

Essential Vocabulary

The following Community Engagement, Strategic Positioning and Financial Stability vocabulary will help you communicate important concepts effectively with potential funders, businesses and professionals throughout your community.

Alternative Care (AC): A state-funded program that provides funding for home and community-based services for people who are age 65 and older and who need the level of care provided in a nursing home. Recipients are not financially eligible for Medical Assistance (MA), but would be financially eligible for MA within 135 days of entering a nursing home.

Area Agencies on Aging (AAA): In Minnesota, seven AAAs provide assistance to individuals, local organizations and communities serving seniors across the state. The Minnesota Board on Aging (MBA) website at <http://www.mnaging.org/admin/aaa.htm> provides additional information on these agencies.

Business Plan: A financial action plan that identifies how to create revenue (cash flow) so that income meets or exceeds business service expenses.

Centers for Medicare/Medicaid Services (CMS): The federal agency that administers Medicare, Medicaid (known as Medical Assistance in Minnesota) and the State Children's Health Insurance Program (CHIP) to states with persons of low-income. For more information, see <http://www.cms.hhs.gov>.

Community Alternative Care (CAC): A Medical Assistance Waiver Program that provides funding for home and community-based services for disabled children and adults who are chronically ill and who need the level of care provided in a hospital. Recipients must be under the age of 65 when they start on the program. See *Medical Assistance Waivers* for more information.

Community Alternatives for Disabled Individuals (CADI) Waiver: A Medical Assistance Waiver Program that provides funding for home and community-based services for people with disabilities who need the level of care provided in a nursing home. Recipients must be under the age of 65 when they start on the program. See *Medical Assistance Waivers* for more information.

Community Service/Community Services Development Grants (CS/SD): These grant funds are administered by the Minnesota Department of Human Services' Aging and Adult Services Division. The grants:

- Help persons ages 65 and older to remain living in their own homes and communities
- Improve chronic disease management in Minnesota's communities
- Expand long-term care capacity by linking formal and informal long-term care services
- Support caregivers and promote independence through market-based solutions.

The DHS website at <http://www.dhs.state.mn.us/cssd> contains proposal and application information for all interested agencies.

Consumer: An individual or group that can benefit from purchasing (using) your services.

County Contract: A legal written agreement between a county and local organization for providing services to an individual. This agreement identifies the type of service and the amount to pay to the organization. Counties may also allow the Health Plans who have members residing in that county to have access to contractual arrangements for the Minnesota Senior Health Options (MSHO) Program and Minnesota Senior Care Plus programs.

Direct Expenses: Budgeted expenses that can clearly be linked to a specific program or service (such as wages, employee benefits, mileage, office supplies, etc.)

Developmental Disabilities (DD) Waiver: A Medical Assistance Waiver Program that provides funding for home and community-based services for people with mental retardation or a related condition who need the level of care provided in an Intermediate Care Facility for Persons with Mental Retardation or Related Conditions (ICF/MR). See *Medical Assistance Waivers* for more information.

Eldercare Development Partnership (EDP): The Eldercare Development Partnership consists of 6 projects that provide technical assistance to older adult service providers throughout Minnesota. These projects help direct service providers to design and implement local programs that are aligned with the priorities and outcomes established by the Minnesota Department of Human Services. For additional information, see the [DHS website](#).

Elderly Waiver (EW): A Medical Assistance Waiver Program that provides funding for home and community-based services ~~care~~ for people who are age 65 and older and who need the level of care provided in a nursing home but choose to reside in the community. See *Medical Assistance Waivers* for more information.

Fee for Service: A pricing structure based on charging individuals full price for a service. Full price includes the true cost of the service, plus a margin.

Financial Stability: A condition of an agency in which the agency is able to develop and maintain diversified financial and non-financial resources that cover program (direct costs) and other organizational expenses (indirect costs) with an additional margin built in as a financial reserve.

Indirect Expenses: Overhead expenses that cannot be directly linked to a specific program or service and which support the overall operation of your organization (business insurance, audit and legal fees, board costs, accounting and financial services, etc.)

In-kind Contribution: A donation of goods or services by a third party to an organization. Also known as *third-party noncash contributions*.

Margin: An amount added to the cost of a service and charged in the “fee for service” rate. Charging a margin creates a surplus (reserve) for future growth and unanticipated expenses

Marketing: A process of publicizing your services so that individuals can identify, contact and purchase (use) your services. Marketing methods include paid advertisements, flyers, radio/TV/media announcements, websites, electronic internet announcements and other forms of promotion.

Match: Resources (cash or in-kind) that are contributed by a grantee toward program or project costs. Match may be required when an organization receives federal or state funds. The funder specifies the minimum amount of required match and the allowable sources of match. The grantee is required to document and report the amount and source of match to the funder.

Medical Assistance (MA): A jointly funded federal-state program that pays for health care services provided to low-income families with children, or aged, blind or disabled persons. Medical Assistance is the largest of Minnesota's three publicly funded health care programs. It is also known as Medicaid and is administered nationally by the Centers for Medicare and Medicaid Services (CMS). In Minnesota, the program is administered by the Department of Human Services (DHS) and the counties.

