

# Attachment E

## Appendices

Appendices are organized as follows:

Appendix Numbers	Program Area
Appendix A-1	State Unit on Aging, Client migration information, file layout
Appendix A-2	Aging & Disability Resource Center, Client migration information, file layout
Appendix A-3	Aging Service Unit migration for registered clients
Appendix A-4	Aging Partners Mediware modules
Appendix A-5	Eastern Nebraska Office on Aging Mediware modules
Appendix B-1	Optional State Long-Term Care Ombudsman Program (LTCOP)
Appendix B-2	LTCOP migration information, file layout
Appendix C-1	Nebraska Disability Resources
Appendix D-1	Regulations, State Plan, and website

## Appendix A-1

### State Unit on Aging software file layout

The State will perform an Excel extract of the Nebraska Aging Management Information System (NAMIS) database for clients who received services in the prior fiscal year. The approximate number of clients and caregivers are: 35,000.

The NAMIS file layout is as follows:

NAMIS Field	Field Type	Description
Client ID	Number	(Primary Key)
Client SSN	Text	Social Security Number
Client First Name	Text	
Client Middle Name	Text	
Client Last Name	Text	
Client Gender	Text	
Client DOB	Date/Time	
Client Case Manager	Text	Case Manager that assists client. Not required for all clients
Client Race	Text	
Client Ethnicity	Text	
Client Living Arrangement	Yes/No	Yes= User Lives Alone, No= User lives with others
Client Poverty Level	Yes/No	Yes= At or Below Federal Poverty Level, No= Above Federal Poverty Level
Client Income	Number	Monthly Income
Client Marital Status	Text	
Client Eligibility	Text	How the client is eligible for services
Client Rural	Yes/No	Yes= Rural, No= Non-Rural
Client Primary Address Type	Text	
Client Primary Address1	Text	
Client Primary Address1	Text	
Client Primary City	Text	
Client Primary State	Text	
Client Primary Zip Code	Number	
Client Secondary Address Type	Text	
Client Secondary Address1	Text	
Client Secondary Address1	Text	
Client Secondary City	Text	
Client Secondary State	Text	
Client Secondary Zip Code	Number	
Client Home Phone	Number	Will follow the (###) ###-#### format

NAMIS Field	Field Type	Description
Client Work Phone	Number	Will follow the (###) ###-#### format
Client Other Phone	Number	Will follow the (###) ###-#### format
Client Notes	Text	Long text field that will hold notes on the client
Care Status	Text	Denotes whether a client is a care giver, care recipient, or neither.
Caregiver Client ID	Number	If the client is a care recipient, the care giver client ID will be listed here. This may be blank.

## Appendix A-2

### State Unit on Aging software file layout

The State will perform an Excel extract of the ADRC (Aging and Disability Resource Center) referral dashboard database for clients who received services. The approximate number of clients and callers are: 10,000.

The referral dashboard file layout is as follows:

Referral Dashboard Field	Field Type	Description
Client ID	Number	(Primary Key)
Client First Name	Text	Social Security Number
Client Middle Initial	Text	
Client Last Name	Text	
Client Email Address	Text	
Client Phone	Number	Will follow the (###) ###-#### format
Client Alternate Phone	Number	Will follow the (###) ###-#### format
Client Address	Text	
Client City	Text	
Client State	Text	
Client Zip Code	Number	
Client Gender	Text	
Client Ethnicity	Text	
Client Race	Text	
Client Date of Birth	Date/Time	
Client County	Text	
Client's AAA	Text	Client's Area Agency on Aging
At or below Federal Poverty Level?	Yes/No	Yes = Client is at or below federal poverty level, No = Client is NOT at or below federal poverty level
Monthly Income	Number	
Veteran Status	Text	Not a Veteran, Veteran, Spouse of Veteran
Contact Preference	Text	E-Mail or Phone
Emergency Contact Information	Text	
Emergency Phone	Number	Will follow the (###) ###-#### format
Current Services & Supports	Text	
Health Insurance	Text	Multiple choices from multiple options: Medicaid, Medicare, VA, Private, None
Client Experiencing	Text	Multiple choices from multiple options: ADL Deficiency, Alzheimer's/Dementia, Autism, Blind/Visually Impaired, Chronic Health Issue(s), Deaf/Hard of Hearing, I/DD, Mental Health, Other, Physical

