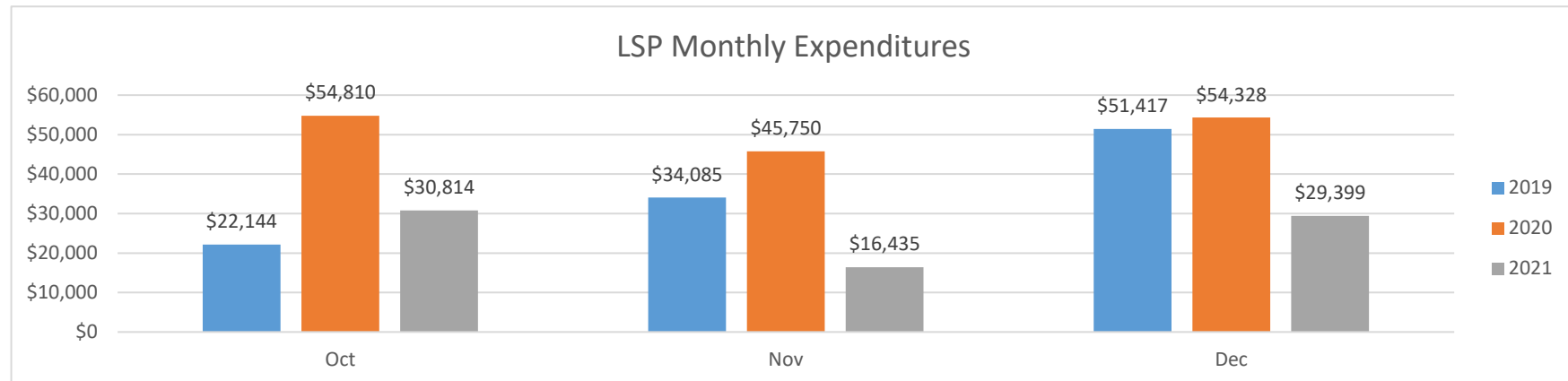
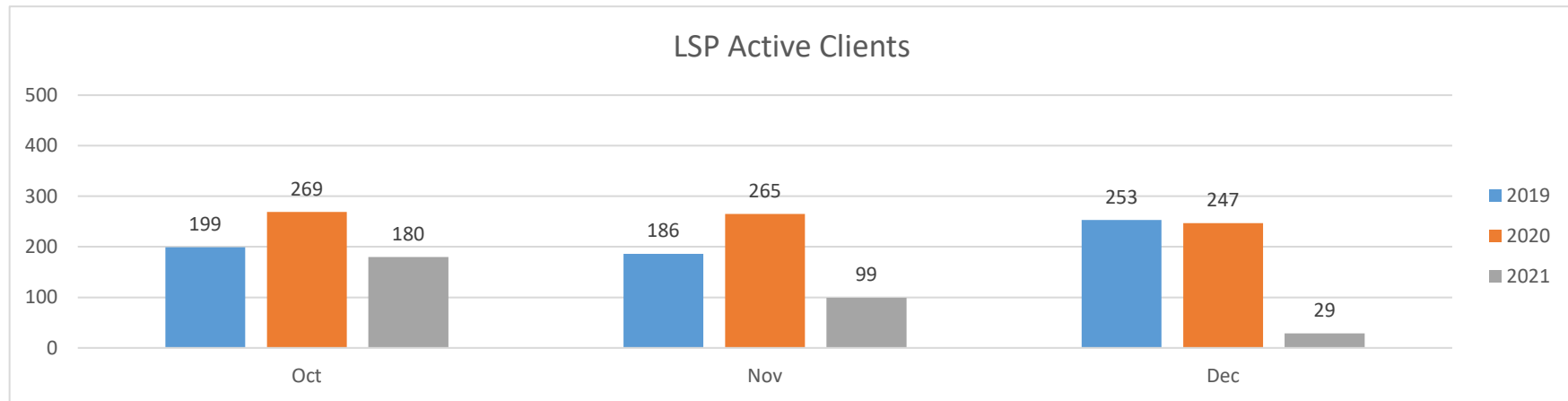
The purpose of the HCE Program is to encourage the provision of care for elders in family-type living arrangements in private homes as an alternative to nursing homes or other institutional care settings.



### Local Service Programs

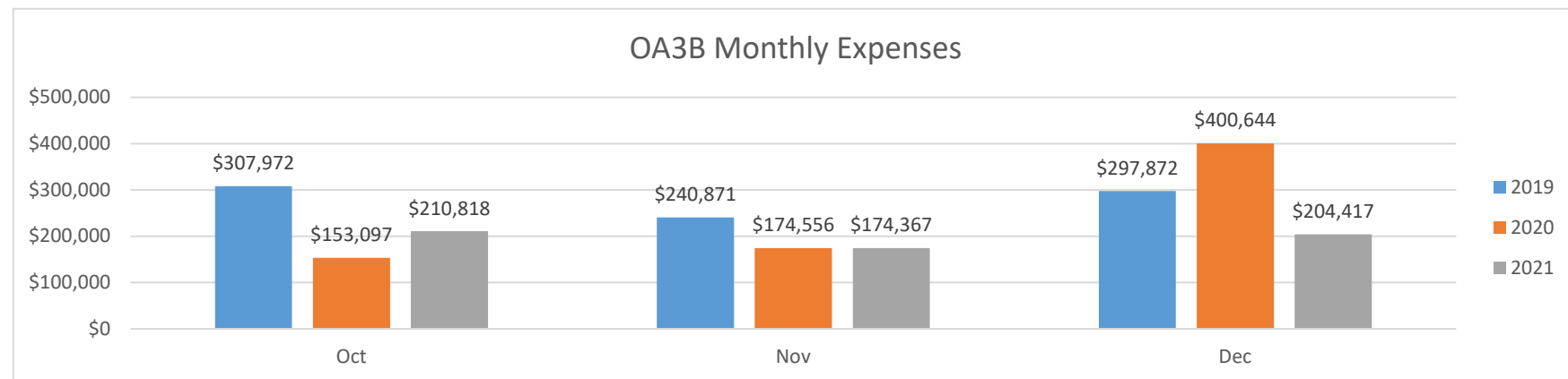
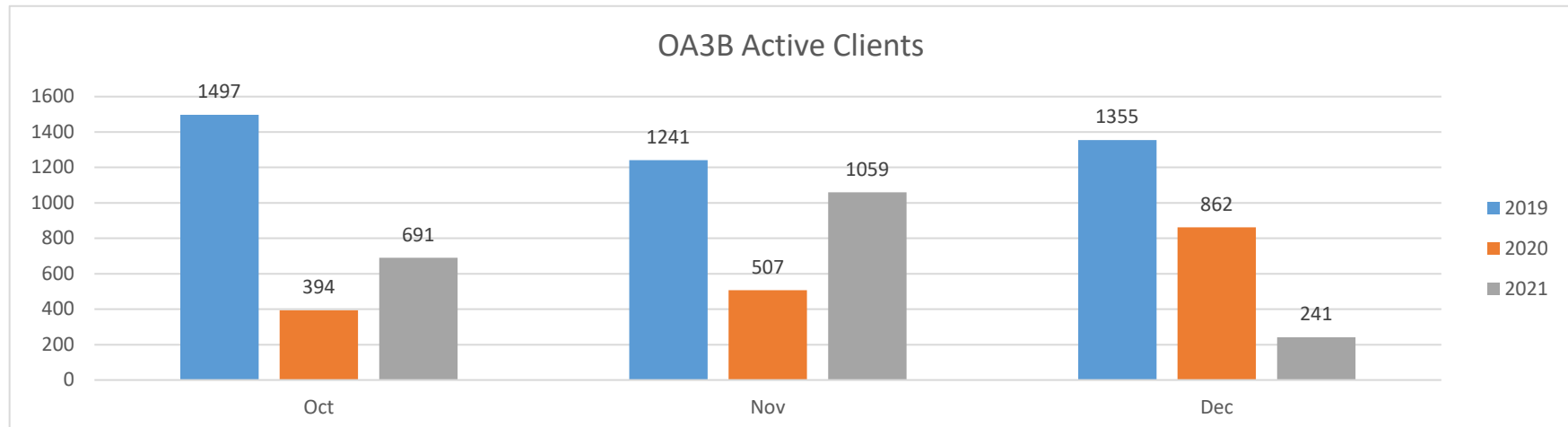
The LSP provides community-based services to preserve elders' independence, support caregivers, and target at-risk persons. Through the provision of meals or other services authorized by proviso, the LSP assists elders to live in the least restrictive environment that meets their needs. In PSA 4, we contract with the 7 Lead Agencies to provide home delivered meals for individuals who would otherwise remain on a wait list. We also contract with Jewish Family and Community Services to assist Holocaust Survivors.

