

RESOLUTION ACCEPTING ADDITIONAL FUNDING WITH DIRECTION HOME OF EASTERN OHIO, INC. DESIGNEE OF OHIO DEPARTMENT OF AGING FOR OLDER AMERICANS TRANSIT FARE ASSISTANCE FOR THE ASHTABULA COUNTY TRANSPORTATION SYSTEM

WHEREAS, Julie Carlo, Ashtabula County Transportation System, has presented the Direction Home of Eastern Ohio, Inc. designee of Ohio Department of Aging additional funding agreement for Older Americans Transit Fare Assistance for the approval of the Board, to-wit:

Scope of Agreement: To provide persons sixty years of age or older and their spouses, regardless of age, living in the Ashtabula area with Transportation service(s) in cooperation with Area Agency, State Agency, and the United States of America, and in conformity with the programs instituted and funded by them for the benefit of older Americans. **This agreement is additional funding that they received and are awarding to ACTS for the current contract year.**

Provider of Grant Funds: Direction Home of Eastern Ohio, 5555 Youngstown-Warren Rd., Suite 2685, 2nd Floor, Niles, OH 44446

Computation of Grant:

| | |
|----------------------------|-------------------|
| Title III-B | \$5,665.00 |
| Title III-D | .00 |
| Local Cash | \$1,000.00 |
| Local In-kind | .00 |
| Program Income (estimate) | .00 |
| Cost Share | .00 |
| Block Grant AIL | .00 |
| Block Grant/Home Repair | .00 |
| Block Grant/Transportation | .00 |
| Other State | .00 |
| Other Resources | .00 |
| Total | <u>\$6,665.00</u> |

| Service | Title III Block Grant Unit Rate | Contract Maximum Amount | # of Units |
|----------------|---------------------------------|-------------------------|------------|
| Transportation | \$8.96 | \$5,665.00 | 632 |

Grant Period: retroactive to May 1, 2026 through December 31, 2026; now

THEREFORE, BE IT RESOLVED, By the Board of Commissioners of Ashtabula County, Ohio, that the above agreement is approved in accordance with a copy of said agreement on file in this office.

BE IT FURTHER RESOLVED that the President of the Board, on behalf of the Board of Commissioners of Ashtabula County, is authorized to execute any and all necessary documents.

**ASHTABULA COUNTY COMMISSIONERS
CERTIFICATION PAGE**

Resolution No. 2026-216

May 05, 2026

RESOLUTION ACCEPTING ADDITIONAL FUNDING WITH DIRECTION HOME OF EASTERN OHIO, INC. DESIGNEE OF OHIO DEPARTMENT OF AGING FOR OLDER AMERICANS TRANSIT FARE ASSISTANCE FOR THE ASHTABULA COUNTY TRANSPORTATION SYSTEM

Upon the motion of J.P. Ducro IV, seconded by Kathryn L. Whittington.

VOTE:

Casey R. Kozlowski
Kathryn L. Whittington
J.P. Ducro IV

Aye
Aye
Aye

CERTIFICATE OF CLERK

IT IS HEREBY CERTIFIED that the foregoing is a true and correct transcript of a resolution acted upon and duly passed by the Board of County Commissioners of Ashtabula County, Ohio, on the date noted above.

Crystal Sturgill

Crystal Sturgill, Clerk of the Board
Board of County Commissioners
Ashtabula County, Ohio



**PROVIDER AGREEMENT
OLDER AMERICANS ACT TITLE III B, D AND STATE BLOCK GRANT**

This Provider Agreement (“Agreement”), is entered into by and between Direction Home of Eastern Ohio, Inc. (hereinafter referred to as “Area Agency” or “Agency”), 1030 N. Meridian Rd. Youngstown, Ohio 44509, and **Ashtabula County Commissioners** (hereinafter referred to as “Provider”), UEI #NAKFH1BNFSR2. The purpose of this Agreement is to define the terms and conditions under which the Provider is to furnish and bill for services.

The Agency and Provider hereby agree to the following terms and conditions.

