



COMMONWEALTH OF VIRGINIA
DEPARTMENT FOR AGING AND REHABILITATIVE SERVICES

JAMES A. ROTHROCK
Commissioner

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Note: The web addresses (links) in this document may change over time. The Division for the Aging does not attempt to refresh the links once the week has passed. However, this document is maintained on the web for a period of time as a reference. Some links may require registration.



12-220

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MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: Tim Catherman

DATE: July 24, 2012

SUBJECT: Congratulations to RAAA for Recent Grant of \$664,993 for 9 Vehicles

The Fredericksburg Area Metropolitan Planning Organization approved Resolution No. 12-26, amending the FY 2012-2015 the Transportation Improvement Program (TIP). The resolution funds \$664,993 for nine new vehicles for the Rappahannock Area Agency on Aging (RAAA) fleet. The funds are through the Federal Transit Administration (FTA) Section 5310 for Elderly Persons and Persons with Disabilities and Section 5317 (New Freedom) Funds for the Mobility Options Program.



12-221

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MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: Tim Catherman

DATE: July 24, 2012

SUBJECT: Wise County Remote Area Medical (RAM) Clinic

Last week the Remote Area Medical (RAM) Clinic was held in Wise County Fairgrounds. Organizers report the number of patients treated may top 3,000. MEOC is intricately involved with the clinic being involved with RAM Planning Group. They provided transportation services through Empire Transit and shared a booth with UVA Health Sciences Program. MEOC featured:

- Mountain Laurel Cancer Support and Resource Center
- Pharmacy Connect
- Health Wagon providing Medical Care

Representing MEOC were Leigh Ann Bolinsky, Director of Mountain Laurel Resource Center who presented Secretary Hazel with a Walkathon T-shirt. Also assisting were Michael Wampler, Director of MEOC Transit; Jennifer Spangler, VICAP; Bridgett McCoo, Pharmacy Connect and Mitch Elliott providing transit.

The Roanoke Times features Secretary Hazel treating some patients
<http://www.roanoke.com/news/roanoke/wb/311854>.

The Coalfield Progress reported the following numbers.

6,105 services provided

600 received medical services

950-1,000 received vision services

950-1,000 received dental services

over 100 Pap Smears were provided

250 received women's health care

350 mammograms

12 received dermatology plastic

790 glasses were provided

200 received vision vouchers (free eye exam and eye glasses at participating vendors)



12-222

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MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: James A. Rothrock, Commissioner

DATE: July 24, 2012

SUBJECT: MFP position at DMAS

Please see attached employment opportunity at Department of Medical Assistance Services.

**DEPARTMENT OF MEDICAL ASSISTANCE SERVICES
EMPLOYMENT OPPORTUNITY**

This Agency is charged with ensuring proper **MEDICAID** services to qualified recipients. Please visit our website and the Commonwealth of Virginia's website referenced below for additional information and qualifications.

COMMUNITY INTEGRATION SPECIALIST

Role Title: Program Administration Specialist II

Position: #W0260

Pay Band 5 Level I - Hiring Range \$19.69/hr - \$26.00/hr

Closing Date: August 6, 2012

Long-Term Care Division. Challenging opportunity to join the Money Follows the Person (MFP) team as a state resource for community integration of individuals transitioning from institutions. This position develops outreach and marketing strategies, provides technical assistance and community resource identification for both Medicaid and non-Medicaid supports and creates/updates the transition guide for service agencies. Also plans/assists with training initiatives. Ideal candidate must have comprehensive knowledge of human and social service needs of adults and persons with disabilities and all others with special health care needs. Must have significant experience in planning and conducting outreach and marketing initiatives for special populations. Must thoroughly understand transition plan development as well as implementing programs in home- or community-based settings. Requires hands-on experience in outreach development, interpreting regulations and policies and identifying program/policy changes. Must have experience creating program policies and procedures. Requires demonstrated ability to work independently, work on multiple complex projects simultaneously, and work with a team to problem solve issues as they arise. Must be able to communicate effectively both orally and in writing. Proficiency using PC's including spreadsheet, project management, and presentation software applications is a must. Knowledge of Medicaid preferred. Degree with major study in social work, human services, health care or marketing preferred; advanced degree preferred.

ONLINE STATE APPLICATION REQUIRED

Resumes will not substitute for state applications. DMAS will only accept online applications submitted through the Recruitment Management System (RMS) by 5:00 p.m. on the closing dates referenced above.

FAXED, E-MAILED, OR PAPER APPLICATIONS WILL NOT BE ACCEPTED

Receptionist: 804-786-5408, TDD 800-343-0634

Web Sites for Vacancy Listings

RMS: <http://jobs.agencies.virginia.gov/applicants/Central?search=602>

DMAS: http://dmasva.dmas.virginia.gov/ab-position_vacancies.htm

Applicants needing accommodation to apply for openings should contact the DMAS receptionist for additional information.