There is no wait list for these programs. The home-delivered meal program works off of the O3C2 wait list.



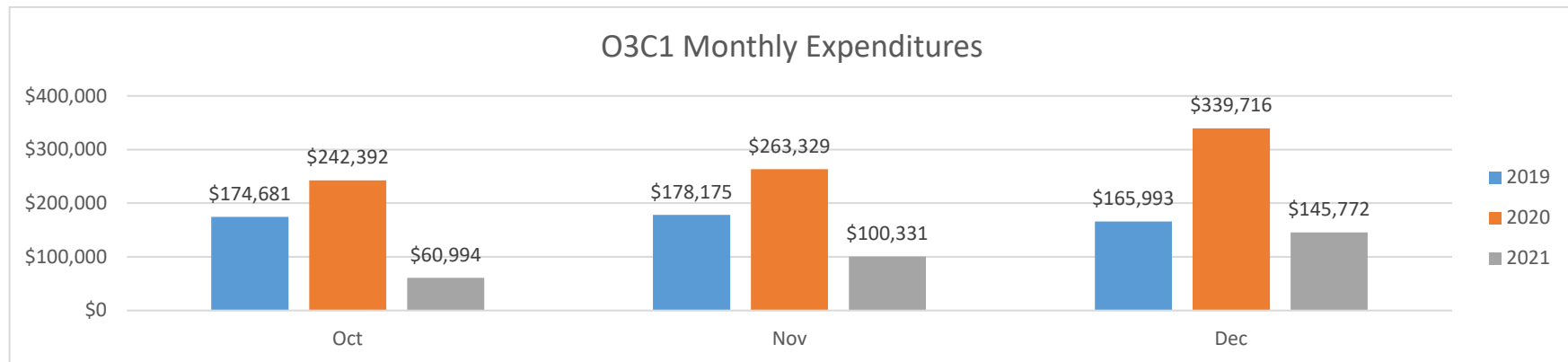
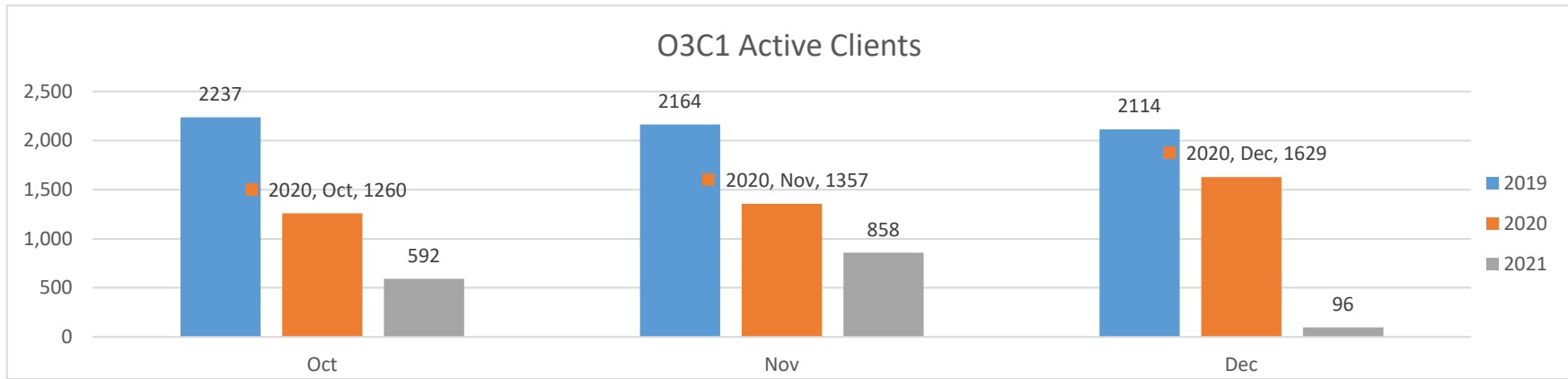
### Older Americans Act Title IIIB

Title IIIB supportive services deliver the following three categories of service; access services such as transportation, outreach, information and referral and case management; in-home services such as homemaker, home health aide, home repair, companionship, telephone reassurance, chore, respite and other supportive services for families of elderly victims of Alzheimer's disease and other neurological and organic brain disorders of the Alzheimer's type; and legal assistance related to income, health care, long term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.



