



Area Plan Program: Companion Manual

A Comprehensive Guide for the Area Plan Program

April 2025

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Manual Overview

This Companion Manual provides a comprehensive, step-by-step guide for completing the Area Plan Program. It outlines the Area Plan cycle and timeline for both DARS and the AAA, suggesting timing for various activities to ensure timely completion. The Companion Manual also describes how the Area Plan process aligns with the State Plan for Aging Services, emphasizing how both documents should inform and guide each other.

Additionally, the Companion Manual explains the navigation features of the Area Plan Program document, details the functionality of fillable fields, and specifies the types of information each field requires. It offers a step-by-step walkthrough of the required content, highlighting what the AAA needs to input, where to find that information, and any context DARS can provide to assist in crafting responses. The Companion Manual also indicates where all relevant documents are located and explains how to compile them for public input process and final submission to DARS for review and approval.

The Area Plan is a multifaceted document that provides valuable information in various contexts. It serves as a comprehensive overview of Older Americans Act (OAA) activities within each planning and service area (PSA), outlines objectives and strategies to address the needs of the most vulnerable populations, and ensures compliance with OAA requirements. The Area Plan includes a detailed analysis of funding, its sources, its proposed allocation for supporting older adults, and the entities providing those services.

As required by the OAA, the Area Plan must be reviewed and approved by DARS before funding and services can be delivered. It is also a public-facing document that informs the community about the AAA's planned activities using OAA funding and how it will coordinate with other service providers to ensure older adults receive the necessary services to remain healthy, independent, and living in their communities for as long as possible.

What is the Area Plan?

An Area Agency on Aging's (AAA) Area Plan is comprised of two components.

The first component is the Area Plan Program. The Area Plan Program provides background on the AAA, summarizes the AAA's planning and service area (PSA) and community needs, and identifies the AAA services that will be provided. Within the Area Plan Program:

- Part A includes:
 - Part 1: Background on the AAA
 - Part 2: Objectives and Strategies
- Part B includes:
 - Part 3: Title III Services
 - Part 4: Title VII Services
 - Part 5: General Fund Services
 - Part 6: Other AAA Services

The second component is the Area Plan Budget. The Area Plan Budget identifies the corresponding allocations the AAA will expend for its menu of Older Americans Act (OAA) and aging-related state funded services.

The Area Plan Program and Area Plan Budget are subject to a public input process, which is further discussed in this Companion Manual.

Area Plan Timeline

Virginia's Area Plan cycle is four (4) years.

For the first year, the Area Agency on Aging (AAA) develops a full Area Plan outlining their intentions for the entire cycle and their annual budget for the first year. For the second through fourth years, the AAA develops and submits an updated budget (to reflect each year's annual allocation) and any changes to their initial Area Plan related to service design or delivery. Please refer to the section on Changes to AAA Area Plans in Years 2-4 for additional information on Area Plan Amendments and Area Plan Modifications.

Although DARS is currently in the middle of a four-year cycle, DARS is seeking to bring Virginia's Area Plan template and the AAA Area Plans into compliance with the Older Americans Act (OAA) Final Rule by October 1, 2025. **As such, DARS is requiring AAAs to submit full Area Plans for this forthcoming Federal Fiscal Year (FFY 2026).** In FFY 2027, AAAs will submit updates to the previously established FFY 2026 Area Plan. And in FFY 2028, AAAs will return to the standard Area Plan Cycle with the development of a new full Area Plan for the first year of a new cycle.

In preparing for the AAA to develop its new Area Plan, DARS has launched a series of trainings and accompanying tools and resources to help AAA staff. These include trainings, office hours, instruction guides (such as this document), and Frequently Asked Questions (FAQs) handouts.

Area Plan Public Input Process

In developing the Area Agency on Aging (AAA) Area Plan, AAAs must obtain public input, AAA Advisory Council Consultation, and Governing Board Approval. This is required through several mechanisms.

[45 CFR § 1321.3](#) defines "Periodic" as:

- "as used in this part to refer to the frequency of client assessment and data collection, means, at a minimum, once each fiscal year, and
- as used in section 307(a)(4) of the Act (42 U.S.C. 3027(a)(4)) to refer to the frequency of evaluations of, and public hearings on, activities and projects carried out under State and area plans, means, at a minimum once each State or area plan cycle"

[45 CFR § 1321.65](#) requires:

“(b)(4) State agency policies and procedures regarding Area Plan requirements will at a minimum address...

Public participation specifying mechanisms to obtain the periodic views of older individuals, family caregivers, service providers, and the public with a focus on those in greatest economic need and greatest social need, including:

- (i) A reasonable minimum time period (at least 30 calendar days, unless a waiver is provided by the State agency during an emergency or when a time sensitive action is otherwise necessary) for public review and comment on Area Plans and Area Plan Amendments; and
- (ii) Ensuring the documents noted in (b)(4)(i) of this section and final Area Plans and Amendments are accessible in a public location, as well as available in print by request.”

Section 3.24 of the DARS-AAA Contract requires:

“3.24 PUBLIC PARTICIPATION: The AAA shall develop and implement procedures for obtaining input from older individuals, officials of local government, the public, and other interested parties in the PSA on the needs of older individuals and on the Area Plan. The AAA shall give adequate public notice prior to conducting any public hearing for this purpose.”

The [DARS-OAS Grants Management Manual](#) requires the AAA to consult with the Advisory Council (p. 56). The [Board & Advisory Council Handbook for Virginia's Area Agencies on Aging](#) requires the AAA to consult with the AAA Advisory Council in developing the Area Plan (p. 13) and that the AAA obtain Governing Board approval for the Area Plan Budget (p. 20) and overall Area Plan (p. 22), and minutes for both should record a summary of any discussion held and outcomes of votes taken (p. 36).

NOTE: If the AAA is also requesting a Minimum Adequate Proportion (MAP) Waiver in the AAA Area Plan, it must follow these same public input requirements. Specifically, if the AAA is submitting a MAP Waiver Request, the AAA should ensure that all public notices seeking public input on the AAA Area Plan through the methods listed below clearly indicate that the AAA is also requesting a MAP Waiver and is specifically seeking public input on the MAP Waiver Request.

Area Plan Components Subject to Public Input

In soliciting public input on the full Area Plan (for FFY 2026 and for Year 1 of an Area Plan Cycle), DARS requires that Area Agencies on Aging (AAA) publish the following **Core Documents** for public input:

- Completed Area Plan Program (Parts A and B), including any and all Waiver Request Forms, the Home Delivered Meals-Infrequent Delivery (HDM-ID) Transition Plan, if applicable, and Other Services Pages
- The following Area Plan Budget Excel worksheets:
 - Summary
 - Requirements
 - Title III
 - Title III-E
 - III-E Grandparents

For the purposes of publication for public input, AAAs may create PDFs and/or combine documents. That being said, AAAs should avoid merging documents with Area Plan Program template and be conscious of the importance of document accessibility for any published documents.

Alternatively, DARS has determined that there are some documents that are developed and submitted to DARS during the Area Plan process that do not need to be published for public input. DARS needs to receive and review these documents in order to adequately understand and approve an AAA's Area Plan, but DARS does not require the AAAs to publish these documents for public input. AAAs should be aware, however, that these documents are still subject to public inspection if there is a request.

The **Ancillary Documents** listed below do **not** need to be published for public input:

- Supporting documents that DARS requires and that correspond to an applicable Area Plan Waiver Request (e.g., Minimum Adequate Proportion Waiver, Alternative Fee Scale Waiver and Direct Service Waiver supporting documents, Home Delivered Meals Infrequent Delivery (HDM-ID) Plans, and Legal Assistance Entity Type supporting documents)
- The following Excel worksheets contained in the Area Plan Budget, which primarily serve informational or formulaic purposes for allocating funding to the AAA:
 - CCEVP
 - Respite
 - FEDERAL
 - GENERAL 3-4
 - GENERAL 1-4
 - NSIP
 - DMAS OMB

Area Plan Public Input Activities

As identified above, DARS requires the Core Documents (but not Ancillary Documents) to be made available for public input. Public input is achieved through several required methods, the first of which are:

1. 30-Day Public Comment Period
2. Public Hearing
3. AAA Advisory Council Consultation

AAAs must complete the activities above. They may complete the methods above (1-3) concurrently (i.e., at the same time or overlapping).

4. AAA Governing Board Approval

AAAs must complete the fourth method only after the first three are finished and the AAA has integrated the public input received from the first three methods into the Area Plan, as appropriate.

Public Input: 30-Day Public Comment Period and Public Hearing Requirements

Once the AAA has completed the Area Plan in draft form (inclusive of the Core Documents for the Area Plan Program and Area Plan Budget), the AAA must publish the Draft Area Plan for public input. The Draft Area Plan must be published for a 30-Day Public Comment Period and the AAA must host at least one Public Hearing.

Each AAA's website must include:

1. Public input notice information, AND
2. A copy of the Draft Area Plan documents OR information about how the public can obtain copies of the Draft Area Plan documents.

DARS recommends AAAs provide public input notice about the 30-Day Public Comment Period and the Public Hearing at the same time for ease of reference for the public.

AAAs should use several appropriate methods for notifying the public and soliciting public input (e.g., social media, websites, local newspapers, flyers for clients, etc.).

AAAs should consider specifically targeting current AAA clients for the notice. This could include, but is not limited to, posting flyers in congregate meal sites, handing out flyers with home delivered meal deliveries, sharing verbal information with clients during AAA staff and client interactions, and hosting public hearings at congregate meal sites.

NOTE: For AAAs with Title VI Grantees in their overlapping service area, the AAA must also provide notice about the public input process to the Title VI Grantee ([45 CFR § 1321.69\(b\)\(2\)](#)).

30-Day Public Comment Period

In order to complete the Area Plan within the timeframe required by DARS, DARS strongly recommends Area Agencies on Aging (AAAs) use these dates for the 30-Day Public Comment Period on the Draft Area Plan: June 25 - July 25, 2025.

Depending on how quickly an AAA can complete its Area Plan, the AAA may be able to publish the Area Plan for public input before June 25. That being said, DARS believes that June 25 would be the absolute latest the AAA could start the 30-Day Public Comment Period and still accomplish the remaining required Area Plan tasks and meet the Area Plan submission deadline of August 1.

Public notice information for the 30-Day Public Comment Period must include the start and end dates of the 30-Day Public Comment Period, how the public can access the Draft Area Plan, and how the public can submit public comment.

AAAs should allow multiple mechanisms (i.e., at least two) to receive public input (e.g., email, mail, phone, fax) during the 30-Day Public Comment Period.

Public Hearing

Area Agencies on Aging (AAAs) must schedule at least one Public Hearing. AAAs can choose to have more than one Public Hearing.

Public Hearings can be done in-person, virtually, or in a hybrid format. In deciding the format, AAAs should consider what is appropriate for their planning and service area (PSA).

Public Hearings should be held within the first half of the 30-Day Public Comment Period to allow individuals time to potentially reflect after the Public Hearing and respond in writing within the 30-day public comment period timeframe.

Public notice information for the Public Hearing must include the date, time, and location or method for accessing the Public Hearing. If registration is required, the public notice should include that. It is suggested that the AAA also designate a staff member as a point of contact for any questions or issues leading up to and during the Public Hearing.

AAAs should consider starting the Public Hearing with an overview presentation about the Area Plan for level-setting. The Area Plan can be a bulky and difficult document to understand and navigate unless you have prior experience with it. Giving the public some background information on the Area Plan purpose, design, and intent is suggested.

Public Input Recordkeeping

Area Agencies on Aging (AAAs) must maintain a record of the public input received.

For the 30-Day Public Comment Period, AAAs should log public comments. For the Public Hearing, AAAs should record minutes.

AAAs will need to integrate the outcomes of the public input solicitation into the Area Plan Program Part 1 prior to submitting a final Area Plan to DARS by August 1. This is discussed later in the Companion Manual.

AAA Advisory Council Consultation

After your Area Agency on Aging (AAA) has developed a Draft Area Plan, the AAA must also seek input from the AAA Advisory Council.

The AAA Advisory Council is not required to formally approve the Draft Area Plan. However, Advisory Council must be consulted and their input considered. While not required, any Advisory Council endorsements or other types of “approvals” can be offered and recorded in the meeting minutes and shared in the Area Plan Program Part 1.

AAAs should provide Advisory Council members the Draft Area Plan materials in advance of the Advisory Council meeting. The Area Plan is a robust document that can be hard to digest on short

notice. Providing the members a copy of the Draft Area Plan in advance allows them to prepare for the meeting and any discussion.

AAAs should present an overview of the Area Plan process, the AAA's planned services, and any relevant rationale that informed the Draft Area Plan's development prior to receiving Advisory Council input.

AAAs should consider opportunities to ask Advisory Council members questions about certain sections or decisions that the AAA would specifically like to get feedback on. This could include, for example, adding a new service or removing an existing service or the AAA's intentions around using Title III-C(1) funding for Grab and Go Nutrition.

During the Advisory Council meeting, the AAA should take detailed minutes that capture Advisory Council member input on the Area Plan. AAAs need to integrate the outcomes of their Advisory Council consultations into the Area Plan Program Part 1 prior to submitting final Area Plans to DARS by August 1. This is also highlighted later in the document.

AAA Governing Board Approval

Each Area Agency on Aging's (AAA) Governing Board must approve the AAA's Area Plan after the public input solicitation (30-Day Public Comment Period and Public Hearing) and Advisory Council consultation but before it is submitted to DARS.

DARS strongly recommends AAAs seek and receive the Governing Board's approval no later than between July 28-31 in order to meet the August 1 submission deadline to DARS.

In seeking the Governing Board's input and approval, the AAA should provide the Draft Area Plan materials to the Governing Board members in advance of the meeting. The Area Plan is a robust document that can be hard to digest on short notice. Providing the members a copy of the Draft Area Plan in advance allows them to prepare for the meeting and any discussion.

As needed or appropriate, the AAA should consider starting the Governing Board meeting by providing an overview presentation about the Area Plan and any changes in services or key decision points. The AAA should share with the Governing Board members a summary of the Advisory Council's feedback and any public input received during the public input process.

Lastly, the AAA should ensure the Governing Board's meeting minutes reflect the Governing Board's approval. This is checked by DARS during on-site monitoring visits.

NOTE: For Government-Sponsored AAAs (as defined in 22VAC30-60-20): The AAA may submit the Final Area Plan to DARS without having secured the Governing Board approval. These AAAs must still submit their Area Plans to DARS by August 1, however, they can then work to secure Governing Board approvals for Final Area Plans in August and September. Once Governing Board approval of the Final Area Plan is secured, the AAA should report this information to DARS. AAAs must secure Governing Board approval before DARS can execute new/modified contracts with them for the next federal fiscal year (FFY).

Specific Timeline for AAAs to Follow

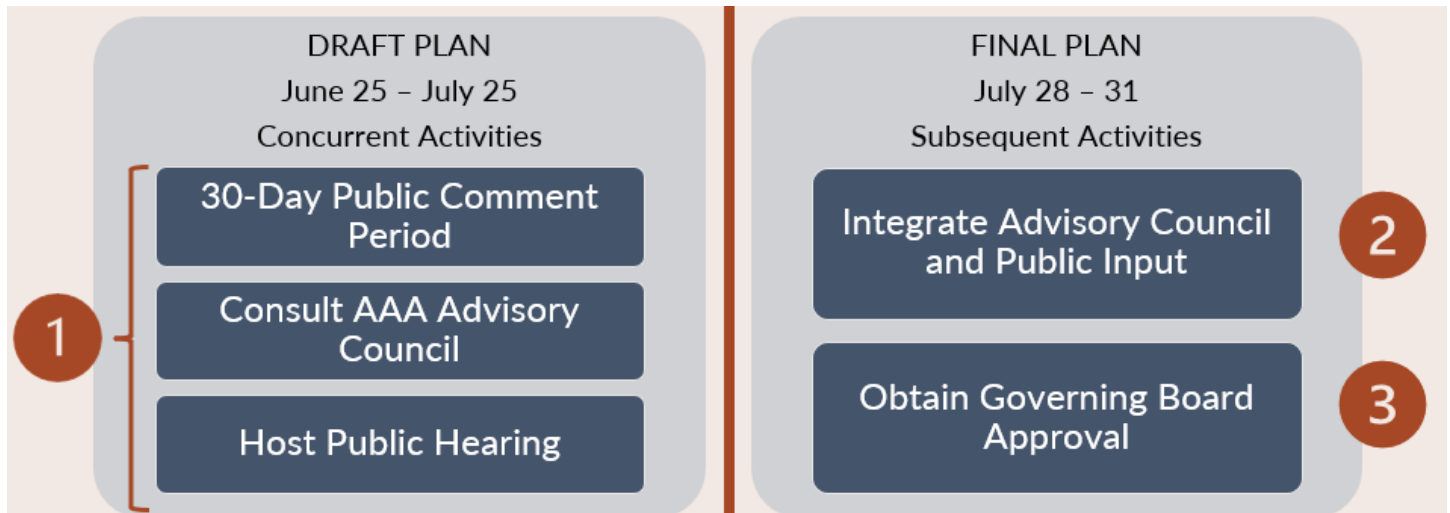
The illustrations below provide a depiction of how the AAA's Area Plan development should unfold, particularly as it relates to the receipt of public input, Advisory Council consultation, and the approval of the Area Plan by the AAA's Governing Board.

As the AAA is planning ahead, the AAA should consider if there need to be adjustments to the AAA's Governing Board or Advisory Council meeting dates to ensure the identified activities can be completed as required and within the designated timeframes.

Illustration 1:



Illustration 2:



Public Access to the Final Area Plan

Once Final Area Plans have been approved by DARS and have taken effect, DARS expects Area Agencies on Aging (AAAs) to add information to their websites that ensures that Final Area Plans (and any future Final Area Plan Amendments) are accessible in a public location as well as available in print by request.

