

1.1 General Definitions

These are generic definitions. There may be slight variances across programs. Please consult program requirements and service definitions for further clarification.

Accrual Basis of Accounting: An accounting method in which revenues and expenses are identified with specific periods of time, such as a month or year, and are recorded when they are earned or incurred without regard to the date of receipt or payment of cash; distinguished from cash basis, modified cash basis, and modified accrual basis.

Activities of Daily Living (ADLs): Personal functional activities required by an individual for continued well-being and essential for health and safety which consist of eating, bathing, dressing, toileting, transfer, and mobility.

Adequate Proportion: A minimum proportion of Title III-B funds allocated to each area agency on aging (AAA) and designated by the State to carry out services associated with access services, in-home services, and legal assistance.

Administrative Requirements: The general practices that are common to the administration of grants, such as financial accountability, reporting, equipment management, and retention of records.

Adult Care Home: Any nursing facility, nursing facility for mental health, intermediate care facility for the mentally retarded, assisted living facility, residential health care facility, home plus, boarding care home, and adult day care facility, all of which classifications of adult care homes are required to be licensed by the Secretary of Aging (KSA 39-923 as amended).

Adult Day Care: Any place or facility operating less than 24 hours a day caring for individuals not related within the third degree of relationship to the operator or owner by blood or marriage and who, due to functional impairment need supervision of or assistance with activities of daily living (KAR 39-923).

Advance Payment: A payment made to a recipient either upon its request before cash disbursements are made by the recipient or through the use of predetermined payment schedules.

Allocable Cost: A cost that is allocable to a particular cost objective (i.e. specific function, grant project, service, department, or other activity) in accordance with relative benefits received. A cost is allocable to a federal award where it is treated consistently with other costs incurred for the same purpose in like circumstances and (1) is incurred specifically for the award; (2) benefits both the award and other work and can be distributed in reasonable proportion to the benefits received; or (3) is necessary for the overall operation of the organization.

Allowable Cost: A cost incurred by a recipient that meets all of the following requirements:

1. Reasonable for the performance of the award;
2. Allocable;

3. In conformance with any limitations or exclusions set forth in the federal cost principles applicable to the organization incurring the cost or in the Notification of Grant Award (NGA) as to the type or amount of cost;
4. Consistent with regulations, policies, and procedures of the recipient that are applied uniformly to both federally supported and other activities of the organization;
5. Accorded consistent treatment as a direct or indirect cost;
6. Determined in accordance with generally accepted accounting principles; and
7. Cost is not included in any other federally supported award (unless specifically authorized by statute).

Approved Budget: The financial expenditure plan for a grant-supported project, program, or activity, including revisions approved by the Kansas Department on Aging (KDOA). The approved budget consists of grant funds and recipient participation in the form of matching and non-matching funds. Expenditures under an approved budget that consists of both federal and non-federal shares are deemed to be borne by the recipient in the same proportion as the percentage of federal/non-federal participation in the approved budget.

Area Agency on Aging (AAA): The agency or organization within a planning and service area (PSA) that has been designated by the Secretary to develop, implement and administer a plan for the delivery of a comprehensive and coordinated system of services to older persons in the PSA. If AAA is used in conjunction with CME (AAA/CME), it denotes policy that relates to all programs.

Area Plan: The document developed by each AAA which describes the comprehensive and coordinated system of services to be provided to older persons in a PSA.

Assisted Living Facility: Any place or facility caring for six or more individuals not related within the third degree of relationship to the administrator, operator or owner by blood or marriage and who, by choice or due to functional impairments, may need personal care and may need supervised nursing care to compensate for activities of daily living limitations and in which the place or facility includes apartments for residents and provides or coordinates a range of services including personal care or supervised nursing care available 24 hours a day, seven days a week for the support of resident independence. The provision of skilled nursing procedures to a resident in an assisted living facility is not prohibited by this act. Generally, the skilled services provided in an assisted living facility shall be provided on an intermittent or limited term basis, or if limited in scope, a regular basis (KSA 39-923 as amended). Assisted Living Facilities have kitchenettes and private baths in each apartment.

Audit Resolution: The process of resolving audit findings, including those related to management and systems deficiencies and monetary findings (i.e., questioned costs).

Award: The document that obligates funds to a recipient to carry out an approved program or project (based on an approved application or progress report). The term, when used as a noun, is sometimes used interchangeably with “grant.”