EEO/AA/ADA



12-223

COMMONWEALTH of VIRGINIA
Department for Aging and Rehabilitative Services

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: Kathy Miller, Director of Programs

DATE: July 24, 2012

SUBJECT: FTC Alert: Scammers Out to Trick Consumers
Using the Supreme Court's ACA Ruling

As soon as the U.S. Supreme Court ruled on the Affordable Care Act, scam artists began making calls claiming to be from the government. They are saying that under the Affordable Care Act, they need to verify some personal information, such as bank account numbers, credit card numbers, Social Security numbers and Medicare ID. Please see the attached consumer alert and make your clients aware of this new scam. The government will never call an individual and ask for this personal information.

FTC Consumer Alert

Federal Trade Commission ■ Bureau of Consumer Protection ■ Division of Consumer & Business Education

Scammers Out to Profit on U. S. Supreme Court's Ruling on the Affordable Care Act

It's enough to make you sick. No sooner had the U.S. Supreme Court ruled on the Affordable Care Act than scam artists began working the phones. Claiming to be from the government, they're saying that under the Affordable Care Act, they need to verify some information. For example, they might have the routing number of the person's bank, and then use that information to get the person to reveal the entire account number. Other times, they have asked for credit card numbers, Social Security numbers, Medicare ID, or other personal information.

The Federal Trade Commission, the nation's consumer protection agency, cautions you not to give out personal or financial information in response to unsolicited phone calls, emails, or knocks on your door. Scam artists want your information to commit identity theft, charge your existing credit cards, debit your checking account, open new credit card, checking, or savings accounts, write fraudulent checks, or take out loans in your name.

If you get a call from someone who claims to be from the government and who asks for your personal information, hang up. It's a scam. The government and legitimate organizations with which you do business have the information they need and will not ask you for it. Then, file a complaint at ftc.gov or call toll-free, 1-877-FTC-HELP. If you think your identity's been stolen, visit ftc.gov/idtheft or call 1-877-ID-THEFT. You also can file a complaint with your state Attorney General.

For more information about the federal health care law, visit HealthCare.gov.

The FTC works to prevent fraudulent, deceptive and unfair business practices in the marketplace and to provide information to help consumers spot, stop and avoid them. To file a complaint or get free information on consumer issues, visit ftc.gov or call toll-free, 1-877-FTC-HELP (1-877-382-4357); TTY: 1-866-653-4261. Watch a new video, *How to File a Complaint*, at ftc.gov/video to learn more. The FTC enters consumer complaints into the Consumer Sentinel Network, a secure online database and investigative tool used by hundreds of civil and criminal law enforcement agencies in the U.S. and abroad.

Produced in cooperation with the Office of the Washington State Attorney General

July 2012

ftc.gov



COMMONWEALTH of VIRGINIA
Department for Aging and Rehabilitative Services

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: Kathy Miller, Director of Programs

DATE: July 24, 2012

SUBJECT: Medication Management Service Standard

Following is the new Service Standard for Title III-B Medication Management Services that will become effective 7/31/12. It will be posted to the Service Provider section of the VDA website in the near future. Please note that the unit of service for medication management will continue to be individual hours. If you have questions, please contact me at: kathy.miller@dars.virginia.gov or 1-804-662-9341.

**MEDICATION MANAGEMENT
DEPARTMENT FOR AGING AND REHABILITATIVE SERVICES
VIRGINIA DIVISION FOR THE AGING
SERVICE STANDARD**

Definitions

Medication Management Services refer to the following activities:

Medication management: Information and education that helps older citizens understand how to take prescription, over-the-counter (OTC), and herbal medications in a safe and proper manner including following the regimen provided by their physician or pharmacist. Includes information about the use of devices (pill boxes, pill cutters, timers, etc.) that assist persons to take their medications properly.

Medication screening: Referral of older citizens to a physician or pharmacist for information and assistance with their medications. May include invitations to pharmacists to provide this information on an individual basis and/or in group settings.

Medication education: Provision of information to older citizens about prescription, OTC, and herbal medications including common side effects, the dangers of mixing medications, and other issues related to medication management and screening. May include the development of brochures, videos, or other materials or resources that provide information about, or assistance with, the proper management of prescription, OTC, and herbal medications.

Eligible Population

Medication management Services are targeted to persons 60 years of age or older. Priority shall be given to older individuals with greatest economic and social need, with special emphasis on low- income minority individuals, older individuals with limited English proficiency, older persons residing in rural or geographically isolated areas, and older individuals at risk for institutional placement.