AAAs have the following two options for adding this content to their websites:

1. AAAs can post the Area Plan Core Documents directly on the website **OR**
2. AAAs can instruct the public how they can obtain a copy of the Area Plan Core Documents on the website

Changes to the Area Plans in Years 2-4

NOTE: This section applies to Area Plans generally but **it does not apply to the Area Plan requirements for Federal Fiscal Year (FFY) 2026**. AAAs should prepare and submit a complete/full Area Plan for FFY 2026 to ensure compliance with the OAA Final Rule by October 1, 2025.

In some cases, changes to an AAA's Area Plan outside of the first year of the four-year cycle may either constitute an Area Plan Amendment or an Area Plan Modification.

Some Area Plan Amendments are subject to the entire public input process, which includes the 30-Day Public Comment Period, the Public Hearing, Advisory Council Consultation, and Governing Board Approval requirements. This includes a new Minimum Adequate Proportion (MAP) Waiver Request. Further, substantial or numerous amendments to an AAA Area Plan, taken together, may rise to the level of requiring the entire public input process; in these instances, AAAs should consult with DARS staff in advance of preparing Area Plan Amendments to determine the level of public input that DARS will require.

Other Area Plan Amendments are subject to the 30-Day Public Comment Period (but not the Public Hearing), Advisory Council Consultation, and Governing Board Approval. These types of amendments include new Waiver Requests for Cost Sharing, Alternative Fee Scale, or Direct Services, or the addition or removal of an AAA service.

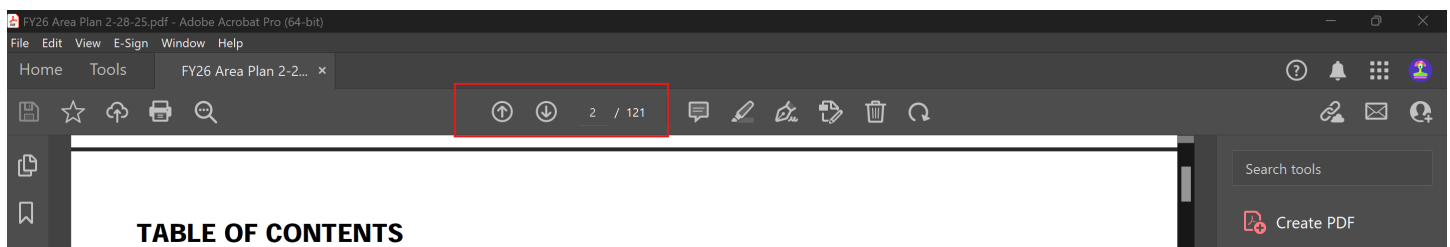
Lastly, some minor changes to the Area Plan do not rise to the level of Area Plan Amendments and are considered to be **Area Plan Modifications**. These include the annual budgeting adjustments based on the AAA's new FFY estimated allocation, address changes, and changes to AAA's contracted service provider(s). Area Plan Modifications are not subject to the public input process, but the AAA should share them with the Advisory Council and get them approved by the Governing Board.

Navigating the Area Plan Document

The document is designed as a fillable PDF that has three basic navigation features built into it:

1. Show next or previous page buttons located at the top, side or bottom of the navigation pane depending on which application you are using to view the document **[figure 1.1]**
2. The table of contents on **pg. 2** contains hyperlinks to each specific sections **[figure 1.2]**
3. And Bookmarks, which should be located on the side pane and also contain links that will navigate you to each specific section. Unlike the table of contents, which can only be used when you are on pg. 2, this navigation function can be accessed anywhere in the document **[figure 1.3]**

[Figure 1.1]



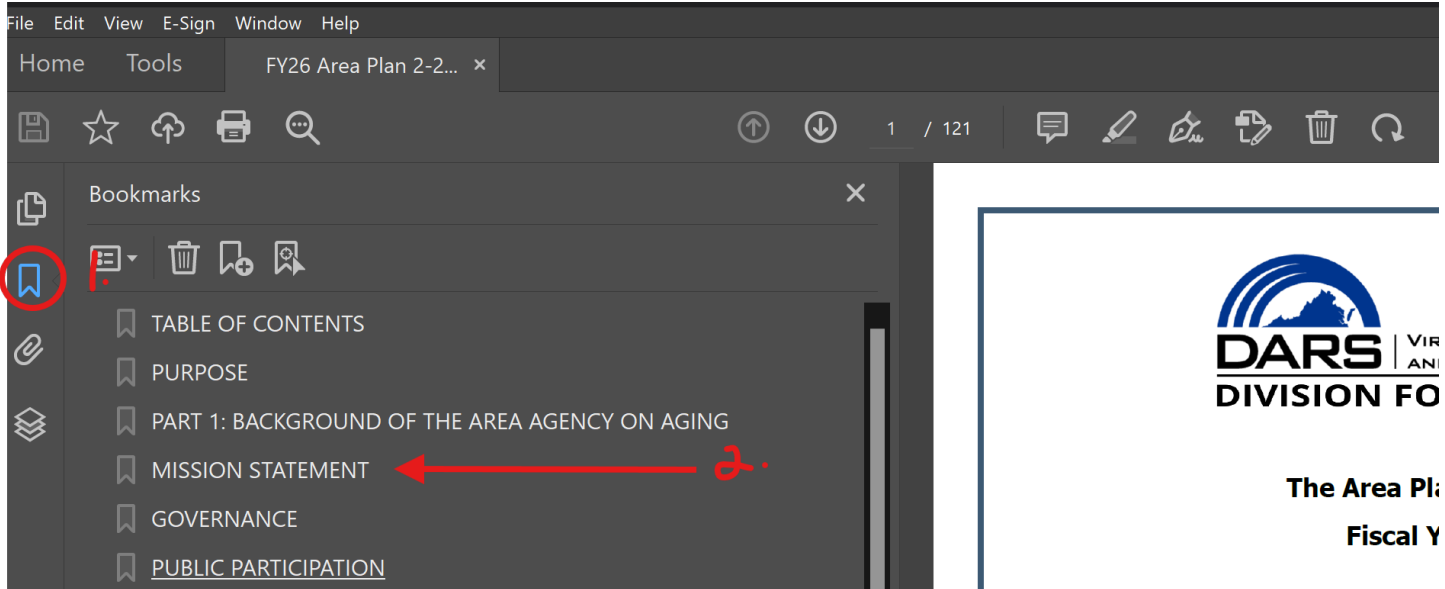
Clicking the up or down arrows will navigate you through the document, or if you know the page number you want to view, you can type it to the right of the arrows and hit enter, and it will jump you directly.

[Figure 1.2]

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On the table of contents, clicking on the section you want to jump to will take you there directly.

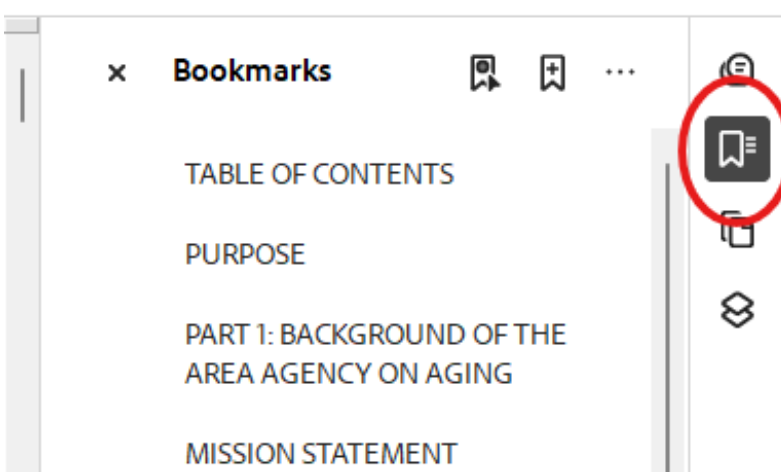
[Figure 1.3]



Click on the bookmark symbol (1) to open the bookmark panel, which can be used to navigate anywhere in the document and will take you to any other part of it. Then click on the section you would like to navigate to (2).

Alternatively, if using Adobe Reader, the navigation panes may be located on the right-hand side of the viewing window. See **[Figure 1.4]**.

[Figure 1.4]



NOTE: All of the features of this document work best when Adobe Reader, or more preferably Adobe Acrobat, is used. The plan will open in a Chrome browser or other PDF viewing application; however, it may lose some or all functionalities.

General Information of the PDF Form Fields

The Area Plan contain five (5) types of fillable fields used throughout this document:

1. Text Fields-

- Single line fields formatted for text, but cannot exceed the space allowed
- Multiple line fields formatted to allow for long form paragraph narratives
- Single line fields formatted for numerical values only which will format all numbers into [\$0,000.00] format. These fields also allow for automatic totaling in certain fields.

2. Checkbox Fields-

- Prechecked, as 'yes' is either the default setting in most cases or read-only, as 'yes' is the only option as it related to another data field
- Unchecked fields, which need to be checked in relation to other data

3. Dropdown Fields-

- Which allow for predetermined choices to be selected
- There is one instance where selecting a choice on a dropdown will prefill other data fields automatically

4. Date Fields-

- There is only one, and it will automatically convert the date into mm/dd/yyyy format.

5. Button Field-

- There is only one on the Home Delivered Meals-Infrequent Delivery (HDM-ID) Waiver Form and it will automatically prefill the localities after selecting from a dropdown list when pushed. The HDM-ID Waiver Form is not applicable to most AAAs.

Most text fields are blank, but some text fields have been prefilled by DARS and allow for more context or information to be added as it relates to each AAA's specific programs. You will find this mostly in the Grab and Go Nutrition section of the Area Plan Program.

Certain checkboxes are prefilled, as that is the default scenario, such as utilizing III-B funding for Legal Assistance in the Services to be Provided section or utilizing III-B funding for CRIA. However, there may be a rare instance when this may or may not be case, so these checkboxes remain editable in case of an exception. Other checkboxes are read-only, have already been pre-checked, and are not editable. For example, State General Funding is always used to match OAA funding for certain programs, so this information has been prefilled and locked.

Dropdown fields can be found under the Direct Service Waiver Form, which allow you to choose a specific program for which the Direct Service Waiver can be requested. If a certain program is not an option on the dropdown, it usually indicates that a waiver is not required to provide that service directly or in the case of CRIA, Care Coordination and PIE, direct service is categorically approved and no further information needs to be provided on the Direct Service Waiver Form. The dropdown field on the Home Delivered Nutrition Infrequent Delivery (HDM-ID) Waiver behaves slightly differently. In this case, you will select your PSA, and the form will automatically prefill all the localities within the PSA in a subsequent set of fields.

The single date field is used in the Area Plan Program on the Minimum Adequate Proportion (MAP) Waiver form, which asks for the public hearing date; a requirement of requesting a MAP waiver.

Completing the Area Plan

The recommended approach to completing the Area Plan is to start by completing the Area Plan Program Part 1: Overview of the Area Agency on Aging (AAA) and Part 2: Objectives and Strategies as much as possible without the annual funding allocations, which are typically not available to the AAAs until around June. This suggested approach allows enough time to focus on identifying populations of greatest need, unmet needs evaluations, and how the AAA will approach outreach and targeting services to those identified populations within the planning and service agency (PSA). It will also allow time for the AAA to align the Area Plan with the State Plan Goals, discuss emergency preparedness, and detail activities and services that are coordinated with other entities identified in the OAA.

It is also advantageous to start identifying which services, based on the information included under Part 2: Objectives and Strategies, the AAA intends to provide in the for the upcoming federal fiscal year (FFY). Once the services are identified, the AAA can start completing the corresponding Service Pages by completing the Service Description and defining both the general and specific target populations, and how the AAA will try to reach those identified populations through outreach for that particular service. The AAA should also be able to indicate the AAA's service providers for each service, if already known, or if the AAA intends to provide the service directly and begin completing Direct Service Waiver Forms for those relevant services.

Once the Virginia Department for Aging and Rehabilitative Services (DARS) receives Virginia's allocation for the current FFY, DARS will inform the AAAs of their estimated allocations for the upcoming FFY. At that point, each AAA should be able to start completing the Area Plan Budget. This will also allow the AAA to complete the Summary Source of Funding page and input the specific expenditures for each service the AAA will be providing on the Service Pages, and the corresponding estimated units and people served in the Area Plan Program.

Part 1: Background of the Area Agency on Aging

This section of the Area Plan Program provides background information on Area Agencies on Aging (AAAs) in general, for members of the public, and includes fields to provide agency specific information.

Page 4 provides a brief overview of what an AAA is, its purpose, and its functions. This is intended to be informative for the public.

Near the bottom of the page **[Figure 2]**, there is a text field to enter the **complete legal name of the AAA**, followed by 4 checkboxes to indicate the **organization type** of the AAA.

[Figure 2]

The _____ is a
(Complete legal name of the agency)

- local government
- private nonprofit organization incorporated under the laws of Virginia
- joint exercise of powers organized pursuant to §15.2-1300 et seq. of the Code of Virginia
- multipurpose agency

These are the only two items that need to be completed on this page.

Mission Statement

Enter the agency's **Mission Statement** at the top of page 5. This section allows the AAA to share its mission and vision with the public.

Governance

This section has no fields to complete but includes a reminder about the requirements to make certain documents related to the AAA's governance available for public inspection upon request. They are:

- 1. Governing Board Composition and Bylaws**
- 2. Advisory Council Composition and Bylaws**
- 3. Governing Board and Advisory Council Meetings, including Public Access**

Public Participation

State the process the Area Agency on Aging (AAA) used to receive public comment and review of the Draft Area Plan. Also describe how the AAA Advisory Council was consulted. **Include the dates of the 30-Day Public Comment Period and Public Hearing, and how the public input influenced the Area Plan.** Provide a brief description of these activities within the space allotted.

NOTE: The AAA will not fully complete this section until after the public input process is completed.

- For Draft Area Plans, AAAs should indicate their intentions and plans for the public input process.
- For Final Area Plans, AAAs should summarize the public input process that was used and how public input was considered in developing the Final Area Plan.

Summary Source of Funds

Each Area Agency on Aging (AAA) must prepare and develop an Area Plan for approval by the Virginia Department for Aging and Rehabilitative Services (DARS). Each Area Plan must provide information and assurances that the AAA will, on the request of DARS and for the purposes of monitoring compliance with this Act, (including conducting an audit), disclose all sources and expenditures of funds such AAA receives or expends to provide services to older individuals.

Disclose all funding amounts and sources in this section.

DARS Sources:

- **OAA (include NSIP)-** This is the total amount of Older Americans Act (OAA) funds across all titles received in the FY26 allocation amounts. This also includes the Nutrition Services Incentive Program (NSIP) amount.
- **State General Funds-** This is the total state general funds across all categories (OAA General, Community Based, Transportation, etc.)
- **VICAP; including SHIP and MIPPA-** This is the total amount received for Virginia Insurance Counseling Assistance Program (VICAP) from both State Health Insurance Programs (SHIP) and Medicare Improvement for Patients and Providers Act (MIPPA) awards.
- **Respite Care Initiative-** This is the total amount received from the state funded Respite Care Initiative, if received.
- **Dominion Energy Senior Cool Care**
- **USDA – Senior Farmers’ Market Nutrition Program** (U.S. Department of Agriculture)
- **SNAP Outreach** (Supplemental Nutrition Assistance Program)
- **Senior Community Service Employment Program** (SCSEP)

Other State Government Sources: This section is for all other state government funding (not through DARS), which includes Virginia Department of Rail and Public Transportation (DRPT) for transportation, Virginia Department of Medical Assistance Services (DMAS) for Medicaid Adult Day Health Care (ADHC) or Program for All-Inclusive Care for the Elderly (PACE), etc.

Other Federal Government Sources: This includes any grants or funding received directly from the federal government and not passed through a state agency.

Local Government Sources: This section is for local funding provided by the localities within the planning and service area (PSA). This section should list the funding by county/city individually.

Private Sources: This section includes all funding received from private organizations, businesses, health care entities funded through contracts or other arrangements.

Other Sources: This section includes all Voluntary Contributions, In-Kind funding, Charges or Fees, Investment Earnings, and Other Income otherwise not listed and revenue sources, such as rent generated from AAA owned properties, etc.

NOTE: These are estimated funds for Federal Fiscal Year (FFY) 2026 and may or may not be exact amounts for each funding source. DARS understands that there are potential factors at play, such as differences in federal and state fiscal years, funding sources that are not appropriated on an annual basis, and that the exact funding for upcoming year may not be fully known yet.

The majority of potential funding sources have been prefilled, but the blank text fields at the bottom of each source section allows for further sources to be defined. The amount column on the right side of this table will automatically format numbers into [\$0,000.00]. **Total Projected Revenues**, at the bottom of the table, will automatically total everything entered into the column.

Part 2: Objectives and Strategies

Part 2 of the Area Plan Program provides an opportunity for the Area Agency on Aging (AAA) to paint a clear and robust picture of the planning and service area (PSA), including demographic characteristics and unmet needs, and to begin to build out its rationale for the Area Plan's menu of service offerings and corresponding budgeting.

Part 2 also includes a number of Older Americans Act (OAA) statutory and regulatory requirements that must be included or accounted for in an AAA's Area Plan.

Identification of Populations of Greatest Need

The Older Americans Act (OAA) regulations require that each AAA's Area Plan identify populations within the planning and service area (PSA) at greatest economic need (GEN) and greatest social need (GSN), which shall include the populations as set forth in the [45 CFR § 1321.3](#) definitions of GEN and GSN ([45 CFR § 1321.65\(b\)\(3\)](#)).