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Boarding Care Home: Any place or facility operating 24 hours a day, seven days a week, caring for not more than 10 individuals not related within the third degree of relationship to the operator or owner by blood or marriage and who, due to functional impairment, need supervision of activities of daily living but who are ambulatory and essentially capable of managing their own care and affairs (KSA 39-923 as amended).

Budget Category: A grouping of services under Title III-B Access, In-Home, and Community, or Title III-E Services or a line item under Titles III C(1), C(2), D, and E, excluding Supplemental Services. Senior Care Act line items are Attendant Care, Homemaker, and Case Management; the remaining services are categorized under "Other."

Budget Periods: The intervals of time (usually 12 months each) into which a project period is divided for budgetary and funding purposes. Funding of individual budget periods sometimes is referred to as "incremental funding."

Capital Outlay: An article of tangible non-expendable real or personal property that has a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.

Caregiver: An adult family member, or another individual 18 or older, who is an informal provider of in-home and community care to another individual.

Carryover: See "Unearned OAA Funds."

Case Management Entity (CME): An entity or organization enrolled with the Medicaid fiscal agent to provide targeted case management services. If AAA is used in conjunction with CME (AAA/CME), it denotes policy that relates to all programs.

Cash Basis of Accounting: An accounting method in which revenue and expenses are recorded on the books of account when received and paid, respectively, without regard to the period in which they are earned or incurred; distinguished from accrual basis, modified accrual basis, and modified cash basis.

Cash Contribution: The recipient's cash outlay, including the outlay of money contributed to the recipient by third parties.

Cash on Hand: The amount of actual federal and state cash received to date from the awarding agency, less the cumulative amount of federal and state fund disbursements as of the reporting period end date.

Client Assessment, Referral and Evaluation (CARE): Kansas state law requires that "each individual prior to admission to a nursing facility as a resident of the facility shall receive assessment and referral services." To achieve this, the 1994 Kansas Legislature created the CARE (Client Assessment, Referral and Evaluation) program "for data collection and individual

assessment and referral to community-based services and appropriate placement in nursing facilities."

Client Assessment, Referral and Evaluation (CARE) Level I Assessment Form: The assessment tool completed on all individuals seeking placement in a Medicaid certified nursing facility. The assessment explains community-based alternatives, and collects data regarding unmet service needs. A CARE assessor trained by KDOA must complete the assessment.

Comprehensive and Coordinated Service Delivery System: A system for providing all necessary supportive service including nutrition services in a manner which:

1. Facilitates accessibility to, and utilization of, all supportive services and nutrition services provided within the geographic area served by such system by any public or private agency or organization; and
2. Develops and makes the most effective and efficient use of supportive services and nutrition services in meeting the needs of older persons.

Conservator: An individual or corporation appointed by a court whose duties are to manage the assets and obligations on behalf of the person (KSA 59-3051et seq. as amended).

Consultant: An individual who provides professional advice or services for a fee, but normally not as an employee of the engaging party. The term "consultant" also includes a firm that provides paid professional advice or services.

Contract: A promise or set of promises for the breach of which the law gives a remedy, or the performance of which the law in some way recognizes as a duty.

Contract Under a Grant: A written agreement between a recipient and a third party to acquire commercial goods or services.

Contractor: One who is a party to a contract.

Contribution: Money or vision card units that are given by a customer, to pay for a portion of or total cost of service(s) received, to a provider that receives direct or indirect funds from KDOA.

Cost Center: Administrative categories of expenditures, including Personnel, Travel, Capital Outlay, Other Equipment, and Contractual.

Cost sharing: Any situation in which the recipient shares in the costs of a project other than as statutorily required matching. This includes situations in which contributions are voluntarily proposed by an applicant and accepted by KDOA by inclusion in the approved budget as shown in the NGA. Cost sharing must apply to certain services and be implemented statewide. (See Older Americans Act (OAA) Section 315(a) and FSM Section 3.6.5.F)

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Customer: Any individual that requests or receives services, information, or assistance from KDOA, its contractors, or grantees.

Department: The Kansas Department on Aging (KDOA), created by KSA 75-5903 et seq., as amended.

Digital Signature: A type of electronic signature consisting of a transformation of an electronic message using an asymmetric crypto system such that a person having the initial message and the signer's public key can accurately determine whether 1) the transformation was created using the private key that corresponds to the signer's public key; and 2) the initial message has not been altered since the transformation was made.

Direct Costs: Costs that can be identified specifically with a particular sponsored project, an instructional activity, or any other institutional activity, or that can be directly assigned to such activities relatively easily with a high degree of accuracy.