### Older Americans Act Title IIIC1

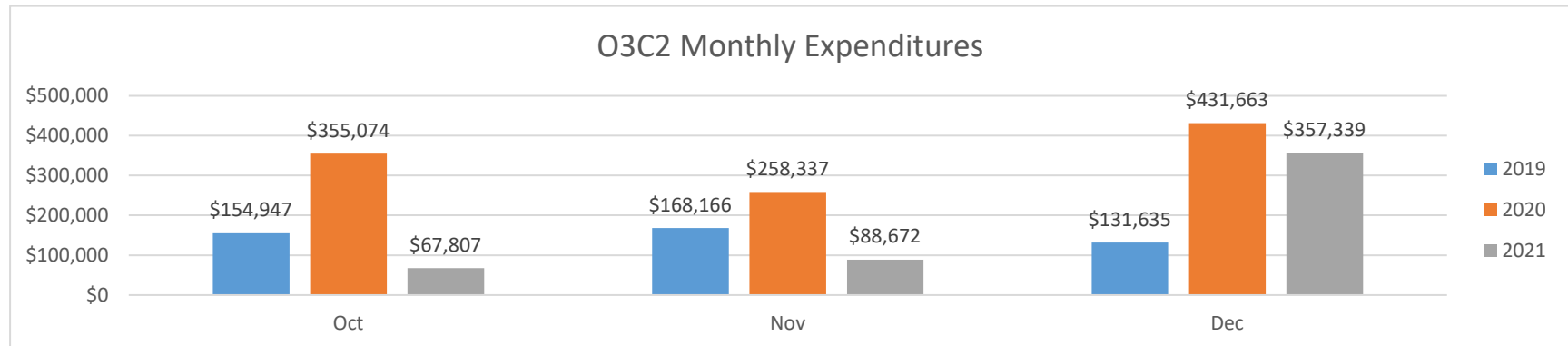
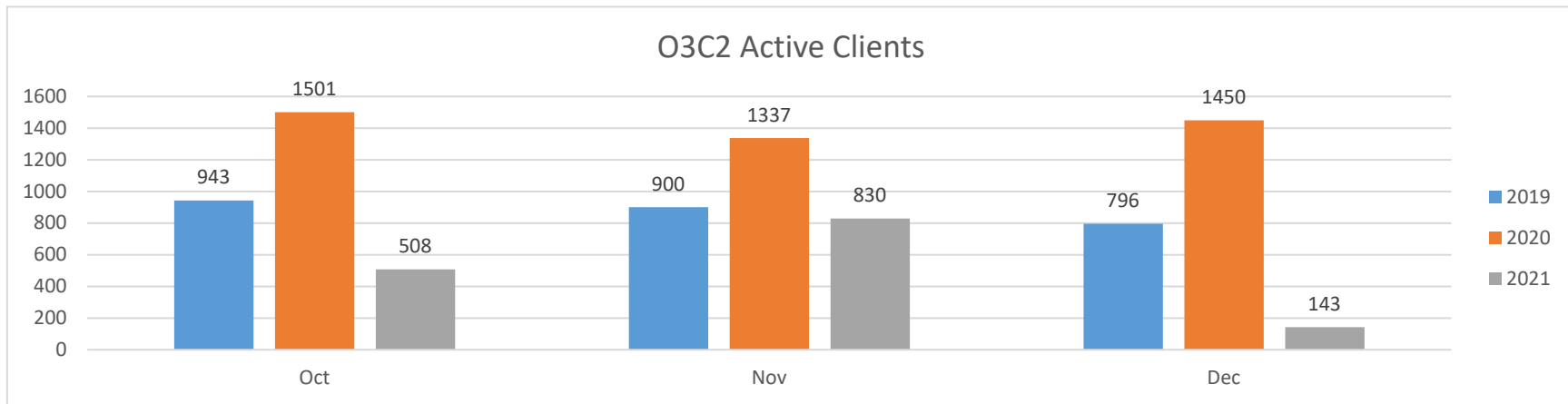
The purpose of Title IIIC is for the provision of nutrition services that assist older individuals in Florida to live independently, with better health through improved nutrition and reduced isolation. Nutrition services are provided through programs coordinated with nutrition-related supportive services and include the procurement, preparation, transport, and service of meals; nutrition education; nutrition screening; nutritional assessment, and nutrition counseling. In making these awards, the AAA must ensure that congregate and home-delivered meals are provided to eligible individuals based on their assessment of need. IIIC1 is primarily for congregate meal settings. IIIC2 is primarily for home-delivered meal programs. Currently, there is no wait list for this program.





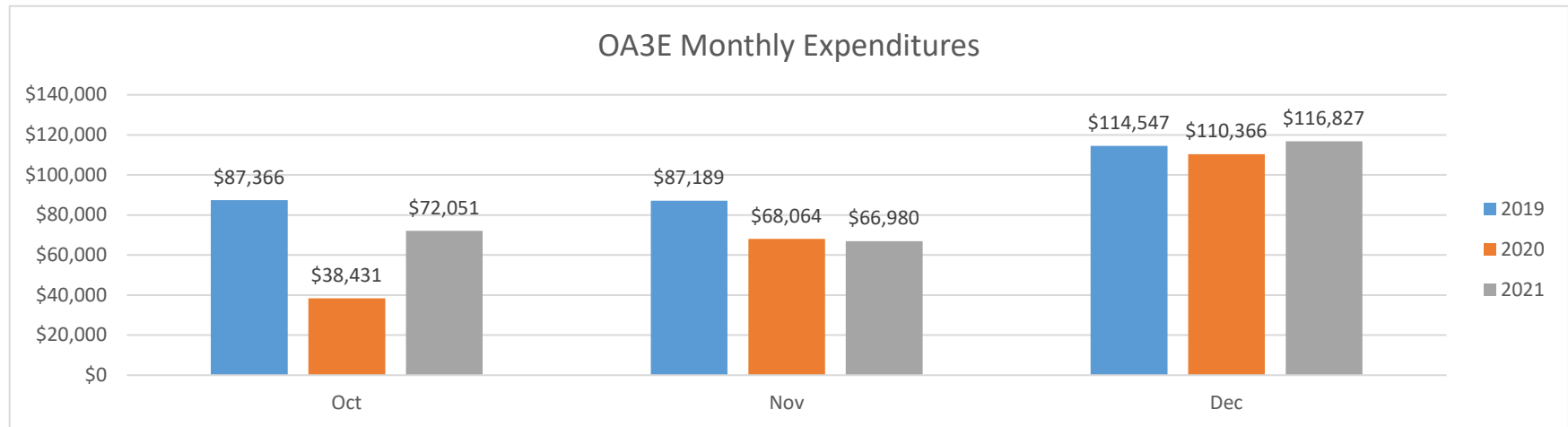
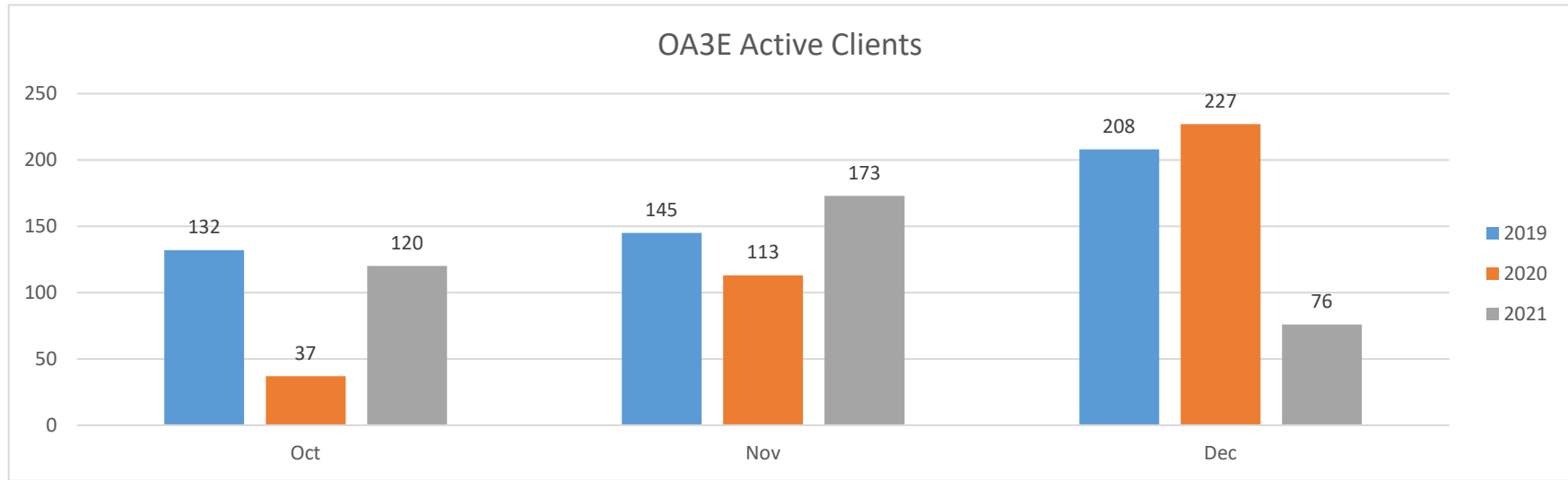
## Older Americans Act Title IIC2

The purpose of Title IIC is for the provision of nutrition services that assist older individuals in Florida to live independently, with better health through improved nutrition and reduced isolation. Nutrition services are provided through programs coordinated with nutrition-related supportive services and include the procurement, preparation, transport, and service of meals; nutrition education; nutrition screening; nutritional assessment, and nutrition counseling. In making these awards, the AAA must ensure that congregate and home-delivered meals are provided to eligible individuals based on their assessment of need. IIC1 is primarily for congregate meal settings. IIC2 is primarily for home-delivered meal programs.