Article I: Statement of Work

1. This Agreement shall comply with the Older Americans Act, Subparts C and D of 45 C.F.R. Part 1321, and 45 C.F.R. 75.327–75.335, including Appendix II to 45 C.F.R. Part 75, and any additional federal or state law, rule, or executive order with jurisdiction over this Agreement or any service procured through this Agreement.
2. This Agreement is for the provision of services paid with federal funds that the United States Department of Health and Human Services appropriated to the Ohio Department of Aging (“AGE” or “State Agency”). The State Agency, in turn, allocated federal funds to the Area Agency. The Agreement is subject to all applicable federal and state laws, regulations, rules, executive orders with jurisdiction over the Agreement, and award specific terms, for any service procured through the Agreement.
3. As of the **EFFECTIVE AWARD DATE** (as defined below) of this Agreement, as specified in the **PROGRAM PERIOD/BUDGET PERIOD** (as defined below) Provider agrees to provide persons sixty years of age or older living in **Ashtabula County** with Program Services listed below-in cooperation with the Area Agency, State Agency, and the United States of America, and in conformity with the programs instituted and funded by them for the benefit of older Americans through the **TERMINATION DATE** (as defined below).
4. The Area Agency, pursuant to provisions of the Older Americans Act (“OAA”) and subject to receipt of funds from the State Agency, provides funding to the Provider for the Project upon the terms and conditions as set forth herein calculated as follows:

Award # 2026-02 Supplemental

| Assistance Listing Number (if applicable) | Assistance Listing Title or Other Description | Amount |
|--|--|---------------|
| 93.044 | Special Programs for the Aging, Title III-B, Grants for Supportive Services and Senior Centers | \$5,665.00 |
| 93.043 | Special Programs for the Aging, Title-III D, Disease Prevention and Health Promotion Services | |
| | Local Cash | \$1,000.00 |
| | Local In-Kind | |
| | Program Income | |
| | Cost Share | |
| | State Senior Community Services Block Grant | |
| | Other resources | |
| | Total | \$ 6,665.00 |

Total amount of Federal Funds committed \$5,665.00
 Total amount of state Funds committed \$0.00

5. This agreement is contingent upon the receipt of funding through the State Agency. In the event the funding is not received or is reduced, we reserve the right to amend or withdraw this award.
6. The Provider understands that earning of funds under this contract shall be based on the total number of units provided multiplied by the following unit rates, up to the total amount allocated to each service as described in the Contract Amount.

| Program Service | Unit Rate | Contract Amount | Maximum Number of Units |
|-----------------|-----------|-----------------|-------------------------|
| Transportation | \$8.96 | \$5,665.00 | 632 |

7. Receipt of federal and state funds by Provider does not constitute earnings of such funds. Only those funds expended by Provider in compliance with Area Agency guidelines will be considered earned funds. All unearned funds must be returned to the Area Agency at the end of the **PROGRAM PERIOD/BUDGET PERIOD** (as defined below). The federal share of each Program’s cost is earned and payable only when the cost therefore is accrued and the **NON-FEDERAL SHARE** (as defined below) of the cost has been received by Provider. No expense incurred prior to the **EFFECTIVE AWARD DATE** of the Program Period/Budget Period of this Agreement shall be charged to the Program covered by this Agreement. In the event there exists an accumulation of federal monies from any prior funding period which has not been returned to the Area Agency, such unearned and/or unencumbered federal monies shall be credited against the award for this Program Period/Budget Period. Other resources and Project Income shall be received and disbursed by Provider in the amounts shown above.
8. The Award, and all parts thereof, including the Grant, Project Income, In-Kind and Provider’s Cost Share are to be expended by Provider in accordance with the Proposal and amendments submitted by the Provider, which was utilized in the consideration of this Grant, and with all applicable laws, rules, regulations, policies and procedures of Title III of The Older Americans Act, The Administration on Aging in the U.S. Department of Health and Human Services, State Agency, and Area Agency, all of which are incorporated herein by reference and made a part hereof.
9. The Area Agency reserves the right to reduce or otherwise change the contract amount, including, but not limited to, State Senior Community Service and Title III of the Older Americans Act funds, and Alzheimer’s Respite Program if it appears the Provider will be unable to expend at least 90% or more of the Area Agency funds set forth in this Agreement. At the end of the first quarter, Area Agency and the Provider shall negotiate a contract change to reduce the amount of funding if the Provider has spent less than 15% of its contract. At the end of the second quarter, Area Agency, at its sole discretion, may reduce or otherwise change the funding amount of Provider’s contract if it has spent less than 40% of the total Area Agency contract amount.
10. The Agreement shall comply with any rule in Chapter 173-3 or 173-4 of the Ohio Administrative Code regulating in general or the provision of specific goods or services being procured and shall comply with any additional state law governing or state rule regulating Agreements.
11. The Award is not for research and development.
12. In determination of the unit rate reimbursement at the time of program application the Provider may use a cost allocation method in accordance with 2 CFR 200.405(d).