In completing this section, AAAs should explore all potentially relevant data sources that would identify older adults in the PSA who fall into the GEN and GSN categories as listed. In compiling this data, AAAs should consider using the following potential datasets:

- U.S. Census Bureau data
- U.S. Census Bureau American Community Survey (ACS) data
- University of Virginia Weldon Cooper Center for Public Service Demographics Research Groups Data on Aging
- The AAA's Intrastate Funding Formula (IFF) factors spreadsheet (provided by the Virginia Department for Aging and Rehabilitative Services/DARS)

- Medicare Current Beneficiary Survey data
- Center for Research on Disability Annual Disability Statistics
- University of Wisconsin Area Deprivation Index (Neighborhood Atlas) and Community Health Rankings
- National Resource Center on Native American Aging Title VI Needs Assessment Survey
- Data from federal agencies, such as the U.S. Centers for Disease Control and Prevention, Veterans' Affairs, and Housing and Urban Development
- Data from state agencies, such as the 2022 DARS Community Assessment Survey for Older Adults, Virginia Department of Health, Virginia Department of Social Services
- Data from local agencies or organizations, which could include the local department of social services, local health department, local Continuum of Care (e.g., Homeless Management Information System/HMIS), and local vulnerability indexes

The list of data sources above is neither mandatory nor exhaustive. There may be datasets that are unique or specific to the region or PSA. AAAs should feel free to use data that they deem reliable, valid, and appropriate.

In addition, the datasets listed above (as well as others not listed) are not always perfect and they may not always allow for an “apples to apples” comparison. For example, some data may reflect older adults starting at 60 and older while others consider older adults starting at age 65 and older. In some cases, AAAs may need to also do some math to calculate the demographics for their PSA (e.g., identifying their estimated portion of a statewide figure). Lastly, some GSN categories may not have publicly available datasets that capture the information or that capture it specifically for older adults. AAAs should do their best to complete all rows in the spreadsheet, but in cases where no data can be found, AAAs should indicate that accordingly.

NOTE: On page 8, AAAs can leave the “Poverty as further defined by the state” row blank.

After completing page 8, AAAs are then further asked on page 9 to provide a general narrative description of the characteristics of the PSA with particular emphasis on GEN and GSN. Once AAAs have identified the populations on the prior page (8), AAAs should use page 9 to reflect on what data points and demographics stand out as particularly relevant or significant for the PSA. The data points on page 8 do not, on their own, fully showcase the demographic makeup of the PSA. The narrative portion on page 9, however, is an opportunity to synthesize the GEN and GSN demographic data that has been compiled on page 8 to paint a clearer picture of the PSA. On page 9, AAAs can also identify or note data limitations in their narratives.

The AAA’s identification and understanding of GEN and GSN in the PSA in this section should be used to inform the AAA’s menu of OAA and other aging-related service offerings for the upcoming federal fiscal year (FFY), which will then be reflected in other sections of the Area Plan.

Unmet Needs Assessment and Evaluation

The Older Americans Act (OAA) regulations require that each AAA’s Area Plan include an “assessment and evaluation of unmet need” using “objectively collected, and where possible, statistically valid, data with evaluative conclusions concerning the unmet need for supportive services, nutrition

services, evidence-based disease prevention and health promotion services, family caregiver support services, and multipurpose senior centers” (45 CFR § 1321.65(b)(3)).

In completing this section, AAAs should provide a summary of the PSA’s unmet needs. AAAs can, and should, use data from PeerPlace as well as from other datasets, such as the 2022 DARS Community Assessment Survey for Older Adults or other datasets identified on pages 8-9 to inform the AAA’s response. The AAA should clearly cite the sources for unmet needs data or considerations in their responses.

As it is available, AAAs should identify unmet needs by the service categories as required by the OAA Final Rule. In some cases, AAAs may also be able to identify unmet needs for specific services within a category. For example, the AAA may be able to report on unmet needs specifically for Congregate Nutrition and then specifically for Home Delivered Nutrition rather than just Nutrition Services overall. The same could be said for specific III-B Supportive Services (e.g., Homemaker Service), which include a broad array of services for which the AAA may have a waitlist for or for which unmet needs may be reflected in other datasets.

Like with the identification of GEN and GSN on pages 8-9, the AAA’s identification and understanding of unmet needs in the PSA in this section should be used to inform the AAA’s menu of OAA and other aging-related service offerings for the upcoming federal fiscal year (FFY), which will then be reflected in other sections of the Area Plan.

Serving Low-Income Minority Objectives

The Older Americans Act (OAA) statute (Section 306(a)(4)(A)(iii)) requires that AAA Area Plans, with respect to the [federal] fiscal year preceding the [federal] fiscal year for which such [Area Plan] is prepared:

- Identify the number of low-income minority older individuals in the PSA
- Describe the methods used to satisfy the service needs of such minority older individuals
- Provide information on the extent to which the AAA met the objectives described in [# 1 above]

In the first subsection, AAAs should pull from the earlier GEN and GSN datasets to complete the subsection for “Number of low-income [older] minority individuals in the service area.” This will most likely be taken from the most recent ACS figure available.

NOTE: This figure should identify low-income **older** minority individuals specifically.

In the next subsection, each AAA should then summarize what activities and efforts (i.e., methods and objectives) it has undertaken to serve low-income older minority individuals. In this subsection, “methods” would be in the vein of activities or efforts the AAA has completed to reach this specific demographic, and “objectives” would be reflected in a quasi-numerical statement(s) that reflects a measurable goal (e.g., “the AAA intended to serve 10% of low-income older minority individuals in the PSA” or “the AAA intended to increase enrollment of low-income older minority individuals in X county by Y%”).

- **NOTE:** Since the AAA may not have identified methods or objectives for the prior FFY to add in this subsection for the FFY 2026 Area Plan, the AAA could consider reflecting back what types

of activities it engaged in the prior FFY and some existing data points that reflect the success or status of serving low-income older minority individuals in the prior FFY. AAAs should take note, however, of this section as they work on the FFY 2026 Area Plan. AAAs may want to consider how they can more holistically respond to this section when the next full Area Plan Cycle in FFY 2028.

In the last (i.e., third) subsection, the AAA should then reconcile the responses provided for “methods and objectives” (second subsection) with the figure identified at the top of the page (first subsection). The AAA should then summarize the extent to which it served low-income older minority individuals. As a potential indicator, an AAA may want to consider comparing the proportion of low-income older minority individuals in the PSA with the proportion of low-income older minority individuals being served by the AAA. The AAA can also include existing or planned future strategies or activities to target low-income older minority individuals and boost access and enrollment in services for them.

If an AAA thinks it has been sufficiently successful in serving low-income older minority individuals, it should indicate that and provide a rationale for how it has measured success and what methods it will use to maintain its existing level of service to low-income older minority individuals.

Alignment with State Plan Goals

The new Older Americans Act (OAA) regulations require that the AAA Area Plans “develop objectives that coordinate with and reflect the State Plan Goals for services under the [OAA]” ([45 CFR § 1321.65\(e\)](#)).

In meeting this federal regulatory requirement, DARS has offered AAAs two options. AAAs should be familiar with the objectives of the State Plan prior to selecting one of the options.

Virginia’s State Plan for Aging Services includes the following goals:

- GOAL 1: Provide high-quality, innovative core Older Americans Act (OAA) programs
- GOAL 2: Deliver evidence-based programs that encourage healthy, active, and engaged lives
- GOAL 3: Promote access to aging and community services for older Virginians with the greatest economic and social needs
- GOAL 4: Bolster awareness of and increase access to person-centered long-term services and supports (LTSS)
- GOAL 5: Improve access to resources and services that support all caregivers

In the first potential option, the AAA can confirm (i.e., attest) that the objectives of the AAA’s Area Plan align with the objectives provided in the current Virginia State Plan for Aging Services. DARS assumes that this option will be the default option used by most AAAs.

In the second potential option, the AAA can create a unique set of objectives for the AAA’s Area Plan that, while different are still aligned with the State Plan. If an AAA chooses this option, it should identify the AAA’s Area Plan objectives in the space provided.

How Objectives and Strategies inform the Area Plan

In this section, the Area Agency on Aging (AAA) should briefly describe how the identified unmet needs, identification of populations of Greatest Economic Need (GEN) and Greatest Social Need (GSN), the State Plan for Aging Services, public input in the development of the Area Plan, and AAA Advisory Council consultation have informed the Area Plan.

NOTE: This section should be partially completed for the Draft Area Plan prior to the public input process and then fully completed prior to approval by the AAA Governing Board and submission of the Final Area Plan to DARS.

- The Draft Area Plan Version should address the following elements: how the identified unmet needs, identification of populations of GEN and GSN, and the State Plan for Aging Services informed the Area Plan.
- The Final Area Plan Version should address all elements listed above plus the inclusion of the public input in the development of the Area Plan and AAA Advisory Council consultation.

AAA Area Plans are not designed to be developed in a vacuum. Area Plans should be reflective of and responsive to the AAA's PSA and the needs of the PSA. In this section, DARS seeks to better understand how the PSA's demographic and unmet needs data, objectives of the State Plan for Aging Services, and public input process and Advisory Council consultation have informed the development of the Area Plan.

DARS strongly advises that AAAs provide a summary that also includes specific examples or illustrations of the influence on the Area Plan. These concrete examples could include changes the AAA has made to the Area Plan since its last iteration (e.g., "the AAA has increased investment in X service" or "the AAA has reduced Y service") or it could reflect that the AAA is affirmed in its intentions due to Z input from the public or the Advisory Council.

While not required, if there is an endorsement by the AAA Advisory Council for the AAA's Area Plan, the AAA should also indicate that here.

If the AAA finds that it is limited in what it is able to include or offer through the Area Plan and it does not wholly meet or reflect the public input or Advisory Council consultation offered, the AAA may want to also reflect on that here as well.

Funding with the Planning and Service Area

The Older Americans Act (OAA) Final Rule ([45 CFR § 1321.65\(b\)\(6\)](#)) requires the Area Agency on Aging (AAA) Area Plans include how direct services funds under the OAA will be distributed within the planning and service area (PSA) in order to address populations identified as in GEN and GSN.

NOTE: Only AAAs that serve multiple localities (i.e., cities or counties) need to complete this section. AAAs that only serve one locality do NOT need to complete this section. The AAAs that do **not** need to complete this section are Alexandria City (8A), Arlington County (8B), and Loudoun County (8E). These AAAs can leave the page blank or indicate that this page is "not applicable."

In making decisions for allocating resources or providing services within the PSA, AAAs should ensure equitable, but not necessarily equal, allocation of resources within the PSA. In considering this section, the AAA may want to consider if it has a methodology or standard policy or procedure for decisions on allocating resources or designing services within the PSA. For example, if the AAA has a locality that is resource rich and a locality that is lacking in local resources within the PSA, does that factor into the decision making for the AAA's Area Plan?

In responding to this section, AAAs that serve multiple localities should explain how they allocate resources and provide services within or throughout the PSA and how those decisions are informed by the populations of GEN and GSN within the PSA. Some potential considerations include:

- The placement of senior centers or congregate meal sites within the PSA.
- Why might a service only be available in selected locality(ies)?
- How might the delivery of a service differ in one locality compared to another?
- How might X needs or resources be different in an urban locality compared to a rural locality within the PSA?

These are some sample questions (not required questions), which are intended to help AAAs generate a thoughtful response to this OAA-required Area Plan component.

Service Coordination

The Older Americans Act (OAA) details information that the Area Agency on Aging (AAA) must provide related to carrying out certain requirements within the OAA. This section asks for information based on specific assurances contained within the OAA that must be addressed by the AAA in its Area Plan.

Mental and Behavioral Health Services Coordination

OAA Section 306(a)(6)(F) requires that each AAA Area Plan shall provide that the AAA will, in coordination with [DARS] and with the [Virginia Department of Behavioral Health and Developmental Services], "increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental and behavioral health services (including mental health screenings) provided with funds expended by the AAA with mental and behavioral health services provided by community health centers and by other public agencies and nonprofit private organizations."

In this subsection, the AAA should describe how the AAA coordinates with mental health service organizations and agencies to increase public awareness of mental health disorders and remove barriers to diagnosis and treatment for older adults.

The AAA may want to consider addressing:

- Any collaborations or partnerships with the local Community Services Board (CSB) or Behavioral Health Authority (BHA)
- Any efforts to increase awareness of CSB/BHA services and [9-8-8](#) among older adults and caregivers
- Any policies and procedures, practices, or data that demonstrate that AAA has been or is making referrals for AAA clients for CSB/BHA or other mental or behavioral health services

- Any collaborations or partnerships in place with DBHDS initiatives (e.g., RAFT or DBHDS-funded long-term care facility placements) that are designed to keep older adults with mental or behavioral issues in the community and out of state psychiatric hospitals
- Any collaborations or partnerships focused on addressing substance use disorders, risk reduction, or suicide prevention among older adults
- Any collaborations or partnerships focused on serving individuals with intellectual and developmental disabilities (ID/DD) who are older adults or approaching elderhood
- If the AAA is offering an evidence-based program with a mental or behavioral health component or focus as part of its Disease Prevention and Health Promotion programming
- If the AAA offers Individual Counseling as a service under Title III-E

This list above is not mandatory or exhaustive. It is designed to help AAAs brainstorm how they may currently be meeting this OAA requirement or what actions the AAA may want to initiate to meet this OAA requirement for the forthcoming Area Plan year.

NOTE: While not considered a traditional behavioral health condition, the AAA may also want to highlight any efforts the agency is undertaking related to dementia. AAAs should be aware, however, that a response that *only* addresses dementia related activities and efforts is **not** sufficient for meeting this OAA requirement regarding mental and behavioral health conditions.

Assistive Technology Services Coordination

OAA Section 306(a)(6)(I) requires that each AAA Area Plan shall provide that the AAA will, coordinate with [DARS] “to disseminate information about the State assistive technology entity and access to assistive technology options for serving older individuals.”

In Virginia, the State Assistive Technology Entity is the Virginia Assistive Technology System (VATS), housed within DARS.

In this subsection, the AAA should describe how the AAA coordinates with the VATS to increase access to assistive technology (AT) options for older individuals.

The AAA may want to consider addressing:

- AAA efforts to provide access to and promote the use the VATS Social Health Kits that were developed through a partnership with No Wrong Door
- How the AAA increases awareness of VATS among AAA clients and caregivers
- How the AAA makes referrals to VATS for AAA clients and caregivers
- How the AAA increases awareness and makes referrals to the Foundation for Rehabilitation Equipment & Endowment (F.R.E.E.) for durable medical equipment (DME)
- Any plans to partner or invite DARS VATS staff to present or provide information to AAA staff about VATS

This list above is not mandatory or exhaustive. It is designed to help AAAs brainstorm how they may currently be meeting this OAA requirement or what actions the AAA may want to initiate to meet this OAA requirement for the forthcoming Area Plan year.

Emergency Preparedness

The Older Americans Act (OAA) details information that the Area Agency on Aging (AAA) must provide related to carrying out certain requirements within the OAA. This section asks for information based on specific assurances contained within the OAA that must be addressed by the AAA in its Area Plan.

The OAA Final Rule ([45 CFR § 1321.97\(b\)](#)) requires that AAAs establish Continuing of Operations Plans (COOPs) and All-Hazards Emergency Plans that are based on completed Risk Assessments for All-Hazards. These must be updated annually.

OAA Section 306(a)(17) requires that each AAA Area Plan include information detailing how the AAA “will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for disaster relief service delivery.”

In this section, the AAA should describe their efforts to coordinate activities and develop long-term emergency preparedness plans with local and state emergency response agencies, relief organizations, and other institutions involved in disaster relief.

In the AAA response, the AAA should:

- Summarize the AAA’s COOP and emergency preparedness plans
- Identify the last time the AAA’s COOP, Emergency Plan, and Risk Assessment were last updated; this could also include the AAA’s intentions for upcoming or future updates
- Identify the key entities and organizations the AAA has developed meaningful relationships with so that the AAA can prepare for potential emergencies

The AAA could also provide information on prior emergencies, how the AAA responded to those prior emergencies, and lessons learned that the AAA will employ for future emergencies.

NOTE: For AAAs that have Title VI Grantees overlapping with the AAA’s PSA, the AAA response should also reflect the AAA’s efforts to prepare for and coordinate emergency responses with those Title VI Grantees.

Serving Older Native Americans

The Older Americans Act (OAA) details information that the Area Agency on Aging (AAA) must provide related to carrying out certain requirements within the OAA. This section asks for information based on specific assurances contained within the OAA that must be addressed by the AAA in its Area Plan.

OAA Section 306(a)(6)(G) requires that each AAA Area Plan shall provide that the AAA will, “if there is a significant population of older individuals who are Indians in the [PSA] of the [AAA], the [AAA] shall conduct outreach activities to identify such individuals in such area and shall inform such individuals of the availability of assistance under this Act.”

NOTE: This question is only required of AAAs that have an Older Americans Act (OAA) Title VI Grantees in the PSA. These include:

The Chickahominy Tribe	PSA 15 served by The Span Center
The Upper Mattaponi Tribe (on behalf of Upper Mattaponi and the Pamunkey tribes)	PSA 17/18 served by Bay Aging
The Monacan Nation	PSA 6 served by Valley Program for Aging Services PSA 11 Central Virginia Alliance for Community Living

All other AAAs can leave the page blank or indicate that this page is “not applicable.”

The AAAs identified in the table above should describe the coordination efforts between the AAA and the Tribal Organizations on outreach activities to inform older Native Americans about OAA services and increase service access and provision.

As a reminder, the OAA Final Rule ([45 CFR § 1321.69](#)) requires that AAAs with overlapping Title VI Grantees develop **policies and procedures** that address the following components:

- How the area agency's aging network, including service providers, will provide outreach to Tribal elders and family caregivers regarding services for which they may be eligible under Title III
- The communication opportunities the area agency will make available to Title VI programs, to include Title III and other funding opportunities, technical assistance on how to apply for Title III and other funding opportunities, meetings, email distribution lists, presentations, and public hearings
- The methods for collaboration on and sharing of program information and changes, including coordinating with service providers where applicable
- How Title VI programs may refer individuals who are eligible for Title III services
- How services will be provided in a culturally appropriate and trauma-informed manner
- Opportunities to serve on advisory councils, workgroups, and boards, including area agency advisory councils as set forth in 45 CFR § 1321.63

In this section, the AAA should provide a summary narrative of the AAA policies and procedures and any activities that the AAA is engaged in address the components identified above and meet the OAA requirement.