Disability: An incapacity attributable to mental or physical impairment, or a combination of mental and physical impairments, that result in substantial functional limitations in one or more of the following areas of major life activity:

1. Self care;
2. Receptive and expressive language;
3. Learning;
4. Mobility;
5. Self-direction;
6. Capacity for independent living;
7. Economic self-sufficiency;
8. Cognitive functioning; or
9. Emotional adjustment.

This definition shall not apply to the phrases: severe disability, developmental disabilities, physical or mental disability, physical and mental disabilities, or physical disabilities.

Disbursements: The sum of actual cash payments for direct charges for goods and services, the amount of indirect expenses charged to the award, and the amount of cash advances and payments made to subgrantees and contractors.

Donation: Money, or real or personal property given by a non-participant to a provider that is receiving direct or indirect funds from KDOA.

Durable Power of Attorney: A written document which states the document is a durable power of attorney and states, in substance, that the authority of the agent does **not** terminate in the event the principal becomes disabled, or in the event of later uncertainty as to whether the principal is dead or alive, and which complies with KSA 58-651 and KSA 58-652(a), as amended. (See "Power of Attorney" and "Durable Power of Attorney for Health Care Decisions.")

Durable Power of Attorney for Health Care Decisions: A written advance health care directive authorizing the named agent or agents to make health care decisions for the signer. This document contains the words “this power of attorney for health care decisions shall become effective upon the disability or incapacity of the principal” or words showing similar intent. The directive remains in force even if the signer becomes incapacitated. (KSA 58-632 as amended) (See “Power of Attorney” and “Durable Power of Attorney.”)

Electronic Signature: An electronic sound, symbol or process attached to or logically associated with a record and executed or adopted by a person with the intent to sign the record.

End-stage Illness: In a physician’s clinical judgment, an individual with any end-stage illness has six or less months to live. This judgment should be substantiated by a well-documented disease diagnosis and deteriorating clinical course.

Entity Identification Number: The 9-character Internal Revenue Service tax identification number (TIN) for organizations.

Equipment: Tangible, nonexpendable personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. The definition is applicable to all programs funded by or through KDOA.

Expenditures or Outlays: The charges made to the federal or state-sponsored project or program reported on an accrual basis.

Family: One or more adults and any minor children related by blood or law and residing in the same household. Emancipated minors and children living under the care of individuals not legally responsible for that care shall be considered one-person families. Where adults, other than spouses, reside together, each will be considered a separate family.

Final Financial Report: A contractor or grantee-prepared document that contains an accurate and complete disclosure of the financial results of the contract, grant, subcontract, or subgrant.

Fiscal Agent: The agency with whom Kansas Health Policy Authority (KHPA) contracts to process all Medicaid provider claims for payment.

Functional Eligibility: A measurement of an individual’s abilities, or level of assistance needed, to complete important self-care activities. Generally, this takes into consideration a person's ability to complete their Activities of Daily Living (ADLs), Instrumental Activities of Daily Living (IADLs), Cognition, and Risk Factors. The measurement is established using a thorough assessment process and is used to determine the need and eligibility for a variety of services and programs.

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Grant: A financial assistance support mechanism providing money, property or other direct assistance in lieu of money, or both, to an eligible entity to carry out an approved project or activity in support of a public purpose and not the direct benefit of the government.

Grantee: Any legal entity to which a grant is awarded and which is accountable to KDOA for the use of the funds received. The grantee is the entire legal entity even if only a particular component of the entity is designated in the grant.

Grantor: The Kansas Department on Aging or other entity that awards a grant.

Grant-supported Project or Activity: Those activities specified or described in an application or in a subsequent submission that are approved by KDOA for funding, regardless of whether federal or state funding constitutes all or only a portion of the financial support necessary to carry them out.

Greatest Economic Need: The need resulting from an income level at or below the poverty threshold established by the U.S. Department of Health and Human Services.

Greatest Social Need: The need caused by non-economic factors, which include physical and mental disabilities; language barriers; and cultural, social, or geographical isolation, including isolation caused by racial or ethnic status that 1) restricts the ability of an individual to perform normal daily tasks, or 2) threatens the capacity of the individual to live independently.

Grievance: A complaint, either written or oral, by an individual denied OAA services or expressing dissatisfaction with OAA service delivery or the quality of care.