Article II: Service Delivery

1. The Provider agrees to comply with Area Agency and State Agency conditions of participation, service specifications and any documentation requirements for unit rate services.
2. The Provider is required to obtain authorization from the Area Agency before subcontracting any of its duties under the Agreement to another provider.
3. Provider shall ensure proper documentation exists for any units of service furnished and invoiced by Provider and any subcontractor(s), if applicable
4. Provider agrees to enter the units of service into Wellsky Aging and Disability system (“Wellsky”) for each consumer which supports the units of service invoiced by the Provider.

5. Provider agrees to document the National Aging Program Information Systems (NAPIS) data elements into Wellsky for each consumer for the services Adult Day Care Service, Chore Service, Homemaker, Personal Care, Home Delivered Meals, and Congregate Meals.
6. Provider agrees to remit back to Area Agency any funds paid to Provider by Area Agency due to noncompliance with conditions of participation and/or service specifications and for units not documented as delivered and received by a client.
7. Provider agrees to return any funds received for providing services, if the provision of the services does not comply with the Ohio Administrative Code, the Ohio Revised Code, or any other law that regulates the Provider or the services provided.
8. If Cost Sharing, OAC Rule 173-3-07 applies (consumer contribution) Provider agrees to implement a consumer cost-sharing policy as required under such rule and to allow and encourage voluntary contributions for services reimbursed with Older Americans Act funds under Section 315(b) of the Older Americans Act. Voluntary contributions must be used to expand the services for which consumers contributed, and supplement OAA funds.

Article III: Payment

1. The Provider shall file with the Area Agency a monthly Fiscal Report, which shall be submitted on or before the tenth (10th) day of the following month. Fiscal reports must be submitted monthly, unless agreed to in advance with the Agency.
2. Before the Fiscal Report is submitted, the Provider must update Wellsky for the units of service and all required NAPIS information and attach a copy of the Wellsky input to the Fiscal Report which supports the reimbursement request.
3. The Area Agency has the right to withhold payment if the units of service are not entered in Wellsky and NAPIS data is not updated.
4. Provider shall ensure proper documentation exists for any units of service furnished and invoiced by Provider and any subcontractor(s), if applicable
5. The Area Agency will disburse funds the Provider is entitled to, pursuant to the Agreement, as the same may be revised from time to time, within 30 days following receipt and approval of monthly fiscal reports, receipt of funds from State Agency, the Area Agency's review of Wellsky and determination of compliance with the terms and conditions of this Agreement.
6. The Area Agency reserves the right to reduce or de-obligate either or both of the Provider's Program upon ten (10) day written notice in the event of any de-obligation or reduction of federal or state funds from State Agency to Area Agency.

Article IV: Core Assurances for this Agreement

1. Provider agrees to satisfy the service needs of older persons with the greatest economic and social needs with particular attention to older persons who are low income, are low-income minorities, who have limited proficiency in the English language, who reside in rural areas, and who are at risk for institutional placement.
2. Provider must comply with the following rules of the Ohio administrative code which maybe applicable to this Agreement 173-3-06.1 Adult Day Service, 173-3-06.2 Home Maintenance and Chore, 173-3-06.3 Home Modification, 173-3-06.4 Homemaker, 173-3-06.5 Personal Care, 173-3-06.6 Transportation, 173-3-06.10 Legal Assistance, 173-3-06.12 Outreach and Public Information, 173-3-06.13 Volunteer Management, 173-3-06.14 Disease Prevention and health promotion service, and 173-4-11 Grocery Ordering and Delivery. If a service is not specified in the above rules the Provider agrees to comply with the State Agency specifications of the service containing a description of and conditions for providing the service.
3. All expenses charged or allocated to this grant shall be reasonable, allowable and allocable to this grant, as those terms are defined by the United States office of Management and Budget ("OMB") for purposes of the federal grants awarded by the United States government.
4. Provider is required to sign up for email updates on the AGE's rules on <https://aging.ohio.gov/wps/portal/gov/aging/see-news-and-events/subscribe/subscribe>.