Services to be Provided

For this section AAAs should indicate which programs the Area Agency on Aging (AAA) provides with Older Americans Act (OAA) funding by checking the corresponding boxes under Title III Funding Source or with state funding by checking the corresponding box under State General Funds (GF).

The funding sources indicated on this page should align with the Area Plan Budget that is submitted to DARS. Not all sources listed on the Area Plan Budget, such as fees and voluntary contributions, are included on this page. Some services can only be funded with specific titles of the OAA or with State General Funds; shaded sections in this table indicate a specific program cannot be funded with that specific source.

Some required services have been pre-checked, but can be edited, if needed. Those service are:

- **CRIA, Transportation, Legal Assistance and Outreach/PIE**—funded with Title III-B
- **Congregate Nutrition and Home Delivered Nutrition**—funded with Title III-C1 and C2, respectively.

NOTE: Programs or services marked with OAA funding on this page must have a corresponding Service Page in Part 3.

In order to complete the **Title III Services** section, for each service that the AAA intends to provide with allowed Title III funding **AND/OR** State General Funds (from any earmarked source—Community Based, Transportation, CCEVP, etc.), check the corresponding box [see **Figure 3.1**] to the right of the specific service under the correct Title III funding source column:

[Figure 3.1]

Area Plan Services Title III Services	Title III Funding Source					
	B	C1	C2	D	E	State GF
Group 1: In-Home						
Adult Day Care						
Checking						
Chore						
Homemaker						
Personal Care						
Group 2: Access						
Care Coordination						
Care Transitions						
Communication, Referral, Information & Assistance	X					
Options Counseling						
Transportation	X					
Assisted Transportation						
Group 3: Legal Assistance						
Legal Assistance	X					
Group 4: Other Services						

As you can see in **Figure 3.1**, the gray boxes indicate that particular service cannot be funded with that particular Title III funding source. For example, Care Coordination cannot be funded with III-D.

NOTE: The allowed funding sources on this page for each service correspond with the Area Plan Budget. For services checked on this page, a Service Page must be completed in Part 3 **AND** must have allocations in the corresponding sections on the Area Plan Budget. **If one or more items is missing, the Area Plan will be sent back for corrections.**



For **Title VII and State General Fund Services**, the allowed funding sources are different from **Title III Services**. **Figure 3.2** shows that the allowed funding for these programs are B, Elder Abuse, Ombudsman and State General Fund (GF).

Elder Abuse Prevention can only be funded with OAA Title III-B, Title VII Elder Abuse and State GF.

Long-Term Care Ombudsman Program can only be funded with OAA Title III-B, Title VII Elder Abuse, Title VII Ombudsman and State GF.

State General Fund Services can only be funded with State GF.

[Figure 3.2]

Title VII Services 	B	Elder Abuse	Ombudsman	State GF
Group 8: Elder Abuse Prevention				
Elder Abuse Prevention				
Group 9: Long-term Care Ombudsman				
Long-Term Care Ombudsman				
State General Fund Services 				State GF
State Funded Nutrition Services				
State Funded Home Delivered Nutrition				
Care Coordination for Elderly Virginians Program				
Service Coordination 2				
Service Coordination 1				
Senior Outreach to Services				
Person Centered Options Counseling				
Care Transitions				

Once all services the AAA intends to provide and with which specific OAA funding source has been identified on this page, this section is complete.

Services that Address Key Needs: Short Answer Question

The Older Americans Act (OAA) details information that the Area Agency on Aging (AAA) must provide related to carrying out certain requirements within the OAA. This subsection asks for information based on specific requirements contained within the OAA Final Rule that must be addressed by the AAA in its Area Plan.

The OAA Final Rule, specifically [45 CFR § 1321.65\(c\)](#), requires that AAA Area Plans, “incorporate services which address the incidence of hunger, food insecurity and malnutrition; social isolation; and physical and mental health conditions.”

In this subsection, the AAA should briefly identify or describe which services the AAA will provide, as reflected on the chart in this section, that help address hunger, food insecurity, malnutrition, social isolation, and physical and mental health conditions.

- In some cases, it will seem rather obvious that a service addresses a listed concern (e.g., Title III-C programs address hunger and social isolation); regardless, AAAs should still include those more obvious responses.
- In addition, in some cases a singular service will address multiple categories (e.g., also Title III-C programs); please also identify those accordingly.

The AAA may respond to this in a narrative/paragraph form or through a bulleted list.

Self-Direction Services: Short Answer Question

The Older Americans Act (OAA) details information that the Area Agency on Aging (AAA) must provide related to carrying out certain requirements within the OAA. This subsection asks for information based on specific requirements contained within the OAA Final Rule that must be addressed by the AAA in its Area Plan.

The OAA Final Rule, specifically [45 CFR § 1321.65\(d\)](#), requires that AAA Area Plans, “shall provide, to the extent feasible, for the furnishing of services under this Act, through self-direction.”

According to [Applied Self-Direction](#), “self-direction is a model of long-term care service delivery that helps people of all ages, with all types of disabilities, maintain their independence at home. When a person self-directs, they decide how, when, and from whom their services and supports will be delivered. Typically, the converse of self-direction is “agency-direction.”

In this subsection, the AAA should indicate if they provide any AAA services through the self-directed model. If no services are provided through self-direction, the AAA should indicate that accordingly.

Among the universe of possible OAA services, the OAA services that would be most likely to be provided through self-direction (or agency-direction) are personal care, homemaker, and respite care.

NOTE: Options Counseling and Person-Centered Options Counseling, while aligned with the intentions of the self-direction model, should be discussed on the respective service pages later in the Area Plan and not listed in this subsection.

Other AAA Services



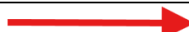
Indicate in this section by checking the corresponding box to the right of the service all other services that the Area Agency on Aging (AAA) provides that are not funded through the Older Americans Act (OAA) Title III or VII.

Programs and services marked on this page must have a corresponding Service Page completed in **Part 6**.

The most common Other Services an AAA may elect to provide have been prefilled in this table. Any other service not named can be entered into the blank text fields provided below “Weatherization”.

Figure 4 provides an example of what this table should look like:

[Figure 4]

Other AAA Services	Providing Service
Adult Day Center	
Certified Application Counselors	
Care Transitions	
Community Action Agency (CAA)	
DRPT Transportation	
Emergency Services	
Foster Grandparents 	X
Home Repair/Modification	
U.S. Housing and Urban Development (HUD) Housing	
Low Income Home Energy Assistance Program (LIHEAP)	
Managed Care Services	
Medicaid Transportation	
Options Counseling	
Program for All-Inclusive Care for the Elderly (PACE)	
Virginia Public Guardianship & Conservator Program	
Retired Senior Volunteer Program (RSVP)	
Senior Community Service Employment Program (SCSEP; OAA Title V)	
Senior Companions	X
Senior Cool Care	
Senior Farmers' Market Nutrition Program	
Senior Medicare Patrol	
Supplemental Nutrition Assistance Program (SNAP) Benefit Counseling	
Virginia Insurance Counseling and Assistance Program (VICAP)	
Weatherization	
EXAMPLE SERVICE  	X

Waiver Requests

The new version of the Area Agency on Aging (AAA) Area Plan includes five (5) potential waivers, four (4) of which are located in this section and built into the Area Plan.

The fifth waiver, the Home Delivered Meals Infrequent Delivery (HDM-ID) Waiver, is not available for all AAAs and is provided as an addendum to the Area Plan for those limited AAAs that qualify for it and determine that they need to request it from DARS.

This section of the Companion Manual provides additional instructions for how to complete the four waivers contained in the Area Plan and potentially available to all AAAs to request.

In reviewing the Area Plan Program, please note that the Area Plan Program document itself contains instructions for each waiver that all AAAs should review prior to submitting the applicable waiver request.

AAAs should be prepared to make a compelling case for why the applicable requirement should be waived for the AAA's PSA. **Remember, waivers are called "waivers" for a reason; they should be the exception, not the standard.**

Generally, if approved, the four waivers included in this section are valid for the duration of the AAA Area Plan Cycle. That being said, DARS reserves the right to revoke a previously approved waiver if at any point it has concerns with the implementation or operations of the AAA and observes that the waiver is not in the best interest of the PSA.

DARS is seeking to bring AAA Area Plans into compliance with the OAA Final Rule by October 1, 2025, and to do so, all existing waiver requests and approvals must be updated and integrated into AAA Area Plans.

NOTE: For the FFY 2026 Area Plan cycle specifically:

- **If an AAA has an already approved waiver, the AAA must update the appropriate Waiver Request Form and resubmit it (with the supporting documentation, if required) as part of the AAA's FFY 2026 Area Plan.**
- If DARS approves the AAA's Waiver Request during the FFY 2026 Area Plan process, the applicable Waiver is considered valid for the duration of the AAA Area Plan Cycle. In this case, the validity for FFY 2026 Waivers would remain in place for FFY 2027.
- The AAA would then need to update and request to renew the applicable Waiver(s) in FFY 2028 for the next Area Plan cycle.

This Companion Manual is intended to guide the AAAs through the FFY 2026 Area Plan development and submission process. AAAs that request waivers outside of the standard Area Plan development and submission cycle should treat them as Area Plan Amendments. Please review the [Changes to AAA Area Plans in Years 2-4](#) for more information on Area Plan Amendments. [NOTE: The MAP Waiver requires both a 30-Day Public Comment Period and Public Hearing.] If DARS approves those Area Plan Amendments, DARS would then notify the AAA and issue a DARS-AAA Contract Modification.

Minimum Adequate Proportion Waiver

The Minimum Adequate Proportion (MAP) Waiver is derived from requirements contained in the Older Americans Act (OAA) statute, the OAA Final Rule, and as prescribed in state regulations.

Specifically, the OAA Final Rule requires that the AAA Area Plan address the AAA's compliance with (or potential waiver of) MAP standards set by DARS (see [45 CFR § 1321.65\(b\)\(8\)](#)).

Under OAA Section 307(a)(2)(C), the Virginia State Plan for Aging Services must specify a minimum proportion of the funds received by each AAA to carry out Title III-B services that will be expended (in the absence of a DARS-issued waiver under OAA Section 306(c)), by the AAA to provide each of the categories of services specified in section 306(a)(2), which are Access Services, In-Home Services, and Legal Assistance].

Under OAA Section 306(c), DARS, in approving AAA Area Plans, may waive the requirement for MAP if the AAA demonstrates to DARS that services furnished are sufficient to meet the needs for the PSA and that the AAA has conducted a timely public hearing.

The MAP Waiver process and authority is further outlined in state regulations under 22VAC30-60-100.

Through the Virginia State Plan for Aging Services and 22VAC30-60-100, DARS has established the following MAP standard for AAAs:

%	Service Category
15%	Access Services – defined by the OAA, Section 306(a)(2)(A) as care coordination, communication, referral, information and assistance (CRIA) and transportation
5%	In-Home Services – defined by the OAA, Section 102(30) as adult day care, checking, chore, homemaker, personal care and residential repair and renovation
1%	Legal Assistance – defined by the OAA, Section 102(33) as legal advice and representation provided by an attorney including counseling or other assistance by a paralegal or law student supervised by an attorney or counseling or representation by a nonlawyer, where permitted by law

In the absence of a MAP Waiver Request through the AAA Area Plan, DARS assumes that the AAA intends to meet the MAP standards as established. DARS will verify this through the AAA Area Budget that the AAA submits to DARS.

If an AAA would like to request a MAP Waiver, it must seek public input first. During a regular AAA Area Plan development cycle, if an AAA is requesting a MAP Waiver, the AAA may conduct the public input process for the MAP Waiver in conjunction or simultaneously with the public input process for AAA's Draft Area Plan more generally. **The AAA should review the instructions provided earlier in this chapter for what is required regarding public input.**

In addition, for the MAP Waiver public input process:

1. The AAA must notify all interested parties about the Public Hearing (22VAC30-60-100 G): This includes the AAA's Governing Board and Advisory Council, and such public notice structure

should follow the instructions as provided for the Public Hearing held on the AAA Draft Area Plan earlier in this section. The AAA's request for a MAP Waiver must be specifically called out in the public notice for the Public Hearing.

2. The AAA must give interested individuals an opportunity to provide input at the Public Hearing (22VAC30-60-100 G).
3. The AAA must accept written comments from the public for 30 days (22VAC30-60-100 G): The public notice structure should follow comparable instructions as provided for the 30-Day Public Comment Period held for the AAA Draft Area Plan earlier in this section. The AAA's request for a MAP Waiver must be specifically called out in the public notice for the 30-Day Public Comment Period.
4. The AAA must submit a complete record of the public comments along with the MAP Waiver request to DARS (22VAC30-60-100 H): This includes written comments provided during the 30-Day Public Comment period and any received through the AAA's Public Hearing.

In the MAP Waiver Request Form, the AAA should provide justification that demonstrates support for the MAP Waiver request. AAAs should be prepared to make a compelling case for why the MAP requirement should be waived for the AAA's PSA. Remember, waivers are called "waivers" for a reason; they should be the exception, not the standard.

Separately, the AAA should submit a complete record of the public comments and any supporting documentation when they submit the AAA Final Area Plan for DARS' review.

NOTE: In soliciting public input on the MAP Waiver, the AAA only needs to publish the AAA Area Plan with the corresponding MAP Waiver Request Form. DARS does not require AAAs publish the supporting documents. The AAA may opt to publish the supporting documentation at their discretion, but they must always provide a copy to the public if requested.

As stated earlier, generally, if approved by DARS, the MAP Waiver is valid for the duration of the AAA Area Plan cycle. That being said, DARS reserves the right to revoke an AAA's MAP Waiver if at any point it has concerns with the implementation or operations of the AAA and observes that the MAP Waiver is not in the best interest of the PSA.

NOTE: AAAs should be aware that the public input requirements needed for a MAP Waiver remain in effect at all times, regardless of when the MAP Waiver is requested. Outside of the regular Area Plan cycle, the AAA would need to initiate a standalone public input process (including a 30-Day Public Comment Period and Public Hearing plus the Advisory Council consultation and Governing Board approval) on the MAP Waiver and submit the MAP Waiver Request and supporting documentation to DARS for consideration as an Area Plan Amendment. If approved, DARS would execute an Area Plan Amendment with the AAA and issue a DARS-AAA Contract Modification.

Cost Sharing Waiver

As permitted by Section 315(a) of the Older Americans Act (OAA), the Virginia Department for Aging and Rehabilitative Services (DARS) is permitted to implement cost sharing for all services funded by the OAA by recipients of the services except for the following services which the OAA **prohibits** the use of cost sharing:

1. Communication, Referral, Information and Assistance (CRIA), Outreach/Public Information and Education (PIE), Care Coordination
2. Long-Term Care Ombudsman, Elder Abuse Prevention, Legal Assistance, or other consumer protection services
3. Congregate and Home Delivered Meals
4. Any services delivered through tribal organizations

As required in the Virginia Appropriation Act, DARS cannot waive cost sharing for programs provided solely with state general funds (SGF) that are not used as OAA match funds. It is the intent of the Virginia General Assembly that SGF continue to be subject to a cost sharing program.

An Area Agency on Aging (AAA) may request a Cost Sharing Waiver to the [DARS Cost Sharing Policy](#) and receive approval if the AAA can adequately demonstrate that –

1. A significant proportion of persons receiving services under the OAA have incomes below the threshold established in DARS policy; or
2. Cost sharing would be an unreasonable administrative or financial burden upon the AAA.

If the AAA is completing the Cost Sharing Waiver Request, it must first identify which above the above criteria the AAA meets.

The AAA should then use the narrative space to:

1. Identify the specific services the AAA is requesting a Cost Sharing Waiver for, if applicable; and
2. Provide the reason(s) for the Cost Sharing Waiver request, including a detailed explanation that adequately demonstrates the need for a Cost Sharing Waiver.

AAAs may request a Cost Sharing Waiver for all services that are subject to cost sharing or for only certain/selected service(s). The AAA response should clearly indicate what services the AAA would like the Cost Sharing to be waived by DARS.

Separately, the AAA should submit any supporting documentation when they submit the AAA Final Area Plan for DARS' review. Supporting documentation can be very helpful in making the case to DARS that the AAA should receive a Cost Sharing Waiver. Supporting documentation for a Cost Sharing Waiver could include:

- Data that reflects the proportion of the AAA's total clients are considered low-income
- Reports or expenses that outline the administrative costs associated with implementing cost sharing

The documents listed above are not mandatory or exhaustive. These are just some examples.

Alternative Fee Scale Waiver

Area Agencies on Aging (AAAs) must adhere to the [DARS-DAS Sliding Fee Scale](#) in use with Older Americans Act (OAA) and State General Fund (SGF) cost sharing programs. If the AAA wishes to request an Alternative Fee Scale Waiver, the AAA must complete the sections below.

As required by the OAA, Virginia cannot permit cost sharing by a low-income older individual if the income of such individual is at or below the federal poverty line. In other words, the AAA cannot apply cost sharing for services to individuals at or below the federal poverty line.

If the AAA wishes to request an Alternative Fee Scale Waiver, the AAA must first check the box indicating that on the form.

Next, the AAA should state the service(s) that an Alternative Fee Scale Waiver is being requested. AAAs may request an Alternative Fee Scale Waiver for all services that are subject to cost sharing or for only certain/selected service(s). The AAA response should clearly indicate what services the AAA would like to use an Alternative Fee Scale.

Then the AAA should provide a narrative justification and rationale for the Alternative Fee Scale Waiver request. The AAA should include in their response if an Alternative Fee Scale has been approved by the AAA's Governing Board, when that occurred and/or when the Alternative Fee Scale was last reviewed by the AAA's Governing Board, as well as the current funding source for the service(s).

Lastly, the AAA should submit the AAA's proposed Alternative Fee Scale for review. The AAA may also submit any other supporting documentation that would help demonstrate the need for the Alternative Fee Scale.