Guardian: An individual or corporation appointed by the court to act on behalf of the individual and to provide for their care, treatment, habilitation, education, support and maintenance. For a guardian to be appointed, the court must find that the ward (the person for whom a guardian is appointed) is an adult person whose ability to receive and evaluate relevant information, or to effectively communicate decisions, is impaired such that the person lacks the capacity to meet essential requirements for such person's physical health, safety, or welfare (KSA 59-3051(a) and (e) and KSA 59-3075, as amended).

Home and Community Based Services/Frail Elderly (HCBS/FE): The HCBS/FE Waiver Program is an exception to the Medicaid State Plan that allows the State to provide home and community based services to customers who are at risk of entering a nursing facility.

Home Health Services: Any of the following services provided at the residence of the customer on a full-time, part-time or intermittent basis: Nursing, physical therapy, speech therapy, nutritional or dietetic counseling, occupational therapy, respiratory therapy, home health aide, attendant care services or medical social service (KSA 65-5101 (c) as amended).

Home Plus: Any residence or facility caring for not more than eight individuals not related within the third degree of relationship to the operator or owner by blood or marriage unless the

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resident in need of care is approved for placement by the Secretary of the Department of Social and Rehabilitation Services, and who, due to functional impairment, needs personal care and may need supervised nursing care to compensate for activities of daily living limitations. The level of care provided residents shall be determined by preparation of the staff and rules and regulations developed by KDOA (KSA 39-923 as amended).

Indian Tribal Organization: The recognized governing body of any Indian tribe, or any legally established organization of Indians which is controlled, sanctioned, or chartered by the governing body of an Indian tribe.

Indirect Costs: Costs that are incurred by a grantee for common or joint objectives and cannot be identified specifically with a particular project or program. These costs are also known as “facilities and administrative costs.”

Instrumental Activities of Daily Living (IADLs): Medical and/or functional aspects of daily living which would lead to significant health and safety risk unless services are provided, which consist of meal preparation, shopping, medication monitoring/treatments, laundry/housekeeping, money management, telephone, and transportation.

Kansas Aging Management Information System (KAMIS): The official electronic repository of data about KDOA's customers and the services they receive. KAMIS data includes the community-based services planned and provided to customers who do not enter nursing facilities. This customer-based data is used by KDOA and service providers to coordinate activity, reimburse providers for services rendered, and manage Aging programs.

Kansas Resident: An individual who resides in, rents, or owns property in Kansas (KSA 75-5928(a) as amended).

Level of Care: A measurement of the functional needs of the customer, as determined through an assessment or reassessment, based on impairment, in ADLs, IADLs, Cognition, and Risk Factors.

Licensed Health Professional: A physician, physician assistant, nurse practitioner, professional nurse, practical nurse, or social worker, functioning in accordance with the practice parameters for that profession.

Local Government: Any county, city, township, school district, or other political subdivision of the state, or any agency, bureau, office, or department thereof; or any Indian tribal organization. The term does not include institutions of higher education and hospitals.

Long Term Care Threshold: Means the level of care criteria, as established by the state and approved in the waiver to the Medicaid State Plan for HCBS/FE to determine eligibility for Medicaid Long Term Care Programs, which include the Nursing Facility program, HCBS/FE, and PACE. It is also utilized for certain services provided through the Senior Care Act program.

Maintenance of Effort (MOE): A federal Title III requirement established for non-federal expenditures. If non-federal expenditures for Title III programs spent for both services and administration are less than the three previous fiscal year average, the state's allotments for supportive and nutrition services under Title III will be reduced by a percentage equal to the percentage by which the state reduces its expenditures.

Match: Refers to a statutorily specified percentage of non-federal participation in allowable program or project costs that must be contributed by a recipient in order to earn federal or state funding, or a not-to-exceed percentage of federal participation.

Medical Care Provider: Means a physician, a physician assistant (PA), or an advanced registered nurse practitioner (ARNP).

Modified Accrual Basis of Accounting: Revenues are recognized in the period in which they become available and measurable, and expenditures are recognized at the time a liability is incurred pursuant to appropriation authority.

Modified Cash Basis of Accounting: May be the same as the modified accrual basis of accounting, or may be an accounting system under which revenues are recognized on a cash basis and expenditures are recognized on an accrual basis.

Monitoring: A process in which a grant's programmatic performance and business management performance are assessed by reviewing information gathered from various required reports, audits, site visits, and other sources.

Multipurpose Senior Center: A community facility for the organization and provision of a broad spectrum of services for older persons including health, mental health, social, nutritional, educational services and recreational activities.