5. Provider may enter into a third-party contract to accomplish the intent and purpose of this Agreement only after the proposed third-party contract has been approved by Area Agency in writing. After approval, Area Agency shall be furnished a copy of any such third-party contract within ten (10) days of execution of such contract and such contract shall be the same as that approved by Area Agency.
6. The Parties agree that no officer, trustee, employee, agent or representative of Area Agency or of Provider, and no other public official of the governing body of the locality or localities where the Project is being carried out, or who exercises any functions or responsibilities in the review or approval of the undertaking or carrying out of the Project, shall participate in any decision relating to the Agreement which affects his or her personal interest, or the interest of any corporations, partnership or association in which he or she is directly or indirectly interested, nor shall any such person have any personal or pecuniary interest, directly or indirectly, in the Agreement of any of the proceeds or grants issued pursuant to this Agreement.
7. Provider must immediately notify the local adult protective service (APS) program once the Provider has reasonable cause to believe a consumer is a victim of abuse, neglect or exploitation, in accordance with section 5101.63 of the Revised Code.
8. Provider agrees to notify the Agency of any significant changes of consumers that the Agency case manages through a care coordination program, that may necessitate a reassessment of consumer needs for goods and services no later than one day after the Provider is aware of repeated refusal to receive goods or services; changes in the consumer's physical, mental or emotional status; documented changes in the consumer's environmental conditions or other significant, documented changes to the consumers' health and safety. If one day after falls on a weekend or legal holiday, the deadline is extended to the day immediately following "one day after" that is not weekend or legal holiday.
9. The Provider must notify the Area Agency and the case-managed consumer in writing of the anticipated last day the provider will provide the service to the case-managed consumer no later than thirty days before the anticipated last day, unless the reason for discontinuing the service is the hospitalization, institutionalization, or death of the case managed consumer; serious risk to the health or safety of the provider; the case managed consumer's decision to discontinue the service; or a similar reason why the provider is unable to notify the Area Agency and the case-managed consumer thirty days before the anticipated last day. The provider shall also notify the case-managed consumer on how to reach a long-term care ombudsman. If the thirtieth day falls on a weekend or legal holiday, the deadline is extended to the day immediately after the thirtieth day that is not on a weekend or a legal holiday.
10. When hiring an applicant for, or retaining an employee in, a paid direct-care position, the Provider is subject to section 173.38 Criminal Records Check rule of the Revised Code and Chapter 173-9 Criminal Records Check of the Administrative Code, or if self-employed, section 173.381 of the Revised Code and Chapter 173-9 of the Administrative Code.
11. If a federal, state, or local government regulatory authority prohibits the Provider from providing the goods or services required by the Agreement, the Provider shall notify the Agency of the disciplinary action, and the Agency shall simultaneous to the date of the regulatory authority discipline action, deem the Provider to be ineligible to be paid with Older Americans Act funds for providing goods or services to consumers.
12. Provider agrees to cooperate with the Area Agency and State Agency, to assess the extent of the disaster impact upon consumers and to coordinate the public and private resources in the field of aging to assist consumers whenever the President of the United States declares that the Provider's service area is a disaster area.

Article V: Control Policies and Monitoring

1. The Area Agency shall monitor Provider's program, its objectives and implementation, as in accordance with the guidelines and directives of the State Agency and in conformity with federal regulations and guidelines established under the Older Americans Act, as amended. Further, as part of its monitoring activities, the Area Agency will provide procedures to correct non-compliance with this Agreement or any applicable law, incorporated in the Area Plan developed by the Area Agency. The Provider shall comply with such corrective measures that may be required and/or directed by Area Agency to fully and completely carry out the intent and purpose of the Older Americans Act, as amended and regulations and provisions issued by the Administration on Aging; Department of Health and Human Services, to implement Title III of the Older Americans Act, as amended. Failure to comply will result in termination of this Agreement.
2. At any time during normal business hours, Area Agency and/or State Agency, or any of their duly designated representatives, or the General Accounting Offices of the United States, or any of its designated representatives, may audit and/or examine the books, records, accounts, and reports, of the

Provider, to determine compliance with conditions or participation and or service requirements. Excerpts or transcriptions may be taken of such books, accounts, reports, including but not limited to records, contracts, invoices, materials, property, payrolls, records of personnel, condition of employment and other data relating to any or all matters covered by the Agreement or arising there from.