Service Delivery Elements

Program Requirements

The purpose of this program is to encourage older persons to communicate with their physician(s) and pharmacist about medications and to provide services to prevent medication misuse and adverse medication reactions. Services may be provided directly to older persons. Information and/or training about medication management may also be provided to family members, friends, and health care and human services professionals who work with or come into contact with older persons.

Assessment

- If the client does not already have an assessment in the VDA-approved electronic client database, a Virginia Service – Quick Form is required for each person who participates in a medication management program activity where individual hours will be entered into the client database.

- Use of the Virginia Service – Quick Form is recommended, but not required, if there are only group hours or contacts that will not be entered into the VDA-approved electronic client database.
- The answer to the question “Is Client in Federal Poverty?” (answer Yes or No) must be asked and recorded in the VDA-approved electronic client database.
- Any fee for service charge to the client shall be determined by the applicable sliding fee scale. The Federal Poverty/VDA form may be used.

Administrative Elements

Staff Qualifications

Whenever possible, the Area Agency on Aging or service provider shall utilize health experts and other community resources to provide services. When AAA or service provider staff is used, they shall possess the following minimum qualifications:

- Knowledge: Biological, psychological, and social aspects of aging; the impact of disabilities and illness on aging; community resources; public benefits eligibility requirements; disease prevention and health promotion; medical conditions; learning styles of older adults.
- Skills: Establishing and sustaining interpersonal relationships; problem solving; designing educational materials; public speaking.
- Abilities: Communicating with persons with varying socioeconomic backgrounds; working independently.

Job Descriptions

For each paid and volunteer position funded by Title III of the Older Americans Act, an Area Agency on Aging must maintain:

- A current and complete job description which shall cover the scope of medication management services staff duties and responsibilities; and
- A current description of the minimum entry-level standards of performance for each job.

Units of Service

Units of service must be reported in the VDA-approved client database for each client receiving the service. Service units can be reported by client on a daily basis, but not aggregated (summarized) more than beyond one calendar month.

- Hours (individual) – The number of hours spent one-to-one providing medication management services to the individual senior, family member, or caregiver.
- Persons served (unduplicated) - The number of persons who are provided with the service and who receive individual hours.

Individual Hours - Service activities provided to a specific individual; individual hours are required for the VDA-approved client database.

Optional Group Units (Not entered into the VDA-approved client database)

- Group Participants – The number of people attending the presentation, meeting, or program (activity provided to more than one person or in a group setting).
- Number of Group Presentations – The number of programs on medication management topics.

Group Units – These activities cannot be entered into the VDA-approved client database. They are reported on the Optional Units page of the AMR.

Program Reports

- Aging Monthly Report (AMR) is due to VDA by the twelfth (12th) of the following month. If the Area Agency on Aging provides this service, this report must be updated and submitted even if no expenditures or units of service occurred.
- Client level data from the VDA-approved electronic database shall be transmitted to VDA by the last day of the following month.

Consumer Contributions/Program Income

There must be a written policy on handling of Client Program Income (CPI) and other gratuities and donations.¹

Cost Sharing/Fee for Service: An Area Agency on Aging is permitted to implement cost sharing /fee for service for recipients of this service.²

And/or

Voluntary Contributions: Voluntary contributions shall be allowed and may be solicited for this service, provided that the method of solicitation is non-coercive. Voluntary contributions shall be encouraged for individuals whose self-declared income is at or above 185% of the poverty line, at contribution levels based on the actual cost of services.³

Quality Assurance

Staff Training

- At hiring, staff shall receive orientation on agency and departmental policies and procedures, client rights, community characteristics and resources, and procedures for conducting the allowable activities under this service.
- Workers shall receive a minimum of 10 hours of in-service or other training per year based on the need for professional growth and upgrading of knowledge, skills, and abilities.

¹ 22 VAC 5-20-410, Grants To Area Agencies On Aging, Department for the Aging Regulations, Virginia Administrative Code

² Older Americans Act of 1965, as amended, Section 315 (a)

³ Older Americans Act of 1965, as amended, Section 315 (b)

Supervision

Consultation and supervision shall be available to all staff providing the service.

Program Evaluation

The AAA shall conduct regular and systematic analysis of the persons served and the impact of the service, with findings used as a basis for planning and implementing changes in program goals, procedures and resources. There shall be a written plan and a written report of findings. Evaluation may include client satisfaction surveys.

The AAA or service provider must maintain specific client records in the approved VDA electronic database that include:

- Consent to Exchange Information, if information is shared with other agencies.
- Virginia Service - Quick Form, if required. At a minimum, this form must be updated annually.
- The answer to the question “Is Client in Federal Poverty?” (answer Yes or No) must be asked and recorded in the VDA-approved electronic client database.

The AAA or service provider must maintain the following additional records:

- Documentation that the service took place.
- Cost Sharing (Fee for Service) calculations, if applicable. The Federal Poverty/VDA Sliding Fee Scale form may be used.