### Older Americans Act Title III E

The purpose of Title III E is to provide multifaceted systems of support services to the following individuals; family caregivers and grandparents or older individuals, 55 years of age or older, who are relative caregivers of children not more than 18 years old or individuals with disabilities.



### Veterans Directed Care Program

The Veteran's Directed Care Program is a program through the Veterans Administration which allows veterans to remain in their home and direct their own services and supports. Veterans are referred through the VA Offices in Gainesville and in Orlando. "In Process" Veterans represent new Veterans who are added to the Program.

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Month/Year	In Process	Number of Active Veterans
Oct-21	13	70
Nov-21	13	70
Dec-21	9	74

Month/Year	In Process	Number of Active Veterans
Oct-20	3	58
Nov-20	3	57
Dec-20	2	57

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### No Wrong Door

The purpose of this program is for ElderSource to review and assess functions, services and activities for unmet needs and a growing demand for new needs due to COVID-19. These funds are used for targeting and addressing needs due to COVID-19.

Project Name	Name and Description of Project or Activity
GetSetUp	In the process of getting program transitioned into our ARPA grant. Clients currently on hold.
Uniper	Currently 268 seniors with limited interactions outside of their homes due to COVID have been enrolled to continue to provide stimulation during this time.
Phone System	During COVID, staff have been working remotely, and will continue to work remotely. A new communication system has been purchased and is currently in operation. With staff working remotely, this new phone system has assisted with smoother interactions between us and other PSAs across the state as we continue to combat the pandemic.
Internet/Mifis	Connectivity has been challenging for some staff while working remotely. Staff continue to use Mifis as needed for those individuals with low bandwidth.
Chat	The Chat functionality is available during ADRC Helpline hours through the ElderSource website.
Volunteer Database	This grant will pay for the development of a customized database for volunteer programs.
COVID Vaccination Call Downs	A postcard is being sent out to individuals who are on a wait list for services advising them to contact their local health department or Emergency Operations Center for information on the vaccine. Homebound individuals are encouraged to contact ElderSource so that their information can be provided at the state to assist with planning for homebound vaccinations.

**Florida Blue Foundation Funded - TCARE**

The Tailored Caregiver Assessment and Referral System (TCARE) program is an evidence based program that creates individualized care plans, helping to improve efficiency in the coordination and delivery of critical resources to caregivers. This care management protocol is designed to support family members who are providing care to older adults, especially those with chronic or acute health conditions. By supporting caregivers, older adults will also benefit from resources and supported to remain living independently. In addition to connecting caregivers to available resources such as assistive technology, in-home support, meals, education, adult day care and informal support; the program also assesses the need for mental health services and connects with available community providers. In fact, the assessment itself is a guided counseling session that is a behavioral intervention—not merely a question and answer session. TCARE reduces burnout by identifying the goal, strategy, and resources needed to close the gap between how a caregiver self-identifies and how they clinically measure. A Person Centered Care plan is generated with defined goals and strategies with well-targeted interventions addressing the root causes of burnout, stress and isolation.

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# of Providers	Total Contract
2	\$383,333.00

Contract Cycle:	January 2021 - January 2025
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## ADRC Summary February 2022

**New Statewide Data Platform:** On December 14<sup>th</sup>, DOEA went “live” with their new platform called eCIRTS. The platform took the place of the two platforms that the staff used to document calls and client activities such as screenings. The new processes are challenging for all ADRC staff. At this time, there are no management reports and very few accurate client reports.

### **HelpLine**

The HelpLine is fully staffed. eCIRTS has slowed down the call documentation process resulting in longer talk time and longer hold time.

### **Intake & Screening Team**

The intake and screening team is responsible for completing the telephone assessment with clients and placing them on appropriate waitlists. The team is recruiting to fill two open positions and efforts are underway to fill the positions. Three staff who were hired in late 2021 are now screening/assessing clients. The appointments are scheduled out 30-35 days and there is a backlog of annual reassessments due. To address the backlog, many of the staff members are working overtime to address the backlog of annual assessments. eCIRTS has also slowed down the screening/documentation process for the Intake & Screening Team.

At this time, eCIRTS does not have the reports available to complete the ADRC dashboard.

### **Medicaid Eligibility Team**

This team is responsible for helping clients through the Medicaid long-term care eligibility process. Recruitment efforts continue to fill the two open positions. Team members are challenged with the migration to eCIRTS and learning the client record documentation process.

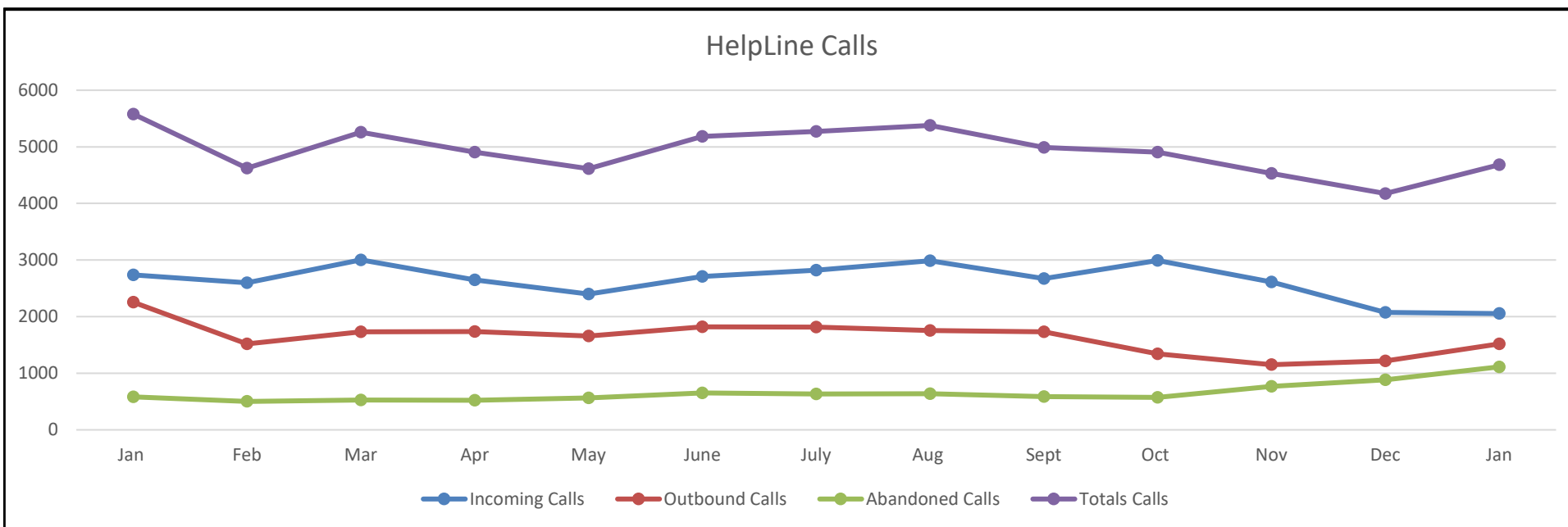
### **SHINE/SMP/MIPAA**

The SHINE, MIPPA and SMP grants were on target and met all contract benchmarks for December and January.

**Workforce Challenges:** The Intake & Screen and the Medicaid Eligibility teams have open positions.

The ADRC HelpLine The Aging and Disability Resource Center (ADRC) HelpLine is the place to start for help if you are a senior, an adult living with a disability or a caregiver. ElderSource Customer Service Specialists are available to listen to client concerns and are trained to help them access local agencies, services and programs. They work with the clients to explain what resources are available, provide information about Medicaid programs for elders and adults with disabilities. The HelpLine processes the referrals for the assessments, schedules the assessment appointments and makes appointment reminder calls the day before the appointment. In addition, the HelpLine processes referrals for the SHINE program.