3. The Provider is required to participate in good faith in the monitoring of the Provider's provision of services. To participate in good faith includes assisting the Agency and AGE with the scheduling of monitoring and providing the Agency and AGE with access to its business site(s) during the Provider's normal business hours, a place to work in its business site(s), and access to policies and records for each unit of service billed.
4. During monitoring, the Agency will conduct a review of units of service and weaknesses found in the Provider's billing system as a result of monitoring will be considered in the determination of future contract awards.
5. The Provider must comply with single audit requirements found at 2 Code of Federal Regulations Part 200 Subpart F, if applicable. The Audit must be performed by an independent outside auditor, at Provider's sole cost and expense, and is required to be submitted to the Agency within 30 days of the audit report date or no later than 9 months after year end, whichever is earlier.
6. Any property, real, personal, or mixed, tangible or intangible, acquired with federal or state dollars, in whole or in part, and used directly or indirectly in the operation of this Project or related federal, state, regional or local projects shall be subject to continuing inventory control by Provider and public property management procedures during its existence, as authorized by federal and state constitutions, federal and state statutes, or by the rules and regulations of the respective agencies of each, touching and concerning the management of public property; such property shall be subject to continuing inalienable equitable interest, right of title, vested in the initial funding source or agency, its successors or assigns.

Article VI: Records and Documents

1. Provider shall ensure proper documentation exists for any units of service furnished and invoiced by Provider and any subcontractor(s), if applicable.
2. Provider agrees to retain any record relating to costs, work performed, supporting documentation for payment of work performed, and all deliverables for monitoring by the Area Agency and State Agency and for auditing by the state auditor, the inspector general, duly- authorized law enforcement officials, and the agencies of the United States government for a minimum of three years. If a record is monitored or audited, the Provider shall retain it until the monitoring or auditing is concluded and all issues are resolved, even if doing so requires the Provider to retain the record for more than three years.
3. Provider is permitted to use an electronic system to collect and retain records.
4. Provider is required to retain any record related to services provided, including activity plans (if required), assessments (if required), permits (if required), evaluations (if required), and mandatory reporting items to verify a unit of service, until all of the following period of time has passed:
 - a) Three years after the date the Provider no longer retains the employee.
 - b) The date on which AGE, the Agency, or a duly-authorized law enforcement official concludes monitoring the records and any findings are finally settled.
 - c) The date on which the auditor of the state of Ohio, the inspector general, or a duly authorized law enforcement official concludes an audit of the records and any findings are finally settled.
5. Provider is required to retain all records regarding employee background checks and qualifications, including records on initial qualifications, successful completion of orientation and subsequent training (if required), and performance reviews (if required) until all of the following periods of time have passed:
 - a) Three years after the date the Provider no longer retains the employee.
 - b) The date on which AGE, the Agency, or a duly-authorized law enforcement official concludes monitoring the records and any findings are finally settled.
 - c) The date on which the auditor of the state of Ohio, the inspector general, or a duly authorized law enforcement official concludes an audit of the records and any findings are finally settled.

Article VII: Confidentiality

1. Provider shall be knowledgeable about and comply with all applicable federal and state laws establishing privacy/confidentiality requirements for the provision of services hereunder, including: the "Health Insurance Portability and Accountability Act of 1996" (HIPAA); HIPAA regulations set forth in 45 C.F.R. Parts 160, 162, and 164, as amended; the Medicaid requirements set forth in 42 CFR 431.300 to 431.307, as amended; sections 5160.45 to 5160.481 of the Revised Code, as amended; and this Agreement.