Direct Services Waiver

As required by Section 307(a)(8)(A) and [45 CFR § 1321.65\(b\)\(7\)](#), the Area Agency on Aging (AAA) Area Plan shall provide that no supportive services, nutrition services, evidence-based disease prevention and health promotion services, or family caregiver support services will be directly provided by the AAA, unless, in the judgment of the Virginia Department for Aging and Rehabilitative Services (DARS):

1. Provision of such services by the AAA is necessary to assure an adequate supply of such services;
2. Such services are directly related to the AAA's administrative functions; or
3. Such services can be provided more economically, and with comparable quality, by the AAA.

At its discretion, DARS has provided for a categorical approval for all AAAs to directly provide the supportive services of:

1. Care Coordination
2. Communication, Referral, Information and Assistance (CRIA)
3. Outreach/Public Information and Education (PIE)

AAAs should ensure that “Yes” is checked under the Direct Service Waiver portion of the applicable Service Pages for Care Coordination, CRIA, and PIE. **No additional Direct Service Waiver Request is needed for Care Coordination, CRIA, and PIE.**

For all other potential services, DARS will only grant approval for the AAA to provide direct services for a maximum of the Area Plan Cycle or period. For each new request, the AAA must describe the AAA's efforts to identify service providers prior to a new or renewed waiver's approval.

For Direct Services Waivers, the AAA must complete two actions:

1. First, the AAA must indicate whether it intends to provide a service directly on each Service Page located in Part 3: Title III Services
2. Second, the AAA must complete a Direct Service Waiver Request Form for each service, except for Care Coordination, CRIA and PIE

A blank Direct Service Waiver Request Form is included on page 24 of the Area Plan as an example, but the Direct Service Request Waiver Form is also located in the VDA Providers Portal with the [2026 Area Plans](#) folder.

NOTE: A Direct Service Waiver Request Form must be completed for **EACH** service for which the Direct Service Waiver is requested. The Direct Service Waiver Requests are specific to a singular service.

In reviewing Direct Service Waiver Requests, DARS will consider:

1. Necessity: If direct service provision fills a regional service gap. Documentation should include service availability, provider capacity, and geographic coverage.
2. Administrative Function: If the services in question are closely linked to the AAA's core administrative responsibilities.
3. Cost-effectiveness: Comparison of AAA service delivery versus service provider contracting, assessing efficiency and quality.

On the Waiver Request Form, the AAA should first select from the dropdown menu of services to identify the service for which the AAA is requesting a Direct Service Waiver.

Second, the AAA should indicate, by checking the appropriate box(es), which reason serves as the impetus for the request. As mentioned earlier, the potential reasons could include:

1. Provision of such services by the AAA is necessary to assure an adequate supply of such services **AND/OR**
2. Such services are directly related to the AAA's administrative functions **AND/OR**
3. Such services can be provided more economically, and with comparable quality, by the AAA

The AAA must select at least one reason, but it may also select more than one. AAAs should check all reasons that apply.

Next, the AAA should provide a narrative justification for the request. In developing the narrative justification, the AAA should consider the previously stated criteria that DARS will use to evaluate requests and consider how the narrative supports the reason(s) checked in the prior subsection. The AAA should include any efforts the AAA has made to locate a service provider, any details regarding the costs of services in the planning and service area (PSA), and any other information relevant for consideration. The AAA should include information regarding AAA's Governing Board review and approval of the provision of direct services.

NOTE: It is entirely possible that the AAA's reason(s) and justification narrative language in a Direct Service Waiver Request for one service may be the same or similar to the content that is included in Direct Service Waiver Requests for other services. For example, if a AAA intends to provide Homemaker and Personal Care directly in order to ensure adequate supply of such services, the reason (checkbox) and accompanying justifications may be the same if there are no other providers in the planning and service area (PSA) who can provide those services.

While DARS is not requiring any supporting documentation be submitted along with Direct Services Waiver Requests:

- The AAA **may** separately submit supporting documentation for Direct Service Waiver Requests at the AAA's discretion for DARS' review.
- The AAA **must** maintain copies of all records, materials, or documents that the AAA referenced in the narrative justification for DARS' monitoring purposes.

Examples of potential supporting documentation could include:

- Prior RFP attempts or recent unsuccessful RFP attempts
- Mapping of available service providers in the PSA
- A history of the AAA's provision of the service
- Organization charts that reflect administrative alignment
- Cost estimates, quotes, or invoices for the provision of services through service providers
- Analysis of the costs and benefits for the AAA's internal service provision

The documents listed above are not mandatory or exhaustive. These are just some examples.

Part 3: Title III Services

Federal Older Americans Act (OAA) regulations ([45 CFR § 1321.65\(b\)\(5\)](#)) require that the Virginia Department for Aging and Rehabilitative Services (DARS) have policies and procedures regarding Area Agency on Aging (AAA) Area Plan requirements that address the following at a minimum:

The services, including a definition of each type of service; the number of individuals to be served; the type and number of units to be provided; and corresponding expenditures proposed to be provided with funds under the OAA and related local public sources under the AAA Area Plan.

This section of the Area Plan is designed to meet the requirements outlined in federal regulations and provide an overview for each projected service the AAA intends to provide. While completing Part 3: Title III Services, refer to the appropriate DARS Service Standards, the Area Plan Budget, and the information provided in the AAA Area Plan Part 2: Objectives and Strategies.

Each Service Page contains elements that will typically be in the same location across all services. There may be some variation between individual services, but generally all services in this category can be approached the same. You will see the following elements occur repeatedly in these sections:

Unit Type, Total Units, People Served- The unit type as defined in the service standard, number of proposed units to be provided in the plan year and number of proposed people that will be served.

Proposed Expenditure Amount, Funding Source, Match Funding- The proposed expenditure amounts and the funding source for this service and if any of the non-federal funding is being used as match funding for federal/OAA funds.

Locality Served- The locations where services will be provided using OAA funds (i.e. cities and/or counties). If a provider is serving all localities, indicate "ALL".

Service Provider(s)- The organization/entity actually providing the service whether it be subcontractors or the AAA under an approved Direct Service Waiver.

Entity Type- A service provider that is a For-Profit or Not-For-Profit organization or entity. The entity could also be a AAA, if the service is being directly provided, or governmental if the AAA is also a local government.

Definition of Service- This is a brief general description of the service. This helps explain the service to the public who may be unfamiliar with OAA services. The full definition is contained within the DARS Service Standards.

Target Populations- Populations that the AAA will provide services to using OAA funds, with a specific focus on those in Greatest Economic Need (GEN) and Greatest Social Need (GSN). In this subsection for the service, the AAA response should include two elements: 1) identify the target populations for the service, and 2) describe how the AAA will target the identified populations so that the target populations are aware of the service and can access it.

Service Description- A detailed explanation of the service being provided. This includes overall program design and operation, staffing, assessments, program evaluation, monitoring of subcontractors and specifically how the AAA will provide it using OAA funds.

NOTE: If the AAA does not provide a particular service, skip the Service Page and leave it blank.

Overview

In general, most of the Service Pages will follow these requirements in this general order. Each Service Page section below will have this general layout. **Where there are specific requirements that differ from other services, it will be clearly defined in that specific Service Page.**

Unit Type: The unit type for the service has likely been prefilled on the Service Page. No further action is required by the AAA for this field if the unit type has been provided.

- **If this field is blank, the AAA must state the unit type for that particular service.** For example: Title III-E NFCSP Other Supplemental Services requires a unit type to be defined by the AAA.

Total Units: Enter the total number of proposed or projected units. This information must match the Area Plan Budget. Units can be found at the bottom of each program column on the Area Plan Budget.

People Served: Enter the total number of proposed or projected people served. This information must match the Area Plan Budget. People served can also be found at the bottom of each program column on the Area Plan Budget.

NOTE: Since some services can be funded with both III-B and III-E funding, make sure units and people served entered into these fields account for both totals contained within their respective tabs on the Area Plan Budget.

Snapshot of Area Plan Budget where this information can be located [Figure 5]:

Planned number of units and planner persons served are highlighted in the image to the right.

Between the highlights you will see the section **'Unit Defined as'**, which contain the unit types prefilled in the Service Pages. When a service requires the AAA to input a Unit Type, the Area Plan Budget will have **'DEFINE'** in that particular service within the Area Plan Budget.

Planned Expenditures	In-Home Services		
	Adult Day Care	Checking	Chore
Funding Source			
Older Americans Act			
Title III-B			
Title III-C(1)			
Title III-C(2)			
Title III-D			
Title VII - Ombudsman			
Title VII - Elder Abuse			
Other Funds			
Voluntary Contributions			
Other Non-Federal			
Fees			
Other Federal			
DMAS - Ombudsman			
Other Local Federal Funding			
NSIP			
General Funds			
OAA General			
Community Based			
Transportation			
Home Delivered Meals			
Supplemental Nutrition			
CCEVP			
Ombudsman			
Undesignated Funds to OAA General*			
Undesignated Funds to CCEVP*			
Total Cash			
In-Kind Amount			
Service Data:			
Planned Number of Units			
Unit Defined as:	Hours	Contacts	Individual Hours
Unit Cost			
Planned Persons Served			

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'**, and complete a Direct Service Waiver Form according to the directions detailed in [Direct Service Waiver](#) section of this document. The Direct Service Waiver Request Form can be maintained as a separate file when submitted for review, and DARS will ensure that it is nested behind this Service Page when the Area Plan is finalized. If the agency utilizes subcontractors for this service, check **'no'**, as nothing else needs to be done for this field.

NOTE: Certain services (e.g., CRIA, Care Coordination and PIE) can be provided directly by the AAA without completing a Direct Service Waiver Form. Ensure that **'yes'** is checked for these services and continue to the other subsections; these services are considered categorically approved for direct service provision.

Proposed Expenditure Amount: List **ALL** proposed expenditures for this program from all sources. This includes Older Americans Act (OAA), State General Funds (SGF), Voluntary Contributions, Fees, and any other state, local, federal or private funding. Most of these figures for OAA and SGF can be located on the Area Plan Budget.

NOTE: These fields will automatically enter all numbers into the [\$0,000.00] format if utilizing Adobe Acrobat. If this field does not work properly, the \$ symbol and numerical placeholders can be manually added.

Funding Source: Federal funding and State General Funding (SGF) sources along with Voluntary Contributions and Fees (if applicable), have been prelisted under this category. The AAA must enter the name of all other sources of funding for this program, such a local funding from the counties or city, private grant awards or other federal and state funding. Those sources should be listed in the blank text fields below the 'Fees' prefilled entry by name.

NOTE: If there are not enough boxes to individualize each funding source, they may be grouped by type, such as all funding from Local Governments, for example.

Match Funding: The match funding column has prefilled check marks that indicate State General Funds (SGF) that are ALWAYS used to match the OAA funding. This is the most common source of match funding that the AAA will indicate, however, there may be instances where other sources of funding unknown to DARS may be used to match the OAA. The AAA can indicate if another source of funding will also be used for match by checking the boxes.

NOTE: There are certain Service Pages (e.g., LTC Ombudsman and State General Fund Services for example) that do not have a match requirement, and this column will be missing. There is no further action required in these cases.

Total Proposed Expenditures: This is the total of the Proposed Expenditure Amounts listed in the column from all sources.

NOTE: If utilizing Adobe Acrobat to complete the Area Plan, this field will automatically total all the expenditure amounts listed within the Expenditure column with the appropriate \$ symbol and numerical placeholders. If the AAA is unable to utilize the automated features within the document, this field can be hand keyed based on the information provided in the expenditure's column.

Locality Served: Enter all localities (cities and/or counties) within the PSA that this particular service operates in and the Service provider(s) that provide the service in the next column. If the particular program operates in all localities within the PSA, all you need to do is type "**ALL**."

NOTE: There is no need to name every locality when it should be '**ALL**' or state your PSA number.

Service Provider(s): If the AAA provides this service directly, list the name of your AAA in this field. If the AAA does not provide this service directly, list all of the subcontractors that provide this service.

NOTE: There may be instances where the AAA is providing the service directly and has a subcontractor named also, or there may be multiple subcontractors that serve all localities or only certain localities.

Entity Type: Use the drop down to indicate the type of entity providing this service. If it is a subcontracted entity, the organization would most likely be a **'Not-for-Profit'** or **'For Profit'** entity. If the AAA directly provides this service, you will indicate **'AAA'** in this field.

Example of a complete Service Page for all sections listed above [Figure 6]:

Service: Adult Day Center						Direct Service Waiver		
Unit Type	Hours	Total Units	1000	People Served	25	Yes	X	No
Proposed Expenditure Amount		Funding Source				Match Funding		
\$1,000.00		Title III-B						
		Title III-E						
		General Fund- OAA General				X		
\$5,000.00		General Fund- Community Based				X		
		Voluntary Contributions						
\$50.00		Fees						
\$1,000.00		Local County Governments						
\$50.00		ABC Foundation Award				X		
\$7,100.00		Total Proposed Expenditures						
Locality Served		Service Provider(s)				Entity Type		
All		123 Adult Day				For Profit		
Red, Orange, Yellow, City of Green		ABC Adult Day Center, Inc.				Not-for-Profit		
						Select Option		

Service Definition: This definition is pre-populated and is intended for the public who may be unfamiliar with OAA services. It does not represent a complete definition of the service, or an official definition that would be contained within the Service Standards. This section does not need any further information from the AAA.

Target Populations: Populations that the AAA will provide services to using OAA funds, with a specific focus on those in Greatest Economic Need (GEN) and Greatest Social Need (GSN). This section should be based on the information provided in Part 2: Objectives and Strategies on pages 8 and 9. In this subsection for the service, the AAA response should include two elements:

1) Identify the target populations for the service. This should include a focus on individuals with GEN and GSN. In many instances, the target populations may be the same or generalizable across multiple services. However, some services may have additional factors to consider, and the target populations may be more specific for a service based on how the service is designed or the unique needs of the PSA.

2) Describe how the AAA will target the identified populations so that they are aware of the service and can access it. Ensuring the targeted populations know about and have access to AAA services usually requires outreach. The AAA should share what action steps or types of outreach activities the agency will engage in to reach the identified targeted populations. In some cases, these described actions might be the same or similar across multiple services. In other cases, the AAA may have identified unique methods for a specific service. For example, the AAA may identify a specific county or portion of a county that may benefit from enhanced outreach to increase enrollment in a service, or the AAA may be partnering with a local community group to make inroads with certain target populations. AAAs may want review who is being serving now and reflect on any potential opportunities to further reach the targeted populations.

Example Statement- Services are targeted to adults aged 60 and over with particular focus on those in greatest social need (GSN) and greatest economic need (GEN). The AAA has identified in the eastern portion of X County has a significant concentration of older adults who are living in poverty, have limited English proficiency, are HIV positive, and have mobility impairments. As such, the AAA will conduct enhanced outreach at 3 senior centers in the X County in hopes of increasing the utilization of this service.

NOTE: As mentioned, this section will generally be similar across services but may differ when there are specific service requirements (for example- 'homebound' for HDMs, or if the AAA is providing more outreach to certain populations of GEN/GSN, like prioritizing those in poverty for Care Coordination or Home Repairs). It is also acceptable to not need the entire space allotted to complete this section.

Service Description: For this section, provide a detailed explanation of the service being provided. This includes overall program design and operation, staffing, assessments, program evaluation, monitoring of subcontractors, and specifically how the AAA will provide it using OAA funds. This section should not only be considered a detailed summary of the service, but also a snapshot of the current program as provided that can be referred back to throughout the length of the Area Plan Cycle.

Example Statement- **[Service name]** is delivered by a team of trained professionals, including *[registered nurses, certified nursing assistants, personal care aides, and housekeeping staff]*. All staff members are thoroughly vetted through background checks and receive ongoing training to ensure they meet our high standards of care. Supervisors are assigned to monitor staff performance and maintain consistent communication with clients to ensure satisfaction.

Upon initial contact, clients will undergo a comprehensive intake process that includes an initial assessment to understand their needs, preferences, and any special requirements. This process ensures that the appropriate services and staff are assigned. Intake is completed within **[# number]** of business days of the client's inquiry, and all documentation is reviewed for accuracy and completeness.

A comprehensive assessment is conducted within **[X number of days]** to evaluate the client's health, functional needs, and living environment. The initial assessment typically takes 60-90 minutes, depending on the client's needs. Regular reassessments are conducted every *[six months]*, or sooner if there are significant changes in the client's condition or needs.

Client satisfaction is routinely gathered through surveys and direct feedback during regular check-ins. Satisfaction surveys are administered **[frequency]**, and all feedback is reviewed by management. Client input is used to make continuous improvements to our services.

The agency conducts yearly audits and performance reviews to monitor subcontractor compliance with contractual obligations and quality standards. A formal process is in place to address any issues of non-compliance, ensuring that subcontracted services meet the same level of care as those provided by direct employees.

NOTE: While this text field will scroll long text if the AAA provides more detail than the space allows, a general rule of thumb is to try to keep the service description concise enough to fit within the defined bounds.

Group 1: In-Home Services

In-Home Services are defined by the Older Americans Act (OAA) to include homemaker, personal care, home health, reassurance either in person or via phone or virtual, chore maintenance, respite care for families including adult day care and minor modifications of homes. DARS has defined Group 1: In-Home Services as: Adult Day Center, Checking, Chore, Homemaker and Personal Care.

The Minimum Adequate Proportion (MAP) requirement for In-Home Services is 5% of total Title III-B funding.

Adult Day, Homemaker and Personal Care can also be considered Respite when funded with III-E.

Some level of Respite Services is required to be provided per [45 CFR 1321.91\(a\)\(4\)](#). Respite Voucher, Institutional Respite and Other (Respite Services) also count towards this requirement, which are located in [Group 7: National Family Caregiver Support Program: Additional Services](#).

Adult Day Center

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Total Units: Remember to sum both Title III-B and III-E proposed units of service if funded from both sources.

People Served: Remember to sum both Title III-B and III-E proposed people served if funded from both sources.

Direct Service Waiver: If the AAA intends to provide this service directly, check 'yes' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Funding Source: This program can be funded with both Title III-B and III-E.

Checking

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Funding Source: Title III-E funding is not allowed for this service, unlike the other In-Home Services in Group 1.

