

## Planned Services & Expenditures (PSE) Instructions

Alaska Department of Health & Social Services  
Senior & Disabilities Services, Grants Unit  
Nutrition, Transportation, & Support Services

19-21

### **Submit PSE workbook with proposal (or continuation) in GEMS**

**If proposed services include more than one Region, prepare separate PSE for each Region**

- 1) Review Section 1.06 of the RFP, for allowable direct and indirect expenditures and types of revenue to include
- 2) Allowable costs must adhere to Federal OMB circulars for non-profit and government entities.
- 3) For Excel users expenditures by service category are loaded with formulas and linked to Summary Page
- 4) PSE Summary total equals Budget total

### **Projected Expenditures by Revenue Source**

Definitions of "line items" (ie Personnel, Supply, Equipment, etc) are included on the Budget form.  
The **Budget** and **GEMS Quarterly Fiscal Reports** differentiate **three** funding sources:

- 1) Primary Grant Award
- 2) Required Match (RM)
- 3) Additional Match/Project Support (AM/PS)

Based on required elements for annual State Program Report, the **PSE** and quarterly Reports on Cumulative Fiscal Report 2 (**CFR2**) identify the Grant Award and Match funding sources.

Match finding sources on PSE and CFR2 are:

- 1) **Program Income** (term Grant Income is used interchangeably)- these funds include donations from eligible individuals and full cost received from ineligible individuals for a service
- 2) **Local Match** -includes funds from benefactors, local and other grants, and fundraisers
- 3) **In-Kind Match** are the monetary value of volunteers time and food donated etc.
- 4) **Other Match** on PSE is Medicaid Waiver funds that will be expended and any other "Other"
- 5) **NSIP** funds can not be used as Required Match on Budget but should be Additional Match/Project Support and can only be used to purchase food supplies or as passthrough to subcontractors. Schools use the funds to cover the cost of any USDA Commodity foods that were intended for children.

Current estimate is 75 cents per meal.

Note: On CFR2 quarterly reports, NSIP is included in Other row

### **Definitions Planned Services**

**Total Eligibles - all services** - older individuals aged 60 and over, see 2019 RFP for further details

**Target Group**- see 2019 RFP

**Service Definitions** - Refer to Attachment: NTS RFP 2019 Service Definitions

Individuals eligible for a service under **Medicaid** may not receive the same service under the grant.

**DO include funds** from Medicaid in Budget (RM or AM/PS) and on PSE under the Column "Other"

**DO indicate estimated number** of individuals that will receive Medicaid services and number of units

Individuals served under both **Title III & Title VI** are included as Title III eligibles, however the Title VI units are not  
**For Title VI funds received directly or through agreement,**

**DO list** Title VI grant amount on section of proposal that indicates organization additional funding.

**DO NOT include in Budget Detail**

**DO** indicate Title VI funds per service in separate area of PSE form (only) as indicated.



<b>Title VI</b> - funds received directly or by agreement with eligible entity \$ _____ Do not include in Budget
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Planned Services & Expenditures (PS&E)

2020

Alaska Department of Health & Social Services  
 Senior & Disabilities Services, Grants Unit  
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Grantee \_\_\_\_\_  
 See Tab 1 Instructions

Projected Expenditure By Revenue Source								Planned Service	
Congregate Meals	#DIV/0!	Match/ Project Support				Project Support	#DIV/0!	Congregate Meals	
Budget Categories	Grant Award	Program Income1	Local Match 2	In-Kind Match 3	Other 4 include MW	NSIP 5	Total	Planned#Consumers	# Target Group only
100 Personnel							0	Total # of Meals	
200 Travel							0	# Sites	
300 Facility							0	Medicaid eligible(MW)	
400 Supply							0	Medicaid Meals(MW)	
500 Equipment							0	List sites on Summary page	
600 Other Direct							0	Title VI - funds received directly	
Subtotal Direct	0	0	0	0	0	0	0	or by agreement with eligible	
800 Indirect							0	entity \$ _____	
<b>Total</b>	0	0	0	0	0	0	0	Do not include in Budget	

Projected Expenditure By Revenue Source								Planned Service	
Home Delivered Meals	#DIV/0!	Match/ Project Support				Project Support	#DIV/0!	Home Delivered Meals	
Budget Categories	Grant Award	Program Income1	Local Match 2	In-Kind Match 3	Other 4 include MW	NSIP 5	Total	Planned#Consumers	# Target Group only
100 Personnel							0	Total # of Meals	
200 Travel							0	# Sites	
300 Facility							0	Medicaid eligible(MW)	
400 Supply							0	Medicaid Meals(MW)	
500 Equipment							0	List sites on Summary page	
600 Other Direct							0	Title VI - funds received directly	
Subtotal Direct	0	0	0	0	0	0	0	or by agreement with eligible	
800 Indirect							0	entity \$ _____	
<b>Total</b>	0	0	0	0	0	0	0	Do not include in Budget	

Projected Expenditure By Revenue Source							Planned Service	
Nutrition Education	#DIV/0!	Match/ Project Support				#DIV/0!	Nutrition Education	
Budget Categories	Grant Award	Program Income1	Local Match 2	In-Kind Match 3	Other 4 include MW	Total	Planned#Consumers	# Target Group only
100 Personnel						0	Total # of Units	
200 Travel						0	# Sites	
300 Facility						0	List sites on Summary page	
400 Supply						0	A unit of Nutrition Education is one	
500 Equipment						0	contact per consumer per session	
600 Other Direct						0	Title VI - funds received directly	
Subtotal Direct	0	0	0	0	0	0	or by agreement with eligible	
800 Indirect						0	entity \$ _____	
<b>Total</b>	0	0	0	0	0	0	Do not include in Budget	