2. The Provider is prohibited from using or disclosing any information concerning a consumer for any purpose directly associated with the provision of services, unless the Provider obtains and retains the consumer's written or electronic informed consent to disclose and the purpose for the disclosure is associated with the Provider's provision of services to the consumer.
3. The Provider is prohibited from using or disclosing any information concerning a consumer for any purpose not directly associated with the provision of services, even if the Provider obtains and retains the consumer's written or electronic informed consent to do so.
4. The Provider is required to store each consumer's electronic records in a password-protected file and physical records in a designated, locked storage space.
5. Provider shall take reasonable steps to safeguard information about individuals, including but not limited to, each individual's name and address; information about the services provided to the individual; the individual's social and economic conditions; any information related to an assessment of the individual's personal information; the individual's medical information, including diagnosis and past history of disease or disability; any information received to verify the individual's income, income eligibility, and amount of medical assistance payments; any information received in connection with the identification of legally liable third-party resources and any client liability payments; and the individual's social security number.
6. In fulfilling its obligations hereunder, Provider agrees that it, its employees, and any subcontractors or business associates of Provider are all bound by the same standards of confidentiality that apply to employees of AGE's Designee and the State of Ohio. The Provider assumes responsibility for ensuring compliance with these standards of confidentiality by its employees, subcontractors, and business associates.
7. Provider acknowledges its failure to comply with the confidentiality requirements of this Agreement and section 5160.45 of the Revised Code may result in the termination of this Agreement and the imposition of criminal penalties under section 5160.99 of the Revised Code.

Article VIII: Other

1. Provider shall, at all times, comply fully with the requirements of Section 504 of the Rehabilitation Act of 1973, as the same shall be amended from time to time, both as to employment of the services to the handicapped.
2. The parties hereto mutually agree not to discriminate against any recipient, participant or potential beneficiary of the program because of race, color, sex, gender, age, religion or religious creed, national origin, ancestry, citizenship, marital status, sexual orientation, gender identity, gender expression, genetic information, physical or mental disability, military or veteran status or another other characteristic protected under federal, state and local law.

Article IX: Equal Employment Opportunity

1. Provider shall not discriminate against any employee or applicant for employment because of race, color, sex, gender, age, religion or religious creed, national origin, ancestry, citizenship, marital status, sexual orientation, gender identity, gender expression, genetic information, physical or mental disability, military or veteran status or another other characteristic protected under federal, state and local law. The Provider shall ensure that applicants are hired, and that employees are treated during employment without regard to their race, color, sex, gender, age, religion or religious creed, national origin, ancestry, citizenship, marital status, sexual orientation, gender identity, gender expression, genetic information, physical or mental disability, military or veteran status or another other characteristic protected under federal, state and local law. Such action shall include, but not be limited to the following: Employment; Upgrading; Demotion or Transfer; Recruitment Advertising; Layoff or Termination; Rates of Pay or other forms of Compensation; and selection for Training, including Apprenticeship.
2. Provider agrees to post in conspicuous places, available to employees and applicants for employment, notices stating that the Provider will comply with all applicable federal and state non-discrimination laws. The Provider shall, in all solicitations or advertisements for employees placed by or on behalf of the Provider, state that all qualified applicants shall receive consideration for employment without regard to race, color, sex, gender, age, religion or religious creed, national origin, ancestry, citizenship, marital status, sexual orientation, gender identity, gender expression, genetic information, physical or mental disability, military or veteran status or another other characteristic protected under federal, state and local law.