Chore

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Total Units: Remember to sum both Title III-B and III-E proposed units of service if funded from both sources.

People Served: Remember to sum both Title III-B and III-E proposed people served if funded from both sources.

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Funding Source: This program can be funded with both Title III-B and III-E.

Homemaker

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Total Units: Remember to sum both Title III-B and III-E proposed units of service if funded from both sources.

People Served: Remember to sum both Title III-B and III-E proposed people served if funded from both sources.

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Funding Source: This program can be funded with both Title III-B and III-E.

Personal Care

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Total Units: Remember to sum both Title III-B and III-E proposed units of service if funded from both sources.

People Served: Remember to sum both Title III-B and III-E proposed people served if funded from both sources.

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Funding Source: This program can be funded with both Title III-B and III-E.

Group 2: Access Services

Access Services as defined by the Older Americans Act (OAA) means services which may facilitate connection to or receipt of other direct services, including transportation, outreach, information and assistance, options counseling, and case management services.

The Minimum Adequate Proportion (MAP) for Access Services is 15% of total Title III-B funding.

Care Coordination

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: This service is categorically eligible for a Direct Service Waiver and 'yes' has been prechecked on this Service Page. A Direct Service Waiver Form is not required to provide this service directly. No further action is required.

If this is not the case, and the AAA does not want to directly provide this service, uncheck 'yes' and mark 'no' instead.

Funding Source: General Fund- CCEVP can be used to fund this service in conjunction with Title III funding. **If Care Coordination is funded with General Funds- CCEVP only, do not complete this page.** Instead, complete one of the service pages under Part 5: State General Fund Services Care Coordination for Elderly Virginians Program (CCEVP).

NOTE: The AAA is required by [45 CFR 1321.91\(2\)](#) to provide Care Coordination and/or CRIA with Title III-E funding.

Target Populations: The AAA must mention '2 ADL needs' as an eligibility requirement for this service.

Care Transitions

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check 'yes' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check 'no' and move to the next section. No further action is required here.

Funding Source: Care Transitions can be funded with Title III-B, III-D and/or General Fund-CCEVP. **If Care Transitions is funded with General Funds- CCEVP only, do not complete this page.** Instead, complete one of the service pages under Part 5: State General Fund Services Care Coordination for Elderly Virginians Program (CCEVP). **If funded with Title III-D only, do not complete this page.** Instead, complete the Group 6: Disease Prevention/Health Promotion- Disease Prevention Health Promotion Service Page.

Communication, Referral, Information & Assistance (CRIA)

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: This service is categorically eligible for a Direct Service Waiver and 'yes' has been prechecked on this Service Page. A Direct Service Waiver Form is not required to provide this service directly. No further action is required.

If this is not the case, and the AAA does not want to directly provide this service, uncheck 'yes' and mark 'no' instead.

Funding Source: Funding Source: This program can be funded with both Title III-B and III-E.

NOTE: The AAA is required by [45 CFR 1321.91\(2\)](#) to provide Care Coordination and/or CRIA with Title III-E funding.

Options Counseling

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check 'yes' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check 'no' and move to the next section. No further action is required here.

Funding Source: Options Counseling can be funded with Title III-B and/or General Fund- CCEVP. **Options Counseling is funded with General Funds-CCEVP only, do not complete this page.** Instead, complete one of the service pages under Part 5: State General Fund Services Care Coordination for Elderly Virginians Program (CCEVP).

NOTE: Title III Options Counseling or CCEVP Person Centered Options Counseling is a required service as a condition of the AAAs designation as a No Wrong Door (NWD) Aging and Disability Resource Center (ADRC).

Transportation

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Total Units: Remember to sum both Title III-B and III-E proposed units of service if funded from both sources.

People Served: Remember to sum both Title III-B and III-E proposed people served if funded from both sources.

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Funding Source: This program can be funded with both Title III-B and III-E. Be sure to include other non-DARS funding sources that are used towards this program, such as DRPT, or other local funds. If you are also conducting a non-OAA transportation program, be sure to complete a Service Page in Part 6: Other AAA Service.

Service Delivery Elements: In crafting a response to this prompt, the AAA should consider the following questions: What types of transportation services does the AAA offer, such as non-emergency medical transport, fixed route or curb-to-curb? For what purposes and what types of destinations are provided for clients (e.g., medical appointments, congregate meal sites). How often are Transportation Services provided? How many and what types of vehicles are used for Transportation Services? If the AAA sub-contracts for Transportation Services, please outline how the subcontractor(s) implements Transportation Services.

Assisted Transportation

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Total Units: Remember to sum both Title III-B and III-E proposed units of service if funded from both sources.

People Served: Remember to sum both Title III-B and III-E proposed people served if funded from both sources.

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Funding Source: This program can be funded with both Title III-B and III-E. Be sure to include other non-DARS funding sources that are used towards this program, such as DRPT, or other local funds. If you are also conducting a non-OAA transportation program, be sure to complete a Service Page in Part 6: Other AAA Service.

Group 3: Legal Assistance

Legal assistance as defined by the Older Americans Act (OAA) is legal advice and/or representation provided by an attorney to older individuals with economic or social needs, per section 102(33) of the OAA (42 U.S.C. 3002(33)). Legal assistance may include, to the extent feasible, counseling, or other appropriate assistance by a paralegal or law student under the direct supervision of an attorney, and counseling or representation by a non-lawyer as permitted by law.

The Minimum Adequate Proportion (MAP) for Legal Services is 1% of total Title III-B funding.

Legal Assistance

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Entity Type: The entity type options are unique to this service. The choice in the drop-down menu is Type 1-5. A definition for each type is listed below this section of the Service Page. They are:

- Type 1: AAA contracts with a Legal Aid Program funded by Legal Services Corporation (LSC)
- Type 2: AAA contracts with a Legal Aid Program not funded by LSC
- Type 3: AAA has an attorney on staff
- Type 4: AAA contracts with a private attorney

- Type 5: AAA contracts with a Law School Clinical Program

Indicate which type of Legal Service Provider you are utilizing based on the definitions provided.

NOTE: Additional documents should be submitted to the DARS:

- For Legal Entity Types 2, 4 and 5: The AAA should submit a copy of the contract(s) with the Legal Entity(ies) for review by the DARS Legal Services Developer.
- For Legal Entity Type 3: The AAA should submit a copy of the attorney’s job description to the DARS for review by the DARS Legal Services Developer.

Group 4: Other Services

Other Service cover a wide range of programs designed to assist older adults that do not fall into any other category as defined by DARS. These services include assistive technology, employment, emergency, and volunteer services, for example.

Assistive Technology/Durable Medical Equipment (DME)/Personal Emergency Response System (PERS)

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Unit Type: This service is unique in that there are two defined units for this service: Devices and Payments. You can use this service to provide one or both types of units. Devices are actual physical items that are purchased for an individual to use, such as ring doorbells, tablet computers, robotic pets, walkers, canes, etc. Payments are regularly occurring fees such as subscription costs for services, like Life Alert or internet access for a tablet for example.

Total Units and People Served: These should match the unit type of the service, so you may only have one or both rows completed for this depending on how the program is structured at the AAA. However, these should match what is reported in the Area Plan budget.

Direct Service Waiver: If the AAA intends to provide this service directly, check ‘**yes**’ and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it’s submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check ‘**no**’ and move to the next section. No further action is required here.

Consumable Supplies

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Further Considerations: Specifically for Oral Nutrition Supplements (ONS; i.e. Ensure, Boost, Glucerna), please note the following: prior to the recent addition of the Consumable Supplies service, some AAAs were providing ONS (formerly known as liquid nutrition supplements) to participants. These AAAs may have been tracking ONS in PeerPlace under the Home Delivered Meals (HDM) service.

ONS can never be credited as a meal. A meal must still be offered, with the ONS being a supplement to the meal. Please refer to pages 20-21 of [DARS' Menu Planning Guidelines](#) for additional information on ONS. Also, please see ACL's [Oral Nutrition Supplements](#) tip sheet.

All AAAs using ONS must complete the Consumable Supplies Service Page and discontinue using HDM or any other service where ONS service units may have been inputted in the past. In the Consumable Supplies Service Page narrative, please be sure to indicate that **Part A of the UAI and the NSI are both required** and that service units are being tracked as payments.

Emergency Services

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Title III Employment Service

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Medication Management

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Money Management

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Outreach/Public Information & Education (PIE)

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: This service is categorically eligible for a Direct Service Waiver and 'yes' has been prechecked on this Service Page. A Direct Service Waiver Form is not required to provide this service directly. No further action is required.

If this is not the case, and the AAA does not want to directly provide this service, uncheck 'yes' and mark 'no' instead.

Funding Source: This program can be funded with both Title III-B and III-E.

NOTE: The AAA is required by [45 CFR 1321.91\(1\)](#) to provide some Outreach/PIE with Title III-E funding.

Residential Repair and Renovation

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Total Units: Remember to sum both Title III-B and III-E proposed units of service if funded from both sources.

People Served: Remember to sum both Title III-B and III-E proposed people served if funded from both sources.

Direct Service Waiver: If the AAA intends to provide this service directly, check 'yes' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check 'no' and move to the next section. No further action is required here.

Funding Source: This program can be funded with both Title III-B and III-E.

Socialization & Recreation

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Volunteer Program

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Group 5: Nutrition Services

Nutrition Services, as defined by the Older Americans Act (OAA), include Congregate Nutrition, Grab & Go Nutrition (which is a new Service Page), Home Delivered Nutrition, Nutrition Education, and Nutrition Counseling.

Congregate Nutrition

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

NOTE: This Service Page, and most of the Group 5: Nutrition Services section, contains unique fields that differ from the rest of the service pages.

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Total Congregate Meal Sites: This field is unique to Congregate Nutrition. Enter the total number of meals sites within the PSA. This information should match the total number of sites individually listed under the Nutrition Site Information Section of the Service.

Question: "Does the AAA provide emergency meals, in the event of unexpected closures of a congregate site?"

Indicate 'yes' or 'no.' If yes, ensure completion of the Grab and Go Nutrition Service Page, if emergency meals are funded with Title-III C(1) or related expenditures.

NOTE: DARS is anticipating that almost all, if not all, AAAs will indicate "yes" regarding emergency meals.

NOTE: If non-OAA sources are used to fund these emergency meals, briefly state the funding source and process under **Service Description**, otherwise you will be expected to complete the Grab and Go Nutrition Service Page.

Meal Preparation and Service: How are congregate meals prepared and served? Are they prepared and served on-site, frozen or chilled and reheated on-site, delivered hot from a vendor or central kitchen, or prepared in another way?

Efforts to provide innovative/modernized congregate nutrition services: What efforts have been made to enhance the overall experience at the congregate sites? Have there been enhancements to the dining experience to increase participation, such as meal quality or variety, cafe-style meals, culturally inclusive meals, themed events, wellness and mental health support, etc.

Nutrition Assessments, Referral and Screening Information: How are assessments and nutrition screenings conducted and what is the process for managing referrals, including SNAP? Be sure to include terms like VA Quick Form and NSI.

Program Evaluation and Effectiveness: How is the program evaluated for effectiveness? Evaluation may include client surveys for program planning and menu input.

Vendor or Subcontractor Monitoring Process and Frequency: Describe how subcontractors and/or vendors are monitored and the frequency of that process.

Service Description: Any additional information about the service not disclosed in the above sections can be described in this section. The AAA may also elect to provide a very brief summary of the service in the space allotted.

Nutrition Site Information: In this section, list all nutrition sites by name, provide the street address (ex. Purple Senior Center-1234 Winding Road), indicate the county or city the site is located in, its days and hours of operation (ex. MWF 9a-12p or T/Th 8a-10a), and the name of the organization or entity providing the food (ex. Blue Dog, AAA Central Kitchen, etc.)

Grab and Go Nutrition

The requirements for the Grab and Go Nutrition Service Page are derived directly from the requirements found in [45 CFR § 1321.65\(b\)\(10\)](#).

NOTE: This Service Page, and most of the Group 5: Nutrition Services section, contains unique fields that differ from the rest of the service pages.

This is a new Service Page in the Area Plan, but it is not likely a new service delivery modality for the AAAs. **DARS anticipates that all 25 AAAs will need to complete this page by virtue of providing some type of Grab and Go Nutrition with III-C(1) funding currently.**

Grab and Go Nutrition includes **shelf-stable**, pick-up, carry-out, drive-through, or similar meals.

Title III Funding Source: The first step on this Service Page asks the AAA to check the box to indicate which funding source(s) they will use for Grab and Go Nutrition:

- Title III-C(1)
 - This is the AAA's Congregate Meals Program funding. Funding for Grab and Go Nutrition using this source has a cap of 25% of expenditures.
- Title III-C(2)
 - This is the AAA's Home Delivered Meals Program funding. Funding for Grab and Go Nutrition using this source is not capped.

(During implementation, the boxes the AAA checks above should correspond with their PeerPlace tracking for units and AMR submissions for expenditures.)

The rest of this Service Page focuses solely on the AAA's delivery of Grab and Go Nutrition using Title III-C(1) funds. The AAA does not need to provide further narrative on Grab and Go Nutrition if the AAA is only using Title III-C(2) funds.

Grab and Go Nutrition funded with Title III-C(1) can be provided (check the applicable scenarios):

Next, the AAA is asked to identify the scenarios in which Grab and Go Nutrition funded with Title III-C(1) will be provided. The AAA should check the applicable scenarios of the two options provided, which are:

- (A) During disaster or emergency situations affecting the provision of nutrition services and
- (B) To older individuals who have an occasional need for such meals

The AAA may select one or both options.

Examples of (A) Scenarios include inclement weather, power outages, water issues, and when a congregate site is closed unexpectedly due to staff illness. This also includes the distribution of boxes of shelf-stable meals to Title III-C(1) participants twice per year in anticipation of potential future emergencies.

Examples of (B) Scenarios include temporary or time-limited medical or disability reasons, caring for a sick grandchild, and scheduling conflicts for other personal appointments. This includes the distribution of meals in advance or takeaway meals if the individual cannot stay to eat the meal on-site.

NOTE: DARS is *expecting* all 25 AAAs to, at a minimum, select (A) and DARS expects most AAAs to select (B) as well. The aging network has learned a lot from the COVID-19 pandemic as well as the recent instances of winter weather storms, flooding, and other disasters and emergencies. **AAAs should be aware that they MUST at least select (A) in order to retain the option to provide Grab and Go Nutrition, which includes SHELF-STABLE meals (or formerly referred to as “emergency meals”) during these situations.**

In implementing Grab and Go Nutrition, it must **complement** the AAA’s Congregate Meal Program. In other words, the provision of Grab and Go Nutrition is intended to be complementary; it should not supplant or serve as a substitute for a robust and active Congregate Meal Program.

The first written narrative subsection asks the AAA to: “Address how Grab and Go will enhance and not diminish the congregated meals program. Describe how the agency will monitor the impact on Congregate Nutrition. Provide detailed evidence based on current participant data and program projections.”

In the text box provided for the AAA’s response to the prompt above, DARS has pre-populated some content the AAA may want to consider including. DARS has done this in an attempt to help the AAAs complete this Service Page. The AAA does not need to use this content, but it may choose to do so. DARS’ suggested pre-populated content includes:

The AAA attests that it will not exceed the 25% cap on C1 funding for Grab & Go meals for the Area Plan year.

To monitor the impact on the C1 Program, the AAA will: 1) track units and expenditures provided on at least a quarterly basis to ensure the AAA does not exceed the 25% cap; 2) monitor attendance at C1 sites to ensure there are no adverse impacts (e.g., decline in attendance); 3) integrate questions about the experience with Grab & Go Meals into the AAA’s satisfaction surveys for C1 participants; and 4) include Grab & Go Meals in the AAA’s annual program evaluation process.

The pre-populated content provided in the text box is NOT sufficient to address all of the elements required for this prompt. The AAA should also consider and subsequently include narrative related to:

1. Share the scope of how Grab and Go meals have been provided to Title III-C(1) participants to-date or in recent experience. The AAA could identify some scenarios in which Grab and Go meals were or have been provided, with an emphasis on Grab and Go meals being for disasters/emergencies and/or an occasional need and not for a regular need.
2. Identify the volume (an estimate or average would be sufficient) of Grab and Go meals provided over the last fiscal year, which is contextualized into the scope of the volume of regular Title III-C(1) meals provided (again with an estimate or average being sufficient).

- a. **Example:** "The AAA provides 7 shelf stable meals to all Title III-C(1) participants twice per year. Title III-C(1) participants eat an average of 65 meals on-site each year."
- 3. Confirm the 25% cap on C1 expenditures for Grab and Go is understood.
 - a. *A suggested sentence covering this is pre-populated for the AAAs to use.*
- 4. Include the method(s) used to monitor the implementation of Grab and Go meals.
 - a. *Some suggested methods are pre-populated for use. AAAs can use these as is, add to them, or replace them with other methods as appropriate.*

Next, the AAA should address the Target Populations. DARS has indicated that AAAs may only provide Grab and Go Nutrition to existing or active Congregate Meal Site Participants.

For this prompt, DARS has included some suggested pre-populated content:

The AAA will target individuals with greatest economic need (GEN) and greatest social need (GSN) for this service.

For the Target Populations, the suggested pre-populated content above is sufficient on its own.

However, AAAs can also consider and subsequently include additional narrative related to:

- 1. AAAs may refine the target populations to be more specific than GEN and GSN.
 - a. For example, an AAA might want to focus on increasing access to Grab and Go for a specific meal site or specific geographic area within the PSA or it may be looking to specifically reach more older adults living in rural areas in the PSA with the Grab and Go offering.
- 2. AAAs should also indicate if they intend to undertake any efforts or actions the AAA will take to reach the target populations identified (e.g., outreach methods).
 - a. Possible examples could include increased outreach to faith communities or partnering with a senior housing complex.

Next, the AAA should address the Eligibility Criteria for Grab and Go Nutrition. Again, DARS has included some pre-populated content:

Eligibility for Grab & Go using III-C(1) funds will be those individuals who qualify for the regular III-C(1) program and who are existing or active III-C(1) participants.

