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

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

And/or

<u>Voluntary Contributions</u>: 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.

4