Referral Dashboard Field	Field Type	Description
		Disability, Substance Use Disorder, Traumatic Brain Injury
Client Notes	Text	
Client Living Arrangement	Text	At Home with No Formal/Informal Supports, At Home with ONLY Informal Supports, At Home with Formal Supports, Community Supervised Living, Hospital, Nursing Facility, Rehab Facility, Other Institutional Setting, Homeless, Other
Preferred Language	Text	
Legal Representative	Text	Multiple choices from multiple options: Self, DPOA, Guardian, Conservator, Financial POA, Representative Payee, Healthcare POA
Legal Representative Info & Contact Info	Text	
Reason for Call	Text	Multiple choices from multiple options: Medical Care/medication Assistance, Adult/Child Protective Services, Assistive Technology, Benefits Analysis & Assistance, Care Transitions, Case Management, Community Aid & Assistance Programs, Education, Employment, Family Caregiver Support, Financial Assistance, Food Assistance, Health Insurance Counseling, Home Delivered Meals, Home Modifications, Homemaker Services, Housing Assistance, Medicaid, Medicare, Mental Health & Substance Use Disorder Services, Peer Support & Counseling, Personal Care, Recreation, Respite Care, Other, SSDI benefits apps/claims assistance, Transportation, Utility Assistance, Vehicle Adaptations/Modifications, Veterans Assistance, Youth Transition Programs/Services
Caller First Name	Text	
Caller Middle Initial	Text	
Caller Last Name	Text	
Caller Email	Text	
Caller Phone	Number	Will follow the (###) ###-#### format
Caller Alternate Phone	Number	Will follow the (###) ###-#### format
Caller Address	Text	
Caller City	Text	

Referral Dashboard Field	Field Type	Description
Caller State	Text	
Caller Zip Code	Number	
Caller Gender	Text	
Caller Ethnicity	Text	
Caller Race	Text	
Caller Date of Birth	Date/Time	
Caller County	Text	
Caller is Consumer	Yes/No	
Caller is Caregiver	Yes/No	
Caller is Agency Representative	Yes/No	
Caller is Friend/Advocate/Relative	Yes/No	
Caller is Other	Yes/No	
Other	Text	
Is there a concern about safety?	Yes/No	
If yes, explain	Text	
Rights Reviewed	Yes/No	

## Appendix A-3

State Unit on Aging service layout (July 1, 2019 – Implementation Date)

The State will perform an Excel extract of the Nebraska Aging Management Information System (NAMIS) database for clients who received services since July 1, 2019. The estimated rows of data are: 79,000

NAMIS Field	Field Type	Description
Service Sequence ID	Number	(Primary Key)
Client ID	Number	
Service ID	Number	Service Name (Text) can be provided if needed.
Sub Service ID	Number	Sub Service Name (Text) can be provided if needed.
Provider ID	Number	Provider Name (Text) can be provided if needed.
Sub Provider ID	Number	Sub Provider Name (Text) can be provided if needed.
Service Start Date	Date/Time	Service units are entered in monthly increments (i.e. Service Start Date: 1/1/2019)
Service End Date	Date/Time	Service units are entered in monthly increments (i.e. Service End Date: 1/31/2019)
Service Quantity	Number	Units of service client received during the specified month (Service Start and End Date)

## Appendix A-4

Aging Partners has the following products in production

### Mediware®:

- SAMS is integrated into Aging Partners business practices, and it is used for all programs—in varying degrees.
- 56 SAMS/Harmony/Mediware user licenses - the actual number varies throughout the year.
- 56 Aging Network licenses that allow SAMS users into the application - Aging Partners does not host the application on City of Lincoln servers.
- 27 users also have access to SAMS I&R
  - This is an add-on module that allows staff to track information & assistance calls.
- Aging Partners is scanning and attaching pdf files to consumer records within the SAMS database.
- Sandbox/database copy with full functionality for testing
- Omnia Designer & Interviewer designs electronic assessment forms within SAMS

Within the standard SAMS/Harmony/Mediware application the following modules have been integrated (in varying degrees) into business practices:

- Dashboards
- Activities & Referrals
- Rosters
- Consumer Groups
- Reports
- Contracts
- Calls—Part of the I&R module
- Invoices
- Payments
- Saved Searches
- Administrator—for setting up custom user roles & locking service data
- Harmony Training Resources—webinars & user guides

Within the consumer records—part of the central feature of the application—Aging Partners is using the following modules (again in varying degrees):

- Assessments
- Forms/Document Templates
- Journals & Notes
- Service Deliveries
- Service Orders
- Currently we can't use the Care Plans because of how we set up our admin structure—but that functionality exists and we are anxious to access it.
- Custom Fields-that allow for the collection of data points unique to agency needs

Some users have SAMS open all day, every day. Individuals not working directly with consumers, tend to have it open only when working with service data and that might be done on a weekly, monthly, quarterly or annual basis.