For the Eligibility Criteria prompt, the pre-populated response is pre-set by DARS. The pre-populated content should be considered the minimum eligibility criteria. While DARS does not anticipate that many AAAs will need or want to do this, AAAs may further narrow the eligibility criteria to a smaller subset of Title III-C(1) participants. However, AAAs cannot widen the eligibility beyond existing or active Title III-C(1) participants.

Next, the AAA is asked to: "Address how the AAA consulted with nutrition and direct service providers, interested parties and the general public on the need for Title III-C(1) Grab and Go."

For this prompt, DARS has suggested some pre-populated content:

The AAA has sought public input in the development of the Area Plan, with specific notice about the Grab & Go Meal provision, through the AAA's public hearing held on _____ and through the 30-day public comment period held on _____. The AAA consulted with the AAA's Registered Dietitian, AAA Advisory Council, and the AAA's nutrition services provider. The AAA further sought the input of C1 participants and their families. In receiving input from these entities, the AAA noted... [wide support, mixed support, no support, etc.].

In this section, DARS has started to provide a suggested pre-populated response, which can be used if it aligns with the AAAs actions. The AAA does not need to use this content, but it may choose to do so.

AAA responses should reflect how they have obtained public input on the Area Plan through the required mechanisms, including a Public Hearing, a 30-day Public Comment Period, and through other methods, such as consultation with the AAA's Advisory Council, the AAA's Registered Dietitian, and the AAA's current Title III-C(1) participants and their families. DARS suggests AAAs "flag" the inclusion of Grab and Go Nutrition in the Area Plan for the public to be specifically aware of. AAAs may want to specifically include nutrition services providers in the public input notices and/or consult with them directly on the AAA's Grab and Go plans.

In this section, AAAs should provide a short summary of their activities here and how they were received.

NOTE: For this subsection, AAAs may either need to: 1) wait to complete this section until after the AAA has obtained public input on the Draft Area Plan, or 2) provide a synopsis that reflects the input received in developing the Grab and Go plans for the Final Area Plan, which would then be updated after the public input has been completed and before the AAA submits the Final Area Plan to DARS.

The last prompt addresses Service Implementation. The goal of this subsection is to paint a picture for the public and DARS of what Grab and Go Nutrition actually looks like for the AAA. To sufficiently address this prompt, the AAA should also consider and subsequently include narrative related to these topics:

- Describe their general plans for implementing Grab and Go using III-C(1) funding
- Address the provision of Grab and Go during disasters/emergencies and/or for individuals on an occasional need based on what the AAA has checked at the top of the page

Examples of questions to consider when drafting a response to this prompt include:

- What type of Grab and Go meals will the AAA provide (e.g., shelf-stable, takeout)?
- How will the AAA coordinate the provision of Grab and Go meals with the AAA's nutrition services provider(s), if one?
- How will Title III-C(1) participants access Grab and Go meals?
- Does the AAA provide a box of shelf-stable meals to Title III-C(1) participants on a standing basis (e.g., twice per year) for emergencies or occasional need?
- Does the AAA provide emergency meals, in the event of unexpected closure of a congregate site? If so, describe the type of meal provided and frequency of the meal.

Home Delivered Nutrition

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

NOTE: This Service Page, and most of the Group 5: Nutrition Services section, contains unique fields that differ from the rest of the service pages.

Direct Service Waiver: If the AAA intends to provide this service directly, check 'yes' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check 'no' and move to the next section. No further action is required here.

Target Populations: The AAA must mention the term 'homebound' as an eligibility requirement for this service.

Types of Home Delivered Meals Served (check all that apply): Indicate which types of meals the AAA provides for this service. If 'other' is indicated, state the type of meal on the space to the right.

Meal Preparation and Delivery: How are home delivered meals prepared and delivered? Are they prepared and served on-site, frozen or chilled and reheated on-site, delivered hot from a vendor or central kitchen, or prepared in another way? If there is more than one preparation method (i.e prepared and delivered hot to urban locations, and frozen delivery for rural locations) be sure to list all methods used. Are volunteers utilized for this service?

Emergency Meal Provision- Type and Frequency: Does your agency provide emergency meals, in the event of unexpected closure of the home delivered meal program? If so, describe the type of meal provided and frequency of the meal.

NOTE: Grab & Go Nutrition, which include emergency meals, using III-C(1) funding should be addressed on the Grab and Go Nutrition Service Page. This subsection asks the AAA to describe if and how the AAA provides emergency meals, which are a form Grab & Go Nutrition, using **III-C(2)** funding.

Nutrition Assessments, Referral and Screening Information: How are assessments and nutrition screenings conducted and what is the process for managing referrals, including SNAP?

Program Evaluation of Effectiveness: How is the program evaluated for effectiveness? Evaluation may include client surveys for program planning and menu input.

Vendor or Subcontractor Monitoring Process and Frequency: If any vendors or subcontractors are utilized, describe the monitoring process and how frequently this is carried out for each vendor.

Service Description: Any additional information about the service not disclosed in the above sections can be described in this section. The AAA may also elect to provide a very brief summary of the service in the space allotted.

Home Delivered Meals Infrequent Delivery Waiver

Section 336 of the Older American Act establishes “nutrition projects for older individuals that provide—on 5 or more days a week (except in rural areas where such a frequency is not feasible and a lesser frequency is approved by the State agency) at least 1 home delivered meal per day, which may consist of hot, cold, frozen, dried, canned, or fresh foods and, as appropriate, supplemental foods and any additional meals that [the Area Agency on Aging] elects to provide.”

An essential component of the Home Delivered Meal (HDM) program is the social interaction and well-being check that naturally occurs during meal delivery. Within the broader aging network, there are concerns that this vital aspect of the HDM program may be lost when bulk meals are delivered less frequently, particularly in rural areas where participants are often isolated or vulnerable, and/or they may lack other sources of contact. Further, there is also a concern that commercial carriers, like FedEx or UPS, whose primary focus is on package delivery, are not designed to address the social, safety, nutritional, or functional needs of HDM participants. While there are financial constraints that also impact HDM programs, especially in rural areas, commercial delivery of home delivered meals should really only be reserved for the small percentage of participants who are geographically isolated and cannot be reached by regular HDM routes, if applicable.

Not all Area Agencies on Aging (AAAs) are eligible to request a Home Delivered Meals Infrequent Delivery (HDM-ID) Waiver. Agencies eligible to request a HDM-ID Waiver must have at least 50 percent or more of the localities within their planning and service area (PSA) defined as “rural” using the same definition provided in the State Plan for Aging Services Intrastate Funding Formula (IFF).

Eligible AAAs that deliver meals less than weekly to 25 percent or more of their total HDM participants due to feasibility constraints must, in cooperation with any service provider(s), develop and submit a HDM-ID Waiver for DARS review and approval through the Area Plan.

The HDM-ID Waiver must be submitted for review and approval prior to the AAA reducing their delivery frequency to less than weekly and must be updated when significant changes are made to the Area Plan.

Waiver Validity and Expiration: Provided there are no concerns with an AAA’s implementation of an approved HDM-ID Waiver, DARS will consider approved HDM-ID Waivers to be valid for the duration of the Area Plan Cycle. Annually, DARS will review rural locality designations during the IFF process to determine if an AAA with an existing HDM-ID Waiver will need to submit a [HDM-ID Transition Plan](#) to discontinue its HDM-ID program prior to the start of the next Area Plan Cycle. AAAs that lose their rural qualification for a HDM-ID Waiver in Year 4 of an Area Plan Cycle will have 1

additional FFY (i.e., Year 1 of the new Area Plan Cycle) to continue operating its HDM-ID program, however, the AAA must be in compliance with the HDM requirements by Year 2 of the new Area Plan Cycle.

DARS will utilize the following factors to consider all waiver requests:

1. **PSA Rurality:** At least 50 percent of the localities within the AAAs PSA are rural.
2. **Participant Vulnerability:** Lack of family contact and support, high nutrition risk, multiple medical conditions, ADL needs, lack of ability to communicate (such as no phone service), structural problems in the home, etc.
3. **Participant Social Isolation:** How the agency will work to combat social isolation for HDM-ID participants.
4. **AAA's Overall Nutrition Services Program:** How are the other required nutrition services implemented: Nutrition Counseling, Nutrition Education and other nutrition services, based the need of individual meal participants.

For AAAs requesting a HDM-ID Waiver, the first step to completing the form is to select your PSA number from the drop-down menu and click on the button labeled 'Click Here.'

In Adobe Acrobat, selecting the PSA and clicking the button will auto-populate all the localities within the PSA in the table. If this function is not available, the AAA will need to hand key to localities into these fields.

Once the localities are populated, indicate in the left-hand column the localities where meals are delivered less than weekly and state the Method of Delivery and Frequency in the right-hand columns as shown in **[Figure 7]**.

Next, using the most recent six (6) months of HDM data from the period of October 1, 2024 – March 31, 2025, the AAA should enter the following figures:

1. The total number of participants who have received HDMs in the PSA during that period. This figure represents all participants who have received HDMs (regular method and ID method). The AAA should be able to easily pull this figure from PeerPlace.
2. The total number of HDM participants who have received less than weekly delivery during that same period. This figure cannot be pulled from PeerPlace; the AAA will have to use another method to obtain this figure. If this is a new Waiver request, the AAA should estimate how many meals are expected to be provided using the ID method.

Once the two figures above have been added:

- If the AAA is using Adobe Acrobat, the percentage of HDM-ID participants will automatically calculate in the third row (Percentage of HDM-ID participants).
- If the AAA is not using Adobe Acrobat, the AAA will have to manually calculate the percentage of HDM-ID participants (i.e., the portion of participants receiving less than weekly delivery out of the total participants receiving HDM) and enter it manually.

Describe how the AAA will monitor and evaluate the success of HDM-ID implementation. For Waiver Renewals, please also include a summary of the outcomes of the existing HDM-ID implementation for the current or prior Area Plan Cycle.

Detail how the AAA will monitor and evaluate the success of the HDM-ID implementation. Facets to consider include: HDM-ID participant satisfaction with the HDM-ID meals (e.g., taste and variety), HDM-participant satisfaction with the HDM-ID process (e.g., delivery schedule, sense of social isolation), and HDM-ID frequency of failed deliveries. For Waiver Renewals, summarize the outcomes of the HDM-ID implementation for the prior Area Plan Cycle.

For New HDM-ID Waiver Requests or for Renewals of HDM-ID Waiver Requests at the Start of a New Area Plan Cycle: Separately, the AAA should also submit to DARS for review the following documents:

- HDM-ID Plan
- AAA Registered Dietitian Nutrient Analysis/Meal Pattern documentation
- Governing Board and Advisory Council Approved HDM-ID Policy or Minutes from the Governing Board and Advisory Council Meetings that Outlined the HDM-ID Policy
- Current Food Vendor Contract/Agreement (for Renewals of HDM-ID Waivers)
- Commercial Package Delivery Procedures (if applicable)

Registered Dietitian Information

This short section of the Area Plan is nestled between the HDM-ID Waiver and Nutrition Counseling but is information pertaining to Nutrition Services as a whole and asks about the AAA's Registered Dietitian.

Indicate the total number of hours per week **OR** per month the dietitian works, and whether they are a full-time, part-time or contractor/consultant.

Nutrition Counseling

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

NOTE: This Service Page, and most of the Group 5: Nutrition Services section, contains unique fields that differ from the rest of the service pages.

Direct Service Waiver: If the AAA intends to provide this service directly, check '**yes**' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check '**no**' and move to the next section. No further action is required here.

Staff Qualifications for Service Delivery: The AAA must employ or retain the services of a RDN through a contract or a partnership agreement. The Nutrition Counseling Program RDN must be *sufficiently* available to perform Nutrition Counseling and other nutrition related responsibilities. The AAA should identify how the AAA’s implementation of Nutrition Counseling adheres to these requirements.

Screening & Assessment: The AAA’s response should reflect, at a minimum, the following elements:

- Screening is done utilizing the NSI.
- If the NSI score is 11 or higher and a “Yes” answer to question 9 about recent unexplained weight loss or gain, this requires a referral to the AAA’s RDN.
- Based on the assessment, the RDN determines individual client nutrition needs, develops and implements a nutrition care plan.

Program Evaluation: The AAA’s response should reflect, at a minimum, that the RDN evaluates the client’s outcomes and maintains documentation in a secure location.

Service Description: Any additional information about the service not disclosed in the above sections can be described in this section. The AAA may also elect to provide a very brief summary of the service in the space allotted.

Nutrition Education

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

NOTE: This Service Page, and most of the Group 5: Nutrition Services section, contains unique fields that differ from the rest of the service pages.

Direct Service Waiver: If the AAA intends to provide this service directly, check ‘**yes**’ and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it’s submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check ‘**no**’ and move to the next section. No further action is required here.

Staff Qualifications for Service Delivery: Nutrition Education must be overseen by a RDN for each Congregate Nutrition and Home Delivered Meal Program. Nutrition Education that is provided, including written materials, must be checked for accuracy and reliability by the RDN. The AAA should identify and affirm that the AAA’s implementation of Nutrition Education adheres to these requirements.

Frequency of Service for both Congregate and Home Delivered Participants: At a minimum, the AAA shall provide Nutrition Education at least quarterly for Congregate Meal participants, and two times per year for Home Delivered Meal participants.

Annual Education Plan Accommodations for Older Adult Learners: The AAA should affirm in this subsection that the AAA and Service Provider have created and implemented an Annual Education Plan that utilizes teaching methods and instructional materials that accommodate older adult learners.

Program Evaluation: Evaluation may include client satisfaction surveys, pre & post-tests, client interviews, etc. Tools and methods that will be used to implement evaluations must be included in the annual Nutrition Education Evaluation Plan. The AAA should include a summary of the Evaluation Plan in this subsection.

Service Description: Any additional information about the service not disclosed in the above sections can be described in this section. The AAA may also elect to provide a very brief summary of the service in the space allotted.

Group 6: Disease Prevention and Health Promotion

Disease Prevention/Health Promotion programs use evidence-based strategies to enhance health, prevent disease, and improve quality of life in aging populations. Evidence-based disease prevention and health promotion services are community-based interventions that have been proven to improve health and well-being and/or reduce risk of injury, disease, or disability among older adults. All programs provided using these funds must be evidence-based and must meet the OAA's requirements.

Health Education & Screening services are designed to promote the wellbeing of older adults by providing information and screenings related to prevention, diagnosis, treatment, and rehabilitation of age-related diseases and chronic disabling conditions to support their health needs.

Disease Prevention/Health Promotion

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check 'yes' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check 'no' and move to the next section. No further action is required here.

List the specific evidenced-based services provided: In this section, list ALL of the evidenced-based services that the AAA is providing. Please refer to the <https://www.ncoa.org/evidence-based-programs/> for a full list of allowable evidence-based programs.

Program Staffing: Identify the staff conducting the evidence-based programs and how they meet the training and certification requirements set forth by the specific program.

Service Locations: Indicate where these programs will take place. Locations should include multipurpose senior centers and congregate meal sites, or at other appropriate community sites convenient and accessible to older individuals.

Participation Tracking: The units of service are sessions and are reported in the DARS-approved client database for each client receiving the service. Sessions can be reported by client on a daily basis but not aggregated (summarized) more than beyond one calendar month. A session is one event that lasts a part of an hour up to one full day. For example, a six-week Chronic Disease Self-Management Program (CDSMP) workshop would equal 6 sessions or 6 units. If a workshop consists of 3 topics presented in a day, this equals 1 session or 1 unit.

Screening: Identify how potential participants are screened. Does the client have chronic conditions, experienced recent falls or have mobility issues, history of cognitive decline, depression or social isolation? What is the process for managing referrals to this service.

Assessments: A Virginia Service – Quick Form or CRIA encounter is required for each person who participates in a program activity.

Service Description: Any additional information about the service not disclosed in the above sections can be described in this section. The AAA may also elect to provide a very brief summary of the service in the space allotted.

Health Education & Screening

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval. If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

NOTE: Title III-D funding cannot be used for this service.

Group 7: National Family Caregiver Support Program: Additional Services

The National Family Caregiver Support Program (NFCSP) Additional Services under Group 7 can only be funded with Title III-E funds under the OAA or with State General Funds (GF).

NOTE: With Title III-E funding, the AAA is required by [45 CFR 1321.91\(3-5\)](#) to provide the following services in this Group (i.e., 1, 2, and 3 below). However, DARS does not set specific minimum funding requirements or service unit requirements for each of the services. How the AAA allocates Title III-E funding within these service categories is up to the AAA so long as the AAA at least offers the minimally required services (e.g., 1, 2, and 3 below).

Service Category	Explanation
1. Individual Counseling, Support Groups, and/or Caregiver Training	The AAA must provide at least one service from these three options: Individual Counseling, Support Groups, or Caregiver Training. The AAA can choose to provide more than one of these services.
2. Respite Care	The AAA must provide Respite Care, which can be done through Group 1: In-Home Service stated above or through Group 7: NFCSP Respite Voucher, Institutional Respite or Other (Respite Services) as provided in this section.
3. Other Supplemental Services	The AAA must provide Supplemental Services on a limited basis to complement care provided by family caregivers. Other Supplemental Services are delineated on the Area Plan Budget and include services such as Transportation, Chore, and Residential Repair, for example.

Individual Counseling

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check 'yes' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check 'no' and move to the next section. No further action is required here.

Support Groups

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check 'yes' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Caregiver Training

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Respite Voucher

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Institutional Respite

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Other (Respite Services)

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Unit Type: This unit type **MUST** be defined by the AAA. This definition must be included in this field and also on the Area Plan Budget at the bottom of this service column.

Direct Service Waiver: If the AAA intends to provide this service directly, check '**yes**' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check '**no**' and move to the next section. No further action is required here.

Service Description: Since this service can be adapted by the AAA depending on the type of respite or assistance provided, ensure that the service description provides a detailed description of how your program functions.