**Monthly Analysis:** January 2022 - The HelpLine is fully staffed. The call volumes remain very close to the previous months. On December 14th, the HelpLine changed from documenting calls in Refer database to the DOEA statewide system called eCIRTS. Staff are adjusting the new database but documenting calls is taking longer. At this time, eCIRTS does not have reports available to track referrals or other client records.



\* ElderSouce changed phone systems in February 2021 with changes to the reports.

Calls Answered  
4,685

InBound Calls  
2,054

OutBound Calls  
1,518

Call Wait Time  
2:13

Abandonment  
24%

Voicemails  
536

MAC Referrals  
-

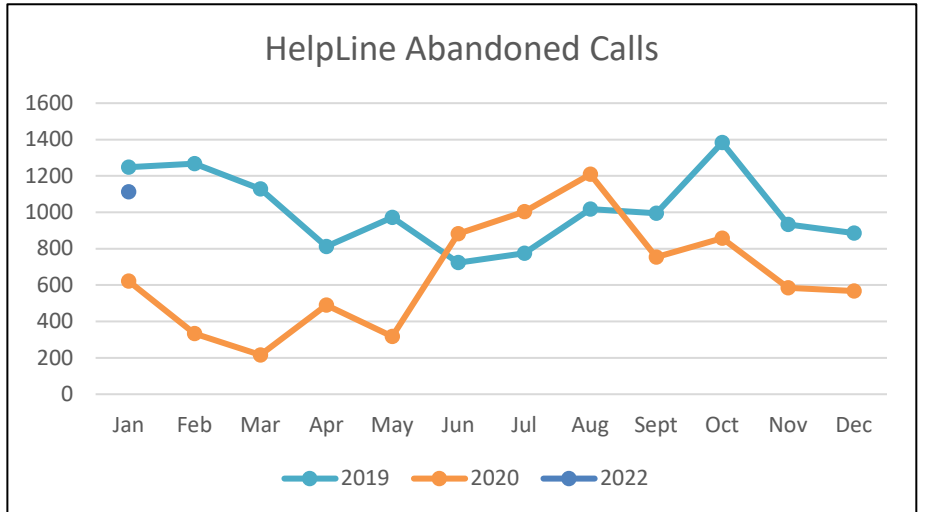
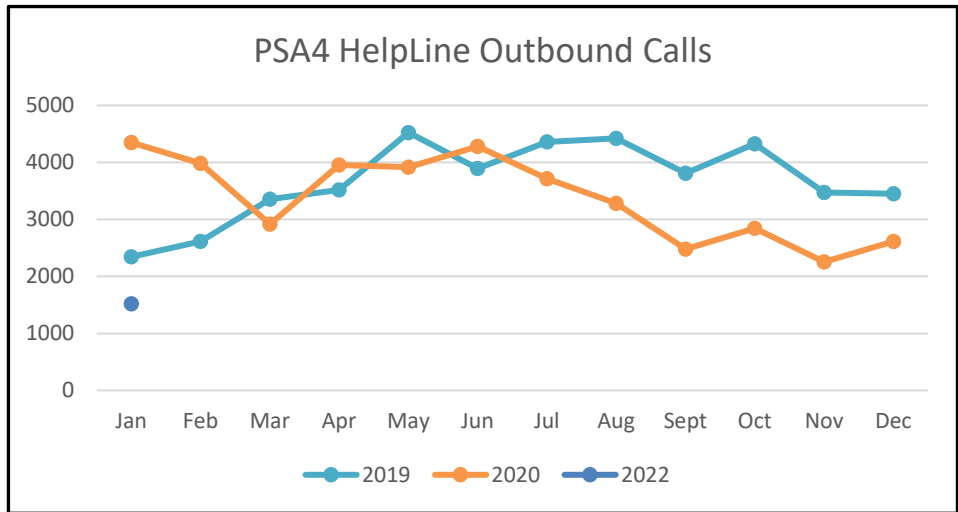
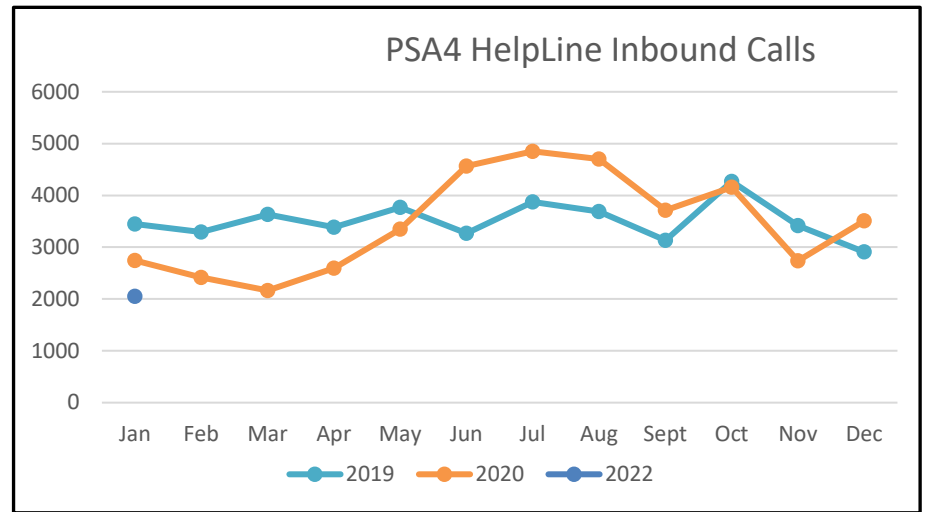
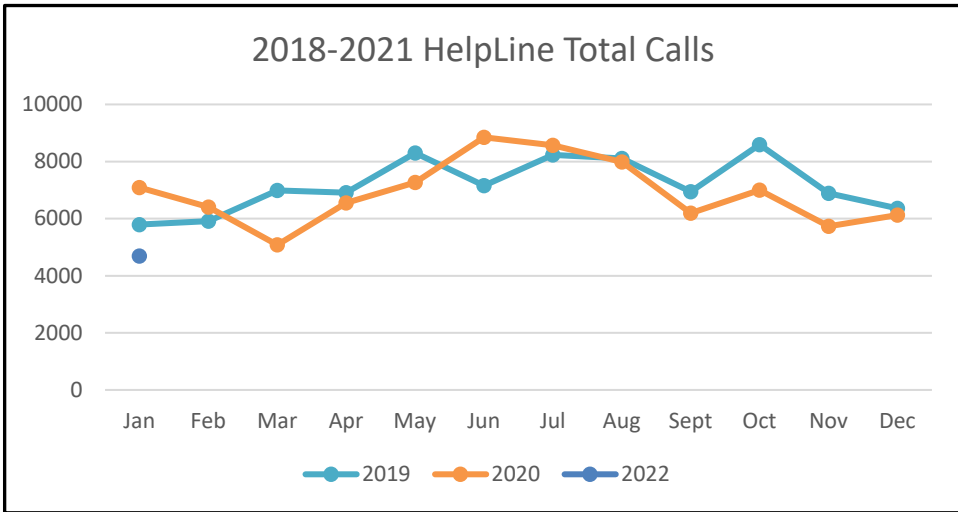
SHINE Referrals  
188