Non-Federal Share: That portion of allowable project costs not borne by the federal government.

Notice of Action (NOA): Written notification to a customer, provider, or other authorized person of an action taken or to be taken.

Notification of Grant Award (NGA): The document that KDOA issues to the grantee, awarding financial assistance for the purchase of services and specifying the terms of the grant.

Obligation: The amounts of orders placed, contracts and subawards, goods and services received, and similar transactions during the grant period that will require payment during the same budget period or within 75 days following the last day of the project period.

Older Americans Act (OAA): The Act, passed in 1965, was the first federal program to focus on community-based services for older persons. The OAA is a federal formula grant program with specific services and activities for persons aged 60 and older. The OAA approach is based

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on service provision, rather than on income support or vouchers. The OAA operates on a contribution basis. The OAA provides assistance through grants to state and AAAs for development and delivery of a coordinated system for persons 60 and older. Persons under the age of 60 may be eligible for specific services under the Act.

Planning and Service Area (PSA): A geographic area of the state designated by KDOA for the purpose of planning, development, delivery and overall administration of services under an area plan.

Power of Attorney: A written document whereby one person, as principal, gives legal authority to another to act as agent and perform certain specified acts or kinds of acts on behalf of the principal. The document may be effective immediately when executed or at a specified future date or upon the occurrence of a specified condition. The agent is attorney in fact whose power is revoked on the date of termination specified in the document or on the date when the agent acquires actual knowledge of the death of the principal or that the authority granted in the document has been suspended, modified, or terminated. Such power may be either general (full) or special (limited). Agents must keep records of receipts, disbursements, and transactions and may not commingle the principal's funds or assets with their own (KSA 58-650 et seq., as amended). (See "Durable Power of Attorney" and "Durable Power of Attorney for Health Care Decisions.")

Prior Approval: Written consent or issuance of an award by KDOA in response to a written request from the grantee to incur costs or take other action that requires such approval. If the costs or other actions are specifically identified in an application, approval of the application and issuance of an award based thereon constitutes such authorization.

Program for All-Inclusive Care for the Elderly (PACE): PACE integrates medical and long term care services for the frail elderly. Enrollees must be at least 55 years old, live in the catchment area of the PACE program, and be assessed to meet the eligible level of care established in the Medicaid State Plan. The goal of PACE is to maximize each enrollee's autonomy and continued residence in the community and to provide quality care at a lower cost to Medicare and Medicaid relative to their payments in the traditional system.

Program Income: Gross income earned by a grantee or contractor that is directly generated by the project, program, or activity, or earned as a result of the award during the project period. Voluntary contributions received from customers who wish to contribute to the cost of the service is a form of program income. Interest earned on advances of federal funds is not program income.

Program or Project Costs: The total allowable costs incurred by a grantee (and the value of third party in-kind contributions) in accomplishing the objectives of the award during the project period.

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Project Period: The total time for which support of a project has been programmatically approved. A project may be approved for a multi-year period, but generally is funded in annual increments known as “budget periods.”

Reasonable Cost: A cost whose nature or amount does not exceed that which would be incurred by a prudent person under the circumstances prevailing when the decision was made to incur the cost.

Recipient: The organization that receives a grant or contract from KDOA and is responsible and accountable for the use of the funds provided and for the performance of the grant or contract-supported project or activity. The recipient is the entire legal entity even if a particular component is designated in the NGA or contract.

Redesignation: A change in the geographic boundaries of a PSA or selection of an entity as a AAA that is different from the area previously designated for a particular PSA.

Reimbursement: A payment made to a grantee or contractor upon its request after it makes cash disbursements.

Residential Health Care Facility: Any place or facility caring for six or more individuals not related within the third degree of relationship to the administrator, operator or owner by blood or marriage and who, by choice or due to functional impairments, may need personal care and may need supervised nursing care to compensate for activities of daily living limitations and in which the place or facility includes individual living units and provides or coordinates personal care or supervised nursing care available on a 24 hour, seven day a week basis for the support of resident independence. The provision of skilled nursing procedures to a resident in a residential health care facility is not prohibited by this act. Generally, the skilled services provided in a residential health care facility shall be provided on an intermittent or limited term basis, or if limited in scope, a regular basis (KSA 39-923 as amended). Residential Health Care apartments do not have kitchenettes and may have shared bathing units.

Risk Factor: Factors that put an individual’s health and welfare at risk to include: falls; neglect, abuse, and/or exploitation experienced; lack of informal support; and behavior.

