

County: **Milwaukee County**
Department on Aging

APPENDIX BOA - A 2009 STATE AND COUNTY CONTRACT
FOR SOCIAL SERVICES AND COMMUNITY PROGRAM

Appendix Title: Federal and State Aging Programs

It is further understood and agreed by both parties through this attachment to the CY 2009 "State and County Contract Covering Aging Program Services" that:

I. Funds Provided/Period Covered

Funds in the amount identified in this contract are provided for the period January 1, 2009 through December 31, 2009.

II. Purpose and Service Conditions on the Use of the Additional Funds

A. These additional funds may be used by the county according to ss.46.80, 46.81, 46.85, 46.87, 46.90 and as provided by the Older Americans Act of 1965 as amended, Federal Regulations Title 45 CFR Part 1328, Wisconsin Aging Network Policies and Procedures Manual, State Health Insurance Assistance Program (SHIP) Grant Terms and Conditions and the Milwaukee County Plan for Older People 2009.

Failure to meet these purposes and conditions will result in the loss of these funds by the county and their repayment by the county to the Department.

III. Fiscal Conditions on the Earning of the Additional Funds

A: These additional funds are earned under the following conditions:

1. In accordance with the county's distinct program budgets and the state law and rules for the individual programs.
2. Centers for Medicare & Medicaid Services, State Health Insurance Assistance Program (SHIP) funds on CARS Profile 560433 end on March 31, 2009.

B. Use of funds is also conditioned by the following:

The Bureau of Aging & Disability Resources approval of the Milwaukee County Plan for Older People 2009.

The Department shall apply these conditions in determining the close of the contract. The amount of a subsequent audit adjustment on the funds in this appendix shall be based exclusively upon these conditions.

IV. Fiscal and Client Reporting Conditions on the Use of the Additional Funds

These additional funds and the clients served by them must be reported to the Department by submitting the following reports:

- A. Expenditures must be reported on DMT Form 600d "Aging Expenditure Report Community Aids Reporting System":

PROFILE ID#: 560300	CFDA #: 93.044	\$297,934
PROFILE ID#: 560318	CFDA #: 435-560318	\$24,828
PROFILE ID#: 560320	CFDA #: 435-560320	\$111,456
PROFILE ID#: 560330	CFDA #: 435-560330	\$65,836
PROFILE ID#: 560338	CFDA #: 93.044	\$0 Reporting Profile
PROFILE ID#: 560340	CFDA #: 93.044	\$973,046
PROFILE ID#: 560350	CFDA #: 93.045/435-560350	\$2,485,083
PROFILE ID#: 560360	CFDA #: 93.045/435-560360	\$686,739
PROFILE ID#: 560433	CFDA #: 93.668	\$17,500
PROFILE ID#: 560490	CFDA #: 435-560490	\$436,686
PROFILE ID#: 560510	CFDA #: 93.043	\$82,446
PROFILE ID#: 560520	CFDA #: 93.052	\$475,570

- B. Wisconsin Aging Financial Report the FR180A is due April 20, 2009 and October 20, 2009.
- C. Wisconsin Aging Financial Report the FAR180B is due December 31, 2009.
- D. "Title III Service Summary Report" the (Semi-Annual Aging Report) is due semi-annually with amended final reports if necessary.

Failure to report these funds and the clients served by them as specified above will result in the loss of these funds by the county and their repayment by the county to the Department.

V. Payment Procedures

Payment shall be made in accordance with the State/County contract.

Conditions for the payments to begin, other than the execution of this Contract, will be the fulfillment of the conditions specified under Section 3.0 of the contract.