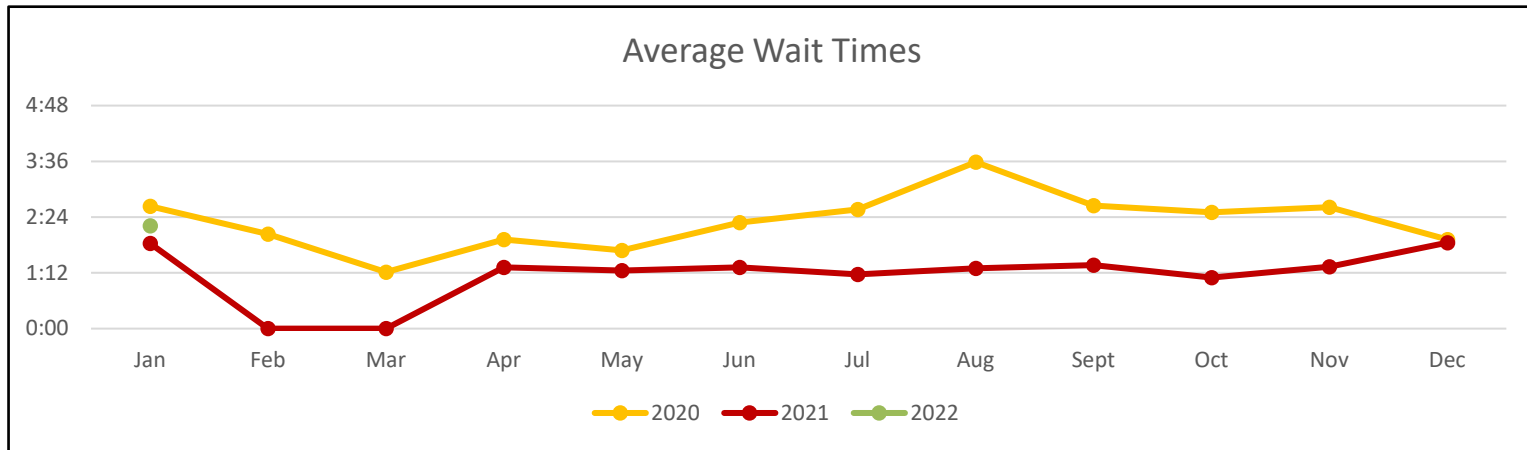
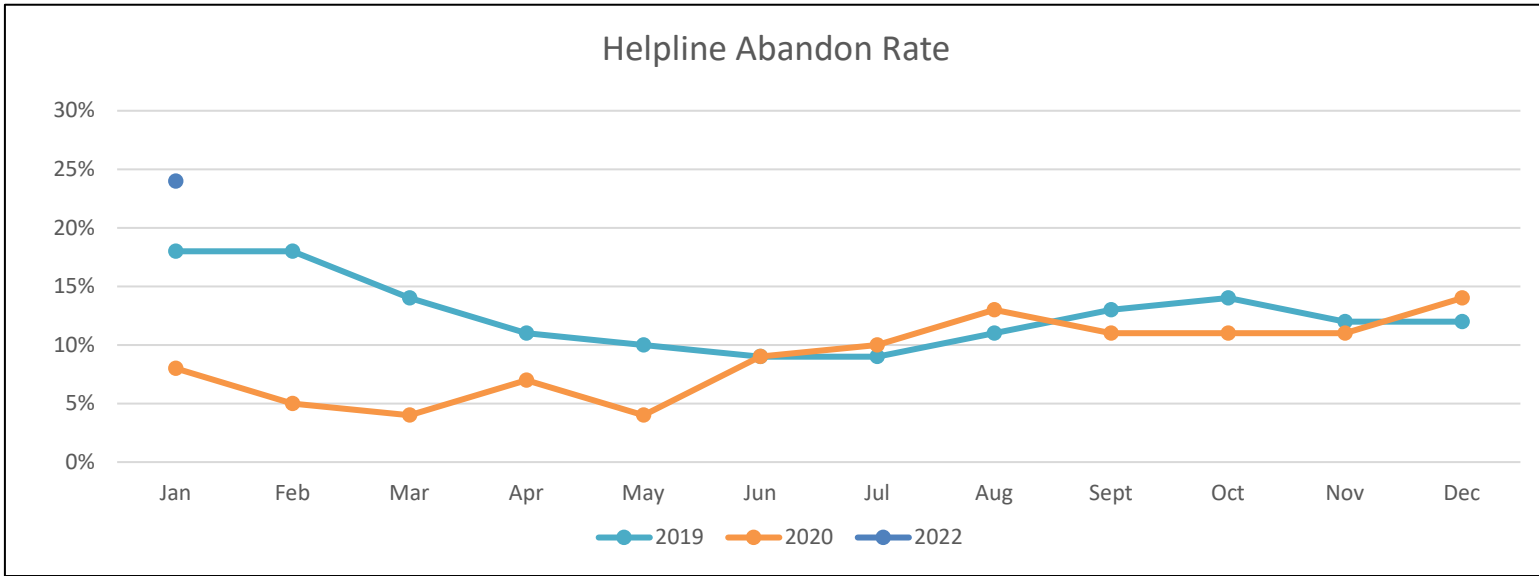
APS Referrals  
12