Senior Care Act Program (SCA): Provides in-home services to customers age 60 or older that meet the functional need criteria. Services vary by county and are limited by budget constraints. The customer’s co-pay is established on a sliding fee scale based on the customer’s liquid assets and federal poverty guidelines. The customer’s co-pay may be up to 100% of the cost of services.

Service Category: A line item or a group of line items. Under Title III-B, the grouped categories are Access, In-Home, Legal, and Other. Under Title III-E, the grouped category is Supplemental Services. The remaining Title III-B, III-E, and all Title III-C and III-D services are individual line items.

Significant Change In Condition in Relation to Community Based Services and the Uniform Assessment Instrument Process: A change in the customer's status that impacts the scoring of two (2) or more ADLs, IADLs, and/or Risk Factors including cognition, and results in a change to the plan of care. For Senior Care Act, this may also include a change in family status.

Subaward: Financial assistance in the form of money or property in lieu of money provided under an award by a grantee to an eligible subrecipient (or by an eligible subrecipient to a lower-tier subrecipient). The term includes financial assistance when provided by any legal agreement even if the agreement is called a contract, but does not include procurement of goods or services.

Subgrantee: Any legal entity to which a subgrant is awarded and that is accountable to the grantee for the use of the grant funds.

Subrecipient: An entity that receives a subaward from a grantee or another subrecipient under an award of financial assistance and is accountable to the grantee or other subrecipient for the use of the federal and state funds provided by the subaward.

Terms and Conditions of Award: All legal requirements imposed on a grant by KDOA, whether based on federal or state statute, regulation, policy, or other document referenced in the NGA, or specified by the NGA itself. In addition to general terms and conditions, the NGA may include other conditions that are considered necessary to attain the award's objectives, facilitate post-award administration, conserve grant funds, or otherwise protect the federal and state governments' interests.

Third-party: A party involved in the program or project, including volunteers, that is not a principal party to the grant or contract. Board members and staff, regardless of their duty status, are not considered third-party.

Third party In-kind Contributions: The value of non-cash contributions provided by non-Federal third parties. Third party in-kind contributions may be in the form of real property, equipment, supplies and other expendable property, and the value of goods and services directly benefiting and specifically identifiable to the project or program.

Total Program or Project Costs: The total allowable costs (both direct and indirect) incurred by the grantee to carry out a grant-supported project or activity. Total project or program costs include costs charged to the award and costs borne by the grantee to satisfy a matching requirement.

Unallowable Cost: A cost specified by law or regulation, federal cost principles, or term and condition of award that may not be reimbursed under a grant or contract.

Unawarded Funds: Funds that have been allocated using the interstate funding formula but have not been awarded on a Notification of Grant Award (NGA).

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Unearned OAA Funds (Carryover): Those funds that have been awarded to a grantee either that have not been expended by the grantee or that have been expended for unallowable costs due to the grantee's failure to comply with specific regulations, policies, or grant conditions governing the award or expenditures with insufficient match. (See Sections 7.1.6 and 8.1.6.E)

Uniform Assessment Instrument (UAI): An assessment instrument used for in-home service programs administered by KDOA.

Unliquidated Obligations: The amount of obligations incurred by the grantee or contractor that has not been paid. Expenses incurred that have not yet been paid as of the reporting period end date (cash basis) or expenses that have been incurred but not yet recorded (accrual basis). (Federal Register (FR) 69244 dated 12/7/07)

Unobligated Balance: The portion of funds authorized by KDOA that has not been obligated by the grantee.

Vision Card: A debit card given to eligible food assistance (formerly food stamp program) recipients for the purchase of food at groceries and other food vendors based on the amount of benefits the individual is eligible to receive.

Voluntary Contributions: Customer donations received for services provided with OAA funding, wherein the opportunity to contribute to the cost of the service was provided to each individual who received services under the OAA and the method of solicitation was non-coercive and confidential.

Volunteer Services: Unpaid services provided to a grantee or subgrantee by individuals, which are valued at rates consistent with those ordinarily paid for similar work in the grantee's or subgrantee's organization. If the grantee or subgrantee does not have employees performing similar work, the rates will be consistent with those ordinarily paid by other employers for similar work in the same labor market. In either case, a reasonable amount for fringe benefits may be included in the valuation.

Withholding of Payment: An action taken by KDOA, after appropriate administrative procedures have been followed, that restricts a grantee's ability to access its grant funds until the recipient takes corrective action required by KDOA.