Medical Assistance (MA) Waivers: Minnesota has developed a number of programs for people who are eligible for Medical Assistance (see *Medical Assistance*), who need the level of care provided in a hospital, nursing home, or Intermediate Care Facility for Persons with Mental Retardation or Related Condition (ICF/MR), but who choose to reside in the community. There are five separate waiver programs. Each program has specific eligibility criteria, and each program offers a set of services designed to meet the needs of a specific group of people. (See definitions of each program for more information).

- Community Alternative Care (CAC) Waiver
- Community Alternatives for Disabled Individuals (CADI) Waiver
- Developmental Disabilities (DD) Waiver
- Elderly Waiver (EW)
- Traumatic Brain Injury (TBI) Waiver

In addition to the five waiver programs, there is also a state-funded program for people age 65 and older called Alternative Care. See *Alternative Care* for more information.

Minnesota Board on Aging (MBA): This agency is a gateway to older adult services for Minnesota seniors and their families. MBA listens to elder concerns, researches solutions and proposes policies to resolve senior needs. The agency also administers federal funds from the Older Americans Act which provides a spectrum of senior services including Senior LinkAge Line®, Insurance Counseling and others. The MBA works closely with Minnesota Area Agencies on Aging (AAA), located throughout the state to provide needed services for seniors. The Board's 25 members are appointed by the governor. For further information, see <http://www.mnaging.org/about.htm>.

Minnesota Health Care Program (MHCP) Enrolled Provider: Person, organization or entity that has entered into an agreement with DHS to provide services including waiver services to Medical Assistance or Alternative Care eligible persons. Once enrolled, providers are able to receive payments for providing services to Minnesota Health Care Programs (MHCP) recipients. Visit the [MCHP Enrolled Providers](#) section of the DHS website for more information.

Minnesota Senior Care Plus (MSC+): The mandatory managed care program for individuals age 65 and older who qualify financially for Medical Assistance (MA). MSC+ provides eligible seniors their acute care, home care, and Elderly Waiver services. MCS+ also covers the first 180 days of care in a nursing facility for enrollees who enter a nursing facility after enrollment. MSC+ does not include Medicare services or Medicare Part D prescription drug coverage. The Minnesota Department of Human Services contracts with specific health maintenance organizations to deliver MA services.

Minnesota Senior Health Options (MSHO): A publicly funded program designed for persons ages 65 and older who are eligible for Medical Assistance (MA) and enrolled in Medicare Parts A and B. It is a voluntary, integrated program and an alternative to enrollment in MSC+. MSHO integrates all Medicare and Medicaid services, including primary care, acute care, prescription drug coverage, home care and other long term care services, Elderly Waiver services, and the first 180 days of care in a nursing facility. All MSHO enrollees are assigned a care coordinator who will help them access services.

Mission Statement: A statement that communicates the core purpose of your agency.

Niche: A distinct position you occupy in the marketplace, based on your reputation and ability to make a clear impact.

Positioning Statement: A statement that clearly communicates the unique way that your organization meets a need in the community. It uses everyday language and identifies how your services stand out from others. The statement is crisp, action-oriented and conveys how you want to be known to your target audience.

Strategic Planning: The process that charts the long-term direction for an organization, places overarching goals and objectives in place and aligns resources for desired results.

Strategic Positioning: The process of aligning your services to meet a community's needs. Strategic Positioning is a long-term and continuous process. When you successfully position your organization in a community, consumers recognize who you are and know what you do.

Sustainability: The process of developing and expanding your agency's fiscal strength through careful strategic positioning and community engagement in new target markets and with new consumer audiences. Sustainability is built through trusting community relationships which include your entire staff, your board and volunteers. When agencies are sustainable, they can cover all expenses with a financial reserve for emergencies, position themselves to capably serve new consumers with the services that clients desire and develop powerful, cooperative relationships and partnerships with other agencies, corporations and businesses.

Traumatic Brain Injury (TBI) Waiver: A Medical Assistance Waiver Program that provides funding for home and community-based services for children and adults who have an acquired or traumatic brain injuries who need the level of care provided in a nursing facility or neurobehavioral hospital. Recipients must be under the age of 65 when they start on the program. See *Medical Assistance Waivers* for more information.

Title III Funding: These funds from the Federal Older Americans Act are distributed to states to pay for certain home and community-based services. In Minnesota, The Minnesota Board on Aging (MBA) receives these funds and allocates them to the seven Area Agencies on Aging (AAAs) through a funding formula. AAA funds are then contracted, in a granting process, to local service providers who deliver direct services to clients in their communities. Title III services include family caregiver support, nutrition services, health promotion and disease prevention and a range of supportive services such as chore, homemaker, transportation and legal services.

Transform 2010: A partnership between the Minnesota Department of Human Services, the Minnesota Board on Aging, the Minnesota Department of Health and other Minnesota agencies. Transform 2010 is intended to equip and engage Minnesotans in preparing for the coming wave of baby boomers by addressing policies, infrastructures and services to prepare for this historic change. The framework of Transform 2010 is called Blueprint for 2010. The Blueprint identifies what needs to take place across all systems to prepare for the future. For additional information, visit the [DHS website](#).

True Costs: A dollar amount that includes all direct and indirect expenses required to provide a specific service.