Silver Alerts  
0

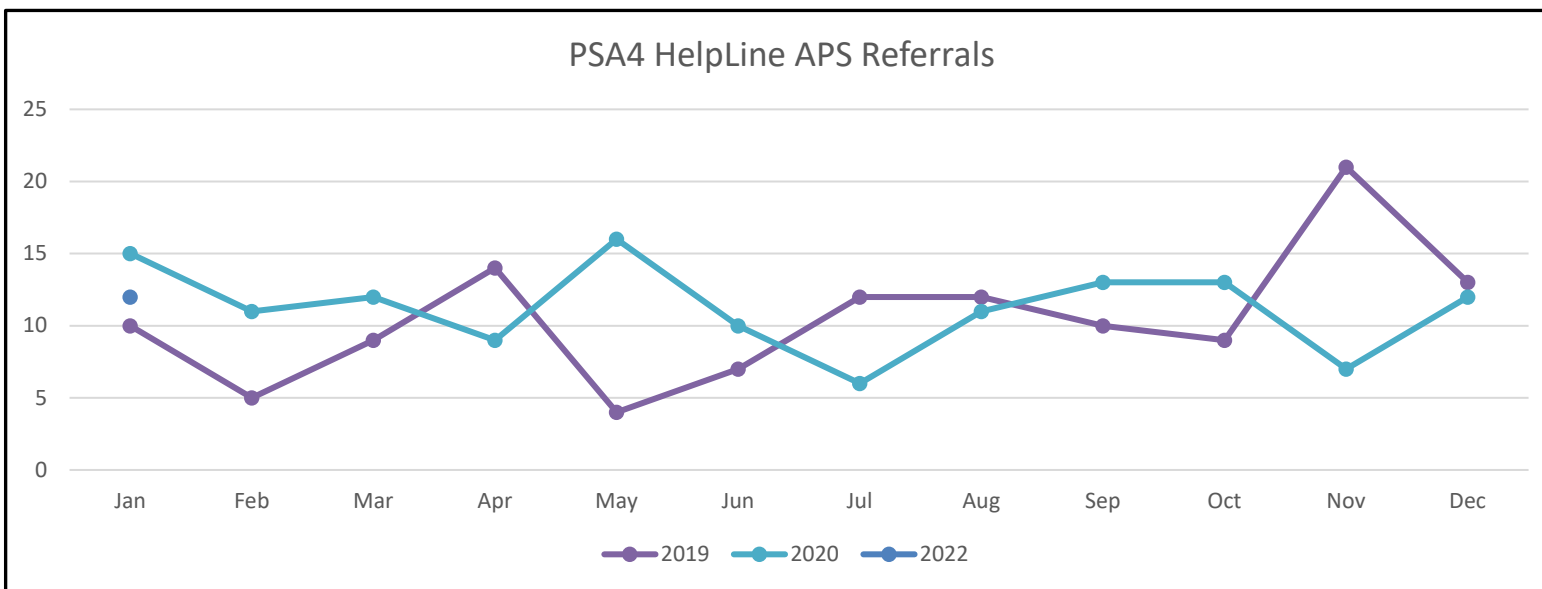
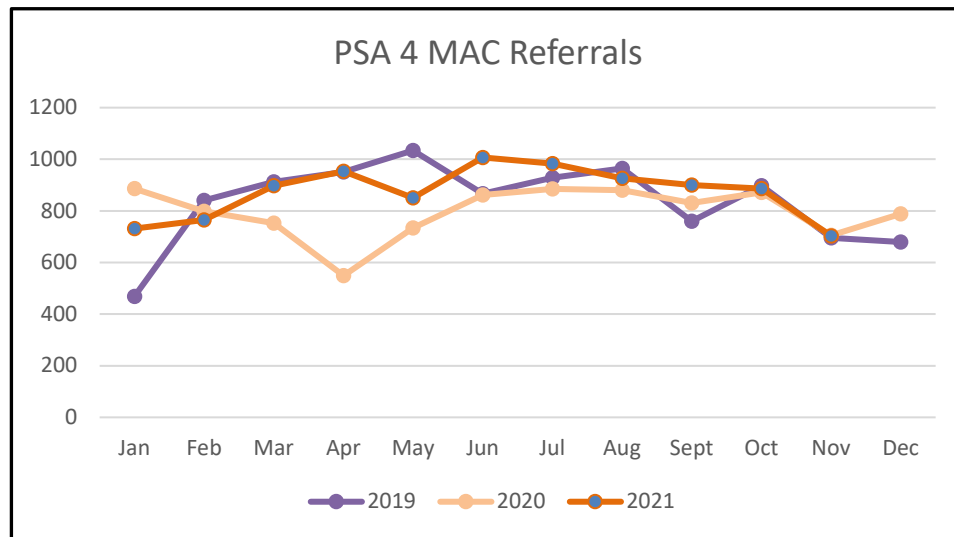
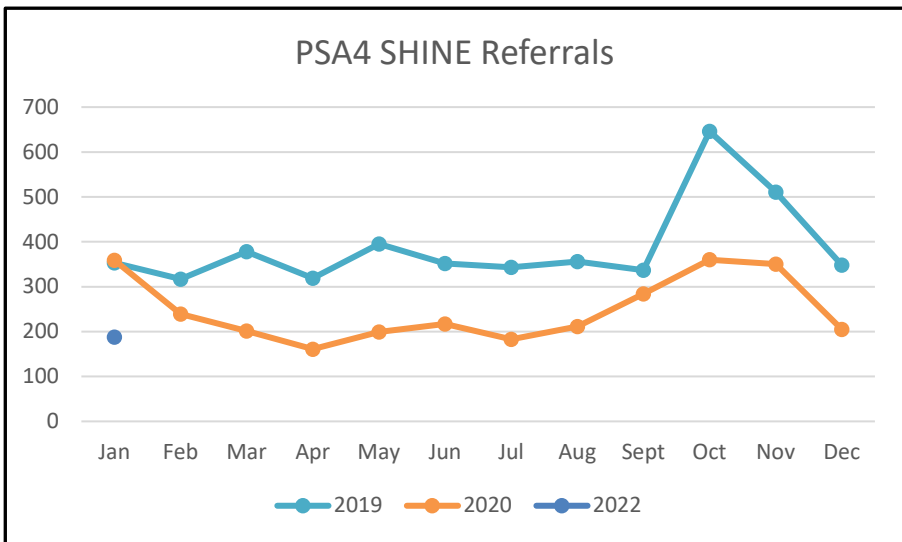
Top Reasons For Contact		
Individual Support	776	59%
Health Care	161	12%
Housing	91	7%
Utility Assistance	35	3%
Food	14	1%
Transportation	12	1%

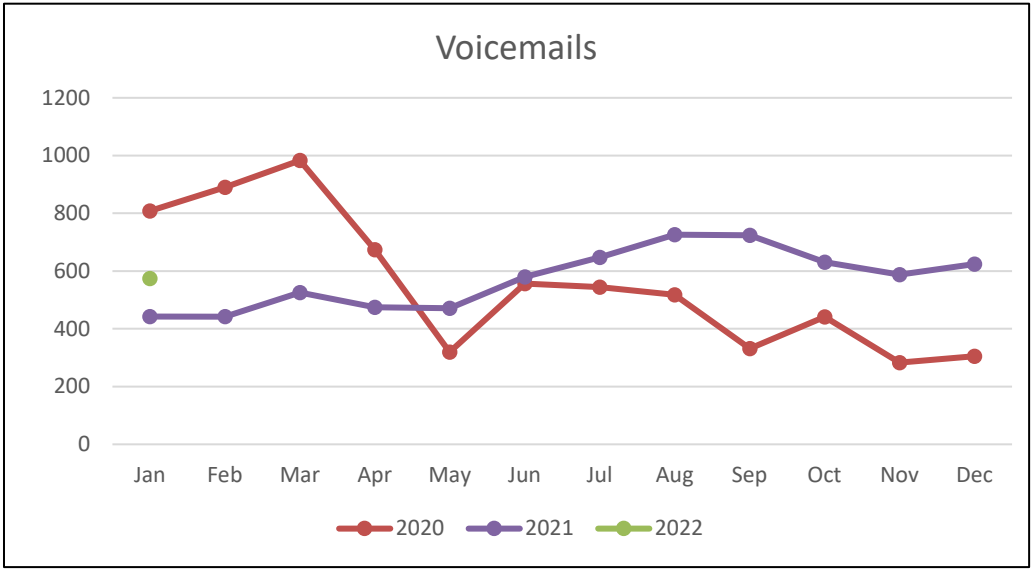
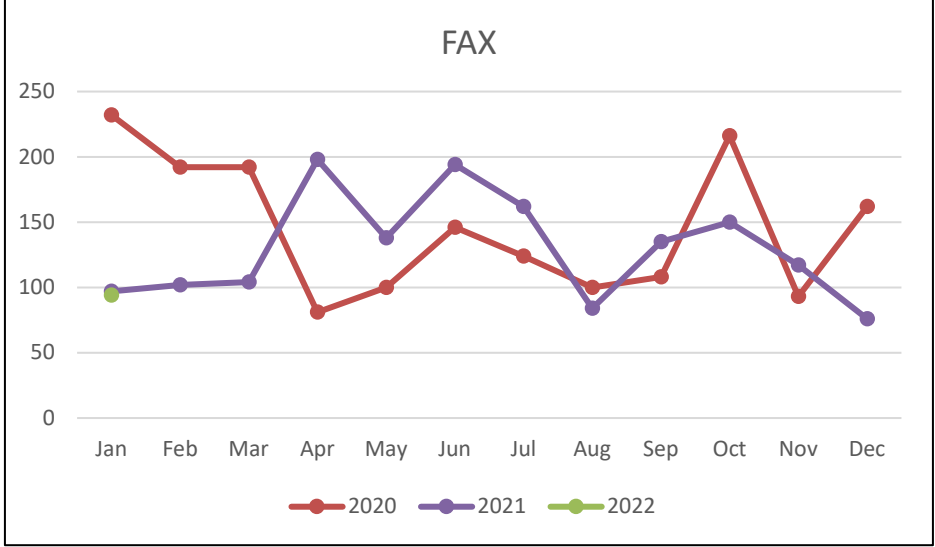
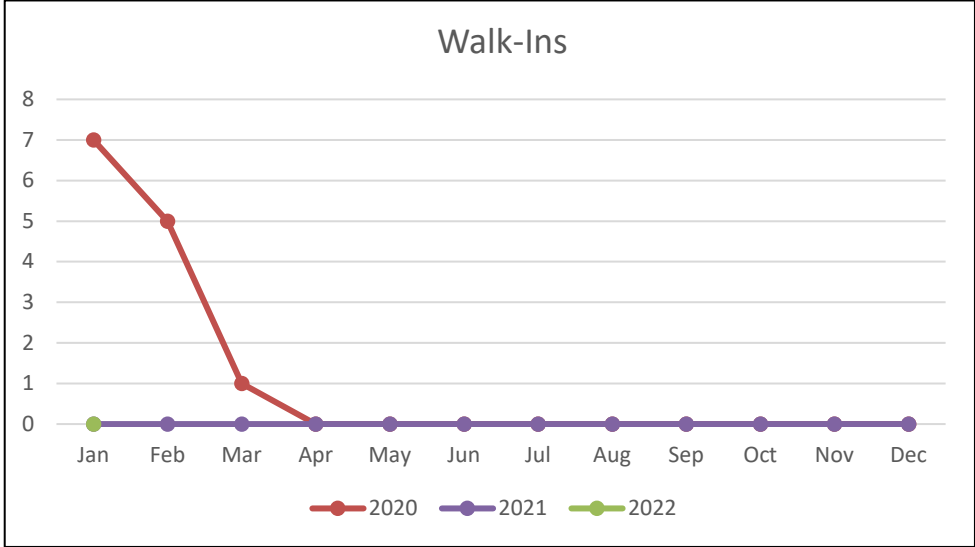