Does not include Physical Activity (see service definitions) Physical Activity is under HP/DP RFP

Projected Expenditure By Revenue Source							Planned Service	
Nutrition Counseling	#DIV/0!	Match/ Project Support				#DIV/0!	Nutrition Counseling	
Budget Categories	Grant Award	Program Income1	Local Match 2	In-Kind Match 3	Other 4 include MW	Total	Planned#Consumers	# Target Group only
100 Personnel						0	Total # of Units	
200 Travel						0	# Sites	
300 Facility						0	List sites on Summary page	
400 Supply						0	A unit of Counseling is one	
500 Equipment						0	contact per consumer per session	
600 Other Direct						0	Title VI - funds received directly	
Subtotal Direct	0	0	0	0	0	0	or by agreement with eligible	
800 Indirect						0	entity \$ _____	
<b>Total</b>	0	0	0	0	0	0	Do not include in Budget	

This service must be provided by a nutrition professional licensed in the State of Alaska





**Planned Services & Expenditures (PS&E)**

2020

Alaska Department of Health & Social Services  
 Senior & Disabilities Services, Senior Grants Unit  
 Nutrition, Transportation, & Support Services

**Grantee** 0

**See Tab 1 Instructions**

Projected Expenditure By Revenue Source							Planned Service	
Senior Companions	#DIV/0!	Match/ Project Support				#DIV/0!		
Budget Categories	Grant Award	Program Income1	Local Match 2	In-Kind Match 3	Other 4	Total	Senior Companions	
100 Personnel						0	Planned#Consumers	
200 Travel						0	# Target Group only	
300 Facility						0	# of hours	
400 Supply						0	List sites/communities on	
500 Equipment						0	Summary page	
600 Other Direct						0		
<b>Subtotal Direct</b>	0	0	0	0	0	0		
800 Indirect						0		
<b>Total</b>	0	0	0	0	0	0		

Projected Expenditure By Revenue Source							Planned Service	
Retired Senior Volunteers	#DIV/0!	Match/ Project Support				#DIV/0!		
Budget Categories	Grant Award	Program Income1	Local Match 2	In-Kind Match 3	Other 4	Total	Retired Senior Volunteers	
100 Personnel						0	Planned#Consumers	
200 Travel						0	# Target Group only	
300 Facility						0	# of hours	
400 Supply						0	List sites/communities on	
500 Equipment						0	Summary page	
600 Other Direct						0		
<b>Subtotal Direct</b>	0	0	0	0	0	0		
800 Indirect						0		
<b>Total</b>	0	0	0	0	0	0		

Projected Expenditure By Revenue Source							Planned Service	
Foster G"parent/ Elder Mentor	#DIV/0!	Match/ Project Support				#DIV/0!		
Budget Categories	Grant Award	Program Income1	Local Match 2	In-Kind Match 3	Other 4	Total	FG/EM	
100 Personnel						0	Planned#Consumers	
200 Travel						0	# Target Group only	
300 Facility						0	# of hours	
400 Supply						0	List sites/communities on	
500 Equipment						0	Summary page	
600 Other Direct						0		
<b>Subtotal Direct</b>	0	0	0	0	0	0		
800 Indirect						0		
<b>Total</b>	0	0	0	0	0	0		

Foster  
 Grandparent /  
 Elder Mentor

**Planned Services & Expenditures (PS&E)**

Summary Page

2020

Alaska Department of Health & Social Services  
 Senior & Disabilities Services, Senior Grants Unit  
 Nutrition, Transportation, & Support Services

**Grantee** \_\_\_\_\_ 0  
**Region:** \_\_\_\_\_

This form was completed by \_\_\_\_\_  
 Contact email \_\_\_\_\_

**Date:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_

Summary	Projected Expenditure By Revenue Source						
	Grant Award	Match/ Project Support				Project Support NSIP 5	Total
		Program Income1	Local Match 2	In-Kind Match 3	Other 4 include MW		
<b>Budget Categories</b>							
100 Personnel	0	0	0	0	0	0	0
200 Travel	0	0	0	0	0	0	0
300 Facility	0	0	0	0	0	0	0
400 Supply	0	0	0	0	0	0	0
500 Equipment	0	0	0	0	0	0	0
600 Other Direct	0	0	0	0	0	0	0
<b>Subtotal Direct</b>	0	0	0	0	0	0	0
800 Indirect	0	0	0	0	0	0	0
<b>Total</b>	0	0	0	0	0	0	0

PS&E Summary matches Budget Summary

**Title VI** 0

**Site Instructions:**

After site name, please indicate which service(s) will be provided at the site:

**Any changes in Planned Services requires preapproval by Program Manager.**

Service(s) Key	Site(s)	Service(s)	Days per Week	# Weeks	Operating Days
<b>CM</b> Congregate Meals					0
<b>HDM</b> Home Delivered Meals					0
<b>NE</b> Nutrition Education					0
<b>NC</b> Nutrition Counseling					0
<b>T</b> Transportation (Communities)					0
<b>AT</b> Assisted Transportation					0
<b>L</b> Legal					0
<b>H</b> Homemaker					0
Volunteer Services:					0
<b>SC</b> Senior Companions					0
<b>RSVP</b> Retired Senior Volunteers					0
<b>FG/EM</b> Foster Grand/Elder Mentor					0
<b>IA</b> Information & Assistance					0
<b>O-I</b> Outreach to individuals					0
<b>O-PI</b> Outreach Public Information					0
					0
Media is a statewide monthly service and does not require a site list.					0
					0
					0
					0
					0
					0

If additional space is required, please attach.

This is a summary of the Agreement to provide services and cannot be altered without State preapproval.