Article X: Amendment and Termination of this Agreement

1. Any proposed changes or modifications to the approved Proposal, or the Approved Program Budget for each Program, including, but not limited to, deletions, transfers, or additions, shall be submitted in writing by Provider to Area Agency, c/o Chief Financial Officer. Upon notification by the Area Agency, in writing, and the Area Agency's approval, a revised written agreement will be signed by both parties.
2. If an amendment, repeal, or rescission of any law, rule, or regulation cited in the Agreement would change the responsibilities of the Agency, the Provider, or both the Agency and Provider, then the Agency, the Provider, or both the Agency and Provider shall comply with the amendment, repeal, or rescission of the law, rule, or regulation even if the Agreement is not updated before the amendment, repeal, or rescission takes effect. Such amendment, repeal, or rescission cited in this Agreement will result in correlative modification of this Agreement without the necessity of executing a written amendment.
3. No term, covenant or condition of this Agreement shall be waived except in a writing signed by a duly authorized representative of Area Agency, and such waiver shall not affect Provider's obligation to subsequently comply with said term, covenant or condition, or any other term, covenant or condition of this Agreement. Any forbearance or indulgences by Area Agency in any respect whatsoever shall not constitute a waiver of any other term, covenant, or condition to be performed by Provider. The Area Agency shall be entitled to invoke any remedy available to it under this Agreement, or by law, despite any such forbearance or indulgence.
4. The Agreement may be terminated, in whole or in part, at any time for violation by Provider of any term or requirements of this Agreement, including but not limited to, fraud, noncompliance with reporting requirements, or unauthorized deviation from the terms of the Proposal.
5. The Agency may terminate this Agreement without obligation if State Agency and/or Area Agency determine through the appeals process or through monitoring that this Agreement was entered into inappropriately.
6. This Agreement shall automatically terminate on the **TERMINATION DATE**, however, either of the parties shall have the right to terminate the Agreement in whole or in part, at any time prior to the **TERMINATION DATE**, by giving the other party sixty (60) days written notice of such desire to terminate. An independent audit (the "Audit") may required to be conducted by a certified public accounting firm acceptable to Area Agency at the termination of the Agreement, and as a condition for continuation of funding for future Program Periods/Budget Periods. Upon termination of this Agreement, all finished and unfinished reports required to be prepared by Provider shall, at the option and direction of Area Agency, be delivered to it. Provider shall not be relieved of liability to the Area Agency for damages or obligations sustained by it by virtue of any breach of this Agreement by Provider as the result of the termination of this Agreement. Area Agency may, at its sole discretion at any time during the Program Period/Budget Period, withhold any payments due to Provider hereunder for the purpose of insuring complete and timely satisfaction of Provider's obligations hereunder, and to ensure sufficient funds are available to fulfill Provider's obligation hereunder until such time as the exact amount due Area Agency from Provider is determined and paid by Provider.
7. If the Agreement is renewable or covers a multi-year term, the Agreement shall be subject to the requirements for renewable or multi-year contracts under rule 173-3-05 of the Administrative Code.
8. Provider acknowledges and agrees that all vehicles purchased by Provider with funds from the Area Agency must be returned to the Area Agency in the event the Provider's Agreement is not renewed by the Area Agency and/or the Agreement is otherwise terminated by either party for any reason whatsoever. In such event, the vehicle will be delivered to the Area Agency with the signed Certificate of Title within ten (10) days following the non-renewal or termination of the Agreement. Upon receipt of the vehicle and Certificate of Title, the Provider will be paid the percentage of the local share it contributed towards the initial purchase of the vehicle based upon the then current loan value of the vehicle as set forth in the latest Central Edition N.A.D.A. Used Vehicle Guide.

Article XI: Appeal Right and Procedure

1. If service under this Agreement is reimbursed by Older Americans Act funds, Provider has a right to appeal a decision concerning this Agreement under rule 173-3-09 of the Ohio Administrative Code.
2. Appeal Procedure:

(A) Introduction:

(1) Provider may request an administrative hearing ("hearing") to appeal any adverse action that Area Agency has taken against Provider.

(2) Area Agency and AGE shall honor all written or electronic hearing requests subject to the conditions in this procedure.

(3) A hearing under this procedure is not an adjudication hearing under Chapter 119. of the Revised Code.

(B) Area Agency level hearings:

(1) Process: Area Agency has on its website or in a document that is readily accessible by providers its process for any provider to appeal an adverse action related to an Area Agency-Provider agreement (Provider Agreement) paid, in whole or in part, with Older Americans Act funds.

(2) Final Area Agency decision: After Area Agency conducts an administrative hearing, it shall forward the Provider's request for the hearing and Area Agency's final decision on the matter to AGE no later than five days after the date Area Agency renders its final decision. If the fifth day falls on a weekend or legal holiday, the deadline is extended to the day immediately following the fifth day that is not on a weekend or legal holiday.

(C) AGE-level hearings:

(1) Area Agency first: Provider may request an administrative hearing before AGE only if Provider fully complied with the process for appealing an adverse action by Area Agency and if Area Agency has rendered its final decision on the appeal.

(2) Request a hearing: Provider may submit a written or electronic request to AGE if it does so no later than fifteen days after the date Area Agency renders its final decision and if the request describes the adverse action Provider is appealing and why Provider believes the Area Agency's decision on the matter was inappropriate. If the fifteenth day falls on a weekend or legal holiday, the deadline is extended to the day immediately following the fifteenth day that is not on a weekend or legal holiday.

(3) Scheduling a hearing: After AGE receives the request for an administrative hearing, AGE shall, in a timely manner, schedule a hearing and select a hearing officer to preside over the hearing.

(4) Hearing process:

(a) The hearing officer shall afford an adequate opportunity for both Provider and the Area Agency to present their positions and provide evidence, but may limit or terminate the discussion/testimony under any one or more of the following conditions:

(i) The Provider or the Area Agency is unruly or combative.