## HelpLine Referrals





The SHINE (Serving Health Insurance Needs of Elders) Program provides Medicare and health insurance counseling and information from an unbiased source. The SHINE program, MIPPA, (Medicare Improvements for Patients and Providers Act) and SMP (Senior Medicare Patrol) contract goals are primarily achieved through the commitment and efforts of the team of volunteers. The counselors are committed to helping Medicare beneficiaries make informed choices regarding their Medicare benefits. Contract benchmarks are achieved through the documentation in two national databases used to track counseling activities. Due to COVID-19, all grant benchmarks must be achieved at least by 50%.

**Monthly Analysis:** January 2022: ElderSource met all the SHINE, SMP and MIPPA benchmarks for December and January. Outreach events take place both virtually and in-person. The in-person events are beginning to see a come back but the attendance is not at the level of pre-covid.

### SHINE Benchmarks 2 (must be 50% to meet contract)

Client Contacts	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021-22 Benchmark	252	201	220	261	282	219	347	376	234	220	215	240	3067
2021-22 Actual	196	162	240	228	267	262	406	540	218	332			2851
% of Goal	78%	81%	109%	87%	95%	120%	117%	144%	93%	151%	0%	0%	

Outreach Events	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021-22 Benchmark	12	10	11	11	11	13	17	13	8	8	8	11	133
2021-22 Actual	8	7	8	9	11	10	16	10	7	7		9	102
% of Goal	67%	70%	73%	82%	100%	77%	94%	77%	88%	88%	0%	82%	

## SMP Benchmarks 3 (must be 50% to meet contract)

Group Outreach	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Total
2021-22	11	11	11	11	19	13	8	10	8	10	8	6	126
2021-22 Actual	8	9	11	11	18	10	7	7					81
% of Goal	73%	82%	100%	100%	95%	77%	88%	70%	0%	0%	0%	0%	

People Reached Through Group	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Total
2021-22	399	258	269	343	305	218	137	181	183	49	60	60	2462
2021-22 Actual	164	180	130	198	219	197	95	117					1300
% of Goal	41%	70%	48%	58%	72%	90%	69%	65%	0%	0%	0%	0%	

Individual One-on-One	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Total
2021-22	137	163	129	121	206	177	137	150	179	135	125	125	1784
2021-22 Actual	164	166	200	192	271	353	139	260					1745
% of Goal	120%	102%	155%	159%	132%	199%	101%	173%	0%	0%	0%	0%	

## MIPPA Benchmarks 8 (must be 50% to meet contract)

<b>Completion of LIS Apps.</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	37	53	55	38	22	36	21	22	30	30	48	59	451
2021-22 Actual	28	48	51	33	27								159
% of Goal	76%	91%	93%	87%	123%	0%	0%	0%	0%	0%	0%	0%	
<b># LIS Eligibility Activities</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
21-22 Benchmark	113	209	196	114	153	197	122	104	109	138	100	128	1683
2021-22 Actual	112	225	241	96	84								646
% of Goal	99%	108%	123%	84%	55%	0%	0%	0%	0%	0%	0%	0%	
<b># LIS Benefit Explanation Activities</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	97	163	144	82	125	173	87	82	70	91	75	110	1299
2021-22 Actual	72	122	111	41	77								351
% of Goal	74%	75%	77%	50%	62%	0%	0%	0%	0%	0%	0%		

## MIPPA Benchmarks (con't)

<b>Completion of MSP Apps</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	93	122	131	122	110	112	130	63	79	74	146	93	1275
2021-22 Actual	111	105	122	77	121								425
% of Goal	119%	86%	93%	63%	110%	0%	0%	0%	0%	0%	0%	0%	
<b># MSP Eligibility Activities</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	121	205	197	112	147	195	102	108	90	140	141	98	1535
2021-22 Actual	135	197	112	103	174								586
% of Goal	112%	96%	57%	92%	118%	0%	0%	0%	0%	0%	0%	0%	
<b># MSP Benefit Explanation Activities</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	102	158	142	80	117	168	81	77	68	105	75	110	1181
2021-22 Actual	97	141	181	62	135								519
% of Goal	95%	89%	127%	78%	115%	0%	0%	0%	0%	0%	0%	0%	



## MIPPA Benchmarks New 2021-22 (con't)

Group and Media to Low-Income or Rural Beneficiaries **Target Beneficiary Group must be low-income													
Extra Help/LIS/Medicaid/MS P	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Total
2021-22 Benchmark	13	17	13	8	10	8	9	8	7	8	6	8	102
2021-22 Actual	10	17	10	7	7								41
% of Goal	77%	100%	77%	88%	70%	0%	0%	0%	0%	0%	0%	0%	

Group and Media to Low-Income or Rural Beneficiaries **Target Beneficiary Group must be low-income													
Preventative Services	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Total
2021-22 Benchmark	6	9	9	4	7	7	7	8	7	7	6	8	79
2021-22 Actual	7	12	9	6	7								34
% of Goal	117%	133%	100%	150%	100%	0%	0%	0%	0%	0%	0%	0%	

Number of Volunteers By County												
2021	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Baker	0	0	0	0	0	0	0	0	0	0	0	0
Clay	2	2	2	2	2	2	2	2	2	2	2	2
Duval	18	10	10	10	10	10	11	11	11	11	14	14
Flagler	5	5	5	5	5	5	5	5	5	5	5	5
Nassau	2	2	2	2	2	2	2	2	2	3	3	3
St. Johns	14	11	11	11	11	11	11	12	12	12	12	12
Volusia	2	2	2	2	2	2	2	2	2	2	4	4
PSA Total	43	32	32	32	32	32	33	34	34	35	40	40