## **Other Software in Production**

### MJM Innovations

- Automated data collection systems in senior centers and health centers.
  - The UPT/Senior Stat system includes touchscreens and ID cards that allow consumers to track their usage at these sites. Following a verification process by the center manager and an AP staff member, these units & client records are uploaded into SAMS on a monthly basis.
  - SAMS/Harmony/Mediware has an agreement with MJM Innovations to allow for this integration.

## Appendix A-5

Eastern Nebraska Office on Aging has the following products in production

### Mediware®:

- Implemented in August 2017
- Beginning with 5 SAMS users which will require annual individual User Licenses
- An annual agency license.
- As ENOA adds modules (additional functionality) more users will need to be added.
- Standard SAMS/Harmony/Mediware application Aging Partners has in production.
- An enhanced Meals on Wheels module that will be the focus of our use until other users and modules are added.
- Care Plans
- ENOA specific contribution form will be added to the system.
- Senior Health volunteer module added in 2017, future volunteer programs will be added in 2018.

## Appendix B-1

Links related to Regulations, State Plan, and website:

1. Federal Regulations, Long Term Care Ombudsman	<a href="https://www.acl.gov/programs/protecting-rights-and-preventing-abuse/long-term-care-ombudsman-program">https://www.acl.gov/programs/protecting-rights-and-preventing-abuse/long-term-care-ombudsman-program</a>
2. Ombudsman State Statutes	<a href="https://nebraskalegislature.gov/laws/search_range_statute.php?begin_section=81-2242&amp;end_section=81-2264">https://nebraskalegislature.gov/laws/search_range_statute.php?begin_section=81-2242&amp;end_section=81-2264</a>
3. Website orientation, general & program specific	<a href="http://dhhs.ne.gov/AgingRFP">http://dhhs.ne.gov/AgingRFP</a>

## Appendix B-2

If the optional Ombudsman is utilized, the vendor must convert Microsoft Excel data tables into the new system for Federal Fiscal Years 2017, 2018, and 2019.

Ombudsman Case Fields	Field Type	Description
Case ID	Number	(Primary Key)
Status ID	Number	Status Name (Text) can be provided if needed.
Date Opened	Date/Time	
Date Closed	Date/Time	
Region ID	Number	Different regions than AAA or ADRC regions. Region Name (Text) can be provided if needed.
County ID	Number	County Name (Text) can be provided if needed.
Facility ID	Number	Facility Name (Text) can be provided if needed.
Ombudsman ID	Number	Ombudsman Name (Text) can be provided if needed.
Volunteer ID	Number	Volunteer Name (Text) can be provided if needed.
Complainant Anonymous	Yes/No	
Complainant First Name	Text	
Complainant Last Name	Text	
Complainant Phone Number	Number	
Complainant Role ID	Number	Complainant Role (Text) can be provided if needed.
Resident Anonymous	Yes/No	
Resident First Name	Text	
Resident Last Name	Text	
Resident Phone Number	Number	
Resident Age	Number	
Travel Time	Number	
Facility Time	Number	
Paperwork Time	Number	

Ombudsman Complaint Fields	Field Type	Description
Complaint ID	Number	(Primary Key)
Case ID	Number	Related to the Case Table Primary Key
Complaint Name	Short Text	
Verification Date	Date/Time	
Complaint Type (Level 1)	Number	Name (Text) can be provided if needed.
Complaint Type (Level 2)	Number	Name (Text) can be provided if needed.
Complaint Type (Level 3)	Number	Name (Text) can be provided if needed.
Complaint Disposition ID	Number	Disposition Name (Text) can be provided if needed.
Complaint Notes	Text	

Ombudsman Facilities	Field Type	Description
Facility ID	Number	(Primary Key)
Facility Type ID	Number	Facility Type Name (Text) can be provided if needed.
Facility Name	Text	
Bed Count	Number	
Phone Number	Number	
Address Line 1	Text	
Address Line 2	Text	
City	Text	
Zip Code	Number	
Region ID	Number	Different regions than AAA or ADRC regions. Region Name (Text) can be provided if needed.
County ID	Number	County Name (Text) can be provided if needed.
Mailing Address Line 1	Text	
Mailing Address Line 2	Text	
Facility Status ID	Number	Facility Status Name (Text) can be provided if needed.
Facility Closed Date	Date/Time	

Ombudsman Facility Activities	Field Type	Description
Facility Activity ID	Number	(Primary Key)
Facility ID	Number	Related to the Facility Table Primary Key
Ombudsman ID	Number	Ombudsman Name (Text) can be provided if needed.
Activity Type ID	Number	Activity Type Name (Text) can be provided if needed.
Activity Topic	Text	
Travel Time	Number	
Facility Time	Number	
Paperwork Time	Number	