(ii) Provider's or Area Agency's discussion/testimony is unnecessarily redundant.

(iii) Provider's or Area Agency's entered into a settlement that resolved the adverse action(s) that prompted the hearing.

(iv) Provider withdraws its request for the hearing in writing or email.

(b) The hearing officer shall make an audio recording of the hearing unless AGE pays for a court reporter to record the hearing.

(c) The hearing officer shall review the testimony or evidence collected at the hearing, then transmit the testimony, evidence, and the hearing officer's recommendations to AGE regardless of whether the Area Agency's action was appropriate.

(5) Final AGE decision: AGE shall render its final decision on the appeal no later than thirty days after the date of the hearing and shall issue the decision and the rationale for the decision to Provider and the Area Agency. If the thirtieth day falls on a weekend or legal holiday, the deadline is extended to the day immediately following the thirtieth day that is not on a weekend or legal holiday.

(D) Hearings vs. court cases:

(1) Provider may seek redress from a court without waiting for the final decision of an Area Agency-level hearing or AGE-level hearing.

(2) If Provider files a lawsuit against Area Agency or AGE, Area Agency or AGE may terminate any in-progress hearing that the provider requested from Area Agency or AGE.

(E) As used in this rule, "adverse action" means Area Agency's action concerning Provider to not award an agreement; to not renew a renewable agreement; to prematurely terminate an agreement; or to terminate a multi-year agreement for the agreement's second, third, or fourth year.

Article XII: Focal Points

Focal Points in Direction Home of Eastern Ohio, Inc. service delivery area:

Ashtabula: **Ashtabula County Council on Aging, Inc.**
4148 Main Ave.
Ashtabula Ohio 44004

Country Neighbor Program
39 South Maple Street
P.O. Box 212
Orwell Ohio 44076

Trumbull: **Girard Multi-Generational Center**
443 Trumbull Ave.
Girard Ohio 44420

Mahoning: **MYCAP Senior Center**
64 Ridge Ave.
Youngstown, Ohio 44502

Columbiana: **Catholic Charities Regional Agency**
Ceramic City Senior Citizens Center
P.O. Box 5086, 600 E 4th Street
East Liverpool Ohio 43920

Article XIII: Indemnification

- 1. The Provider shall indemnify and hold the Agency and the State Agency harmless for any liabilities, claims, suits, demands or other consequences from any cause, and all costs in connection there within, arising out of or relating in any manner to the Provider's performance under this service Agreement unless prohibited by statute.

Article XIV: Contact Information

Contact information for the awarding official at the Agency:
Jody Deflin
Chief Financial Officer
jdeflin@dheo.org
330-505-2438

Article XV: Definitions:

Definitions, as used in this Agreement, the following capitalized terms shall have the meanings set forth below:

"EFFECTIVE AWARD DATE" means **May 01, 2026**.

"EFFECTIVE AWARD DATE" means **"EFFECTIVE FEDERAL AWARD DATE"** if applicable.

"PROGRAM PERIOD" means the period commencing on the **"EFFECTIVE AWARD DATE"** and ending on the **"TERMINATION DATE"**.

"BUDGET PERIOD" means the period commencing on the **"EFFECTIVE AWARD DATE"** and ending on the **"TERMINATION DATE"**.

"NON-FEDERAL SHARE" means, for any Program, the portion of the total Program budget which must be funded by the Provider.

"TERMINATION DATE" means **December 31, 2026**.

This Agreement shall be effective as the **EFFECTIVE AWARD DATE** and shall remain in effect, unless amended or terminated by one or more of the parties, through the **TERMINATION DATE**.

All provisions in this Agreement that by their terms must necessarily be performed after termination or expiration of this Agreement (e.g., records retention, auditing requirements, etc.) shall survive such termination or expiration.

IN WITNESS WHEREOF, the parties hereto, agree to the terms and conditions of the Agreement and have affixed their signatures.

Name of Provider

Signed by:
Casey Kozlowski, President, Board of County Commissioners
 3E6154CBE4DA44C... 5/13/2026

 Provider Authorized Signature Date

Direction Home of Eastern Ohio, Inc.

DocuSigned by:
Joseph Rossi
 6FEE2B473A674C0 4/28/2026

 Joseph Rossi, Executive Director Date