Volunteer Monthly Activities	Field Type	Description
Volunteer Report ID	Number	(Primary Key)
Facility ID	Number	Related to the Facility Table Primary Key
Volunteer ID	Number	Volunteer Name (Text) can be provided if needed.
Facility/Provider Consultation Instances	Number	
Individual Information/Consult Instances	Number	
Facility Survey Participation Instances	Number	
Resident Council Work Instances	Number	
Family Council Work Instances	Number	
Community Education Instances		
Routine Visit Instances		
Travel Time	Number	
Facility Time	Number	
Paperwork Time	Number	

## Appendix C-1

Nebraska offers an array of disability services and programming through:

- DHHS, Children & Family Services programs such as the Disabled Persons and Family Support Program (DPFS) <http://dhhs.ne.gov/AgingRFP>;
- DHHS Division of Developmental Disabilities <http://dhhs.ne.gov/AgingRFP>;
- Division of Behavioral Health <http://dhhs.ne.gov/AgingRFP>;
- League of Human Dignity and Centers for Independent Living (CILs) <http://www.leagueofhumandignity.com/locations.html>;
- Disability Rights Nebraska <http://www.disabilityrightsnebraska.org/resources/links.html>;
- PTI Nebraska <http://pti-nebraska.org/state-government-sites/>;  
<http://pti-nebraska.org/state-and-local-organizations/>;
- Answers for Families resources <http://www.answers4families.org/>;  
<http://www.answers4families.org/family/special-needs>;
- Nebraska Planning Council on Developmental Disabilities <http://dhhs.ne.gov/AgingRFP>;
- Nebraska Department of Education <http://www.education.ne.gov/sped/index.html>;
- Munroe-Meyer Institute <http://www.unmc.edu/mmi/>;
- Nebraska Health Care Association <http://www.nehca.org>; through
  - The Nebraska Assisted Living Association; and
  - The Nebraska Nursing Facility Association.
  - Nebraska Commission for the Deaf and Hard of Hearing
  - <http://www.ncdhh.ne.gov/>;
- Nebraska Commission for the Blind and Visually Impaired <https://ncbvi.nebraska.gov/>;
- The ARC of Nebraska <http://www.arc-nebraska.org/>;
- Independence Rising <http://www.cilne.org/>; and
- Nebraska Statewide Independent Living Council <http://www.nesilc.org/>

## Appendix D-1

### Links related to Regulations, State Plan, and website:

1. Federal Regulations, Aging	Older Americans Act <a href="http://www.aoa.gov/AOA_programs/OAA/index.aspx">http://www.aoa.gov/AOA_programs/OAA/index.aspx</a>
2. Aging State Statutes	Nebraska Community Aging Services Act (CASA) (Neb. Rev. Stat. 81-2201 – 2228) Nebraska Care Management Act (Neb. Rev. Stat. 81-2229 – 2235) <a href="http://www.nebraskalegislature.gov/laws/search_range_statute.php?begin_section=81-2201&amp;end_section=81-2235">http://www.nebraskalegislature.gov/laws/search_range_statute.php?begin_section=81-2201&amp;end_section=81-2235</a>
3. Aging Services State Plan	Draft 2015-2019 State Plan <a href="http://dhhs.ne.gov/AgingRFP">http://dhhs.ne.gov/AgingRFP</a>
4. Website orientation, general & program specific	Aging pages within DHHS, SUA site <a href="http://dhhs.ne.gov/Aging">http://dhhs.ne.gov/Aging</a>
5. Nebraska, DHHS, SUA regulations	DHHS, SUA Regulations <a href="http://dhhs.ne.gov/AgingRFP">http://dhhs.ne.gov/AgingRFP</a> Title 15: Aging Services Title 175: Health Care Facilities and Services Licensure Title 202: Operations Within Facilities and Community-Based Services for Persons with Mental Illness or Developmental Disabilities Title 404: Community-Based Services for Individuals with Developmental Disabilities Title 467 -- Title V Services for Medically Handicapped Children, Genetically Handicapped Persons' Program, and Supplemental Security Income Disabled Children's Program Title 469 -- Assistance to the Aged, Blind, or Disabled and State Disability Program Title 472 -- The Disabled Persons and Family Support Program Title 473 -- Social Services for Aged and Disabled Adults Title 480 -- Home and Community-Based Waiver Services and Optional Targeted Case Management Services
6. Nebraska, DHHS, SUA current taxonomy (end June 30, 2019)	<a href="http://dhhs.ne.gov/AgingRFP">http://dhhs.ne.gov/AgingRFP</a>
7. Nebraska, DHHS, SUA planned taxonomy (begins July 1, 2019)	<a href="http://dhhs.ne.gov/AgingRFP">http://dhhs.ne.gov/AgingRFP</a>