Financial Consultation

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check '**yes**' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check '**no**' and move to the next section. No further action is required here.

Direct Payments

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: If the AAA intends to provide this service directly, check '**yes**' and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Service Description: Since this service can be adapted by the AAA depending on the type of respite or assistance provided, ensure that the service description provides a detailed description of how your program functions.

Other Supplemental Services

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Unit Type: This unit type **MUST** be defined by the AAA. This definition must be included in this field and also on the Area Plan Budget at the bottom of this service column.

Direct Service Waiver: If the AAA intends to provide this service directly, check **'yes'** and complete a Direct Service Waiver Form. The form can be found on the SharePoint in the [Area Plan 2026](#) folder. This Form can be maintained as a separate document when it's submitted to DARS for review, and DARS will merge it into the final Area Plan document upon approval.

If the AAA will not be providing this service directly, check **'no'** and move to the next section. No further action is required here.

Service Description: Since this service can be adapted by the AAA depending on the type of respite or assistance provided, ensure that the service description provides a detailed description of how your program functions.

Part 4: Title VII Services

As provided by the Older Americans Act (OAA), Title VII programs focus on protecting the rights of vulnerable elders. The OAA achieves this goal through three main programs:

1. State Long-Term Care Ombudsman Program, which is designed to promote and protect the rights of individuals living in nursing homes, assisted living facilities, and similar residential care settings
 - In Virginia, State General Funding (SGF) is provided for the program to serve individuals receiving home and community-based services (HCBS) as well
2. Programs for the Prevention of Elder Abuse, Neglect, and Exploitation (ANE)
3. Programs for Legal Assistance

OAA funding for these programs is specifically designated or set aside and serves as the minimum the AAAs must expend to support these programs. AAAs, however, can opt to allocate additional Title III funding to support these programs as well.

NOTE: The programming activities provided by the Area Agencies on Aging (AAA) for the Prevention of ANE are different than the role and responsibilities that Virginia’s local departments of social services (LDSS) provide through Adult Protective Services (APS).

Group 8: Elder Abuse Prevention

As required by [45 CFR § 1324.201](#), DARS is required distribute federal funding for the prevention of elder abuse, neglect, and exploitation (ANE) to “develop, strengthen, and carry out programs for the prevention, detection, assessment, and treatment of, intervention in, investigation of, and response to elder abuse, neglect, and exploitation.”

Further, pursuant to OAA Section 306(a)(6)(H), AAAs must, in coordination with the [DARS], increase public awareness of elder ANE, and remove barriers to education, prevention, investigation, and treatment of elder ANE, as appropriate. Dedicated OAA funding is provided for this purpose and AAA Area Plans must identify how the AAA intends to meet this obligation.

Elder Abuse Prevention

NOTE: The AAA is required to provide Elder Abuse Prevention programming with Title VII funding. AAAs may allocate or budget additional Title III funding for Elder Abuse Prevention as well.

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: There is no waiver requirement for this service, so it has been removed from this Service Page.

Match Funding: There is no required match for this service, so it has been removed from this page.

NOTE: **Forego completion of this page if all Title VII- Elder Abuse Prevention funding is budgeted for the Long-Term Care Ombudsman Program.** If all Title VII- Elder Abuse Prevention funds are used for the Long-Term Care Ombudsman Program, complete the Service Page in Group 9: Long-Term Care Ombudsman Program instead.

Group 9: Long-Term Care Ombudsman Program

The Long-Term Care Ombudsman Program protects and improves the quality of care and quality of life for residents of long-term care facilities and individuals who receive long-term care community services. Designated program representatives enable person-centered, resident-directed support and advocacy by providing information, assistance, resources, and problem-solving support for long-term care recipients and their families and caregivers. Through individual and systems advocacy, the program promotes and protects the health, safety, welfare, and rights of Virginia’s long-term care recipients, serving as a vital link in the continuum of care.

Long-Term Care Ombudsman

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

NOTE: This Service Page contains mostly unique fields, some of which are new from previous versions of the Area Plan.

Service Details (Indicate how the AAA ensures ombudsman coverage): ALL Area Agencies on Aging (AAAs) must answer this question.

If you indicate:

- The AAA operates this service for this PSA only. **Complete this Service Page.**
- The AAA arranges for another AAA to provide this service for this jurisdiction. **Identify the AAA contracted to provide this service in the space provided and this form is now complete. No other information is required.**
- The AAA provides this service for one or more other PSAs. **Identify the planning and service areas (PSAs) by AAA name or PSA number in the space provided, then complete the remainder of this Service Page.**

In compliance with Section 306(a)(9) of the Older Americans Act (OAA), in the upcoming program year the Area Agency on Aging must expend on the Ombudsman Program not less than the total amount of Title III (Section 304 (d)(1)(D) and Title VII funds expended Federal Fiscal Year (FFY) 2019. **Check this box to attest that the above statement is true.**

This subsection relates to the maintenance of effort (MOE) that is required by the OAA for this program. **Check the box to attest.** DARS provides these allocations to the AAA and ensures that MOE is being maintained.

Eligible Populations: This subsection is unique to this service as it has a defined eligible population by both the OAA and the Code of Virginia that must be adhered to. This has been pre-populated, and no other information is required.

Number of long-term care beds: These numbers are provided yearly to the AAA as a part of the funding formula/funding allocations and are sent out by DARS at the beginning of the Area Plan Budgeting Process. Carry that number into this field.

Number of staff assigned to program: Provide the number of staff that operate under the Long-Term Care Ombudsman Program.

% FTE per each staff person assigned: Provide the Full Time Equivalent (FTE) percentage for each staff person assigned to this program (ex. 2 – 100% FTE staff, 3 50% FTE staff).

Volunteer Recruitment and Management (if applicable): If you currently utilize volunteers to support Ombudsman Program activities in your local area, please describe your recruitment and

management activities. If you plan to implement a volunteer component (in coordination with the State Office), please include a description of plans to implement this component.

All host entities (AAAs) providing Ombudsman Program services are required to carry out specific duties (set forth in 45 CFR Part 1324 (Subpart A § 1324.17-19), which include ensuring access to conflict-free ombudsman program services; providing consumers with information and assistance regarding long-term care; investigating and resolving long-term care complaints; and appropriately documenting program activities.

In regard to these required program duties, describe 3 primary (specific) goals for your ombudsman activities this year:

Examples could be:

- During FFY 2026, our program will increase facility visits to assisted living facilities by 20% as documented in PeerPlace.
- During FFY 2026, our program will complete all documentation in Ombudsman PeerPlace within 48 business hours of completing the work being documented.
- During FFY 2026, our program will work to increase outreach and program access for the Ombudsman program by increasing resident council activities by 50%.

Part 5: State General Fund Services

State General Fund (SGF) Services are programs for older adults, like the services provided through the Older Americans Act (OAA), but they are funded solely with state and local funds. These programs generally operate in the same way as OAA programs, but because they are not funded directly by the federal government, certain programs allow for cost sharing for certain programs that are prohibited under the OAA. Also, because they are not OAA services, the AAA does not need to request a Direct Service Waiver to provide these services directly.

State Funded Home Delivered Nutrition

State Funded Home Delivered Nutrition (HDM) in the previous version of the Area Plan was called "Home Delivered Meals- Fee-For-Service." DARS has moved away from the term 'fee-for-service' as the OAA regulations equate that term with 'private pay' programs, which would fall under section 212 of the Older Americans Act (OAA) as contracts and commercial relationships. This program does not allow for true 'private pay' as State Funded HDM must utilize a sliding fee scale and operates the same as OAA cost sharing.

State Funded Home Delivered Nutrition

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: There is no waiver requirement for this service, so it has been removed from this Service Page.

Match Funding: There is no required match for this service, so it has been removed from this page.

NOTE: Since State General Funds (SGF) for this service is not used to match the OAA, the OAA allows cost sharing. (Cost sharing is prohibited for the OAA HDM service.)

The AAA acknowledges that this service requires the use of a sliding fee scale and cannot utilize any OAA or NSIP funding to support this service.

Indicate to the left that the AAA acknowledges this requirement.

NOTE: As stated in the Cost Sharing Waiver on page 21 of the Area Plan: "As required in the Virginia Appropriation Act, DARS cannot waive cost sharing for programs provided solely with SGF that are not used as OAA match funds. It is the intent of the Virginia General Assembly that SGF continue to be subject to a cost sharing program." **This is one of those services.**

Types of Home Delivered Meals Served (check all that apply): Indicate which types of meals the AAA provides for this service. If 'other' is indicated, state the type of meal on the space to the right.

Target Populations: The AAA must mention the term 'homebound' as an eligibility requirement for this service.

Service Description: Provide a description of this service and how it differs from OAA HDM. Identify how the AAA addresses uncollected fees from participants. Include information on meal preparation and delivery, emergency meal provision, nutrition assessments and referrals, program evaluation and subcontractor monitoring.

Care Coordination for Elderly Virginians Program

Care Coordination for Elderly Virginians Program (CCEVP) encompasses the state versions of Title III Care Coordination, Options Counseling and Care Transitions. These services are funded solely with State General Funds (GF).

Service Coordination 2

NOTE: Only complete this page if no Title III funding is budgeted for Care Coordination. If Title III funding is used for Care Coordination, complete the Care Coordination Service Page under Group 2: Access Services instead.

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: There is no waiver requirement for this service, so it has been removed from this Service Page.

Match Funding: This service is used to match OAA funding, so this section is included on this Service Page. **Because it is used as OAA match, cost sharing for this service is prohibited and must operate the same as Title III funded Care Coordination.**

Target Populations: The AAA must mention '2 ADL needs' as an eligibility requirement for this service.

Further Considerations: Although cost sharing is prohibited for this service, Service Coordination Level 2 (CCEVP Level 2) allows for Gap Filling Services. [Gap Filling Services, however, is not allowed under Title III Care Coordination.]

Service Coordination 1

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: There is no waiver requirement for this service, so it has been removed from this Service Page.

Match Funding: There is no required match for this service, so it has been removed from this page.

NOTE: Since State General Funds (SGF) for this service is not used to match the OAA, the OAA allows cost sharing. (Cost sharing is prohibited for the OAA Care Coordination and CCEVP Level 2 services.)

This service requires the use of a sliding fee scale.

NOTE: As stated in the Cost Sharing Waiver on page 21 of the Area Plan: "As required in the Virginia Appropriation Act, DARS cannot waive cost sharing for programs provided solely with SGF that are not used as OAA match funds. It is the intent of the Virginia General Assembly that SGF continue to be subject to a cost sharing program." **This is one of those services.**

Target Populations: The AAA must mention '1 ADL need and a cognitive or mobility impairment' as an eligibility requirement for this service.

Further Considerations: Service Coordination Level 1 (CCEVP Level 1) allows for Gap Filling Services, which is not allowed under Title III Care Coordination.

Senior Outreach to Services

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: There is no waiver requirement for this service, so it has been removed from this Service Page.

Match Funding: There is no required match for this service, so it has been removed from this page.

NOTE: This service is provided at no cost as stated in the Service Standard, and cost sharing or other fees are prohibited.

Person Centered Options Counseling

NOTE: Only complete this page if no Title III funding is budgeted for Options Counseling. If Title III funding is used, complete the Option Counseling Service Page under Group 2: Access instead.

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: There is no waiver requirement for this service, so it has been removed from this Service Page.

Match Funding: This service is used to match OAA funding, so this section is included on this Service Page. **Because it is used as OAA match, OAA cost sharing for this service is prohibited and must operate the same as Title III funded Options Counseling.**

NOTE: Title III Options Counseling or CCEVP Person Centered Options Counseling is a required service as a condition of the AAAs designation as a NWD Aging and Disability Resource Center (ADRC).

Care Transitions

NOTE: Only complete this page if no Title III funding is budgeted for Care Transitions. If Title III funding is used, complete the Care Transitions Service Page under Group 2: Access instead.

Please review the [general instructions](#) for completing Title III Services pages provided earlier in the Manual. Those instructions should be followed in completing this Service Page with the following specific exceptions or considerations:

Direct Service Waiver: There is no waiver requirement for this service, so it has been removed from this Service Page.

Match Funding: This service is used to match OAA funding, so this section is included on this Service Page. **Because it is used as match, OAA cost sharing for this service is prohibited and must operate the same as Title III funded Care Transitions.**

Part 6: Other AAA Services

Complete a Service Page for all other services that the Area Agency on Aging (AAA) provides that are not funded through the Older Americans Act (OAA) Title III. If additional service pages are needed for this section, they can be found on the [VDA Providers Portal](#).

Each Service Page maintains the same elements as the Title III Services and can be approached the same. You will see the following elements occur repeatedly in these sections, and solely up to the AAA to complete:

Unit Type, Total Units, People Served- The unit type as defined by the AAA, if applicable, number of proposed units to be provided in the plan year and number of proposed people that will be served.

Proposed Expenditure Amount and Funding Source - The proposed expenditure amounts and the funding source for this service.

Locality Served- The locations where services will be provided (i.e. cities and/or counties). If a provider is serving all localities, indicate "ALL".

Service Provider(s)- The organization/entity providing the service.

Entity Type- A service provider that is a For-Profit or Not-For-Profit organization or entity. The entity could also be a AAA, if the service is being directly provided, or governmental if the AAA is also a local government.

Definition of Service- This is a brief general description of the service. This helps explain the service to the public who may be unfamiliar with AAA services. The AAA must define each service in this section.

Eligible Populations- Populations that are eligible to receive this service. The AAA must state the eligibility requirements.

Service Description- A detailed explanation of the service being provided. This includes overall program design and operation, staffing, assessments, program evaluation and specifically how the AAA will provide this service.

Other Services

Other Services have the following fields that need to be completed by the AAA:

Unit Type: Enter the unit type for this service, if applicable.

Total Units: Enter the total number of proposed/estimated units for this service.

People Served: Enter the total number of proposed/estimated people to be served.

Proposed Expenditure Amount: List **ALL** proposed expenditures for this program from all sources.

NOTE: These fields will automatically enter all numbers into the [\$0,000.00] format if utilizing Adobe Acrobat. If this field does not work properly, the \$ symbol and numerical placeholders can be manually added.

Funding Source: The AAA must enter the name of all other sources of funding for this program, such a local funding from the counties or city, private grant awards or other federal and state funding.

NOTE: If there are not enough boxes to individualize each funding source, they may be grouped by type, such as all funding from Local Governments, for example.

Total Proposed Expenditures: This is the total of the Proposed Expenditure Amounts listed in the column from all sources.

NOTE: If utilizing Adobe Acrobat to complete the Area Plan, this field will automatically total all the expenditure amounts listed within the Expenditure column with the appropriate \$ symbol and numerical placeholders. If the AAA is unable to utilize the automated features within the document, this field can be hand keyed based on the information provided in the expenditure's column.

Locality Served: Enter all localities (cities and/or counties) within the PSA that this particular service operates in and the Service provider(s) that provide the service in the next column. If the particular program operates in all localities within the PSA, all you need to do is type "**ALL**."

NOTE: There is no need to name every locality when it should be '**ALL**' or state your PSA number.

Service Provider(s): If the AAA provides this service directly, list the name of your AAA in this field. If the AAA does not provide this service directly, list all of the subcontractors that provide this service.

NOTE: There may be instances where the AAA is providing the service directly and has a subcontractor named also, or there may be multiple subcontractors that serve all localities or only certain localities.

Entity Type: Use the drop down to indicate the type of entity providing this service. If it is a subcontracted entity, the organization would most likely be a '**Not-for-Profit**' or '**For Profit**' entity. If the AAA directly provides this service, you will indicate '**AAA**' in this field.

Service Definition: Provide a definition or a description of the service that is being provided.

Eligible Populations: Populations that are eligible to receive this service. The AAA must state the eligibility requirements.

Service Description: A detailed explanation of the service being provided. This includes overall program design and operation, staffing, assessments, program evaluation and specifically how the AAA will provide this service.

NOTE: While this text field will scroll long text if the AAA provides more detail than the space allows, a general rule of thumb is to try to keep the service description concise enough to fit within the defined bounds.

Other Services

The following is a list of the most frequently named other services that AAAs provide, however, this list is not exhaustive, and AAAs should complete as many Other Service Pages as required to adequately capture the breadth of services it provides.

Even though the AAA must populate all the fields for these services (i.e., no fields are pre-checked or pre-populated by DARS), some information provided below may be helpful to accelerate that process:

Adult Day Center

Service Definition: Adult Day Centers are community-based programs designed to provide social, recreational, and therapeutic activities for older adults who need assistance with daily activities or have health concerns. These centers offer a safe environment where seniors can receive care and companionship during the day, which may provide respite to family caregivers.

Certified Application Counselors

Care Transitions

Service Definition: Care transitions refer to the process of moving a patient from one care setting to another, such as from a hospital to home, from a nursing home to outpatient care, or between different healthcare providers. The goal is to ensure continuity of care, minimize the risk of complications, and improve the quality of life during these transitions, especially for older adults who may have complex health conditions. The goal of care transitions is to ensure a smooth, safe, and effective move between different levels or types of care, preventing avoidable hospital readmissions, improving health outcomes, and promoting independence and well-being.

Community Action Agency (CAA)

Service Definition: A Community Action Agency (CAA) is a non-profit organization focused on helping individuals and families overcome poverty. These agencies provide services such as job training, housing assistance, food support, and childcare, aiming to improve quality of life.

DRPT Transportation

Emergency Services

Service Definition: Emergency Services provides financial aid and resources, including referrals to public and private agencies, to older individuals facing emergency situations that threaten their health or well-being. The program offers immediate, short-term assistance to help access necessary resources during emergencies.

Foster Grandparents

Home Repair/Modification

Service Definition: Home Repair/Modification services offer home repairs and maintenance to older adults which helps seniors maintain their homes according to minimum housing standards or adapt their homes to better meet their needs. The service covers essential repairs and modifications to ensure the health and safety. This includes structural repairs, electrical and plumbing work, weatherization, accessibility and security modifications, as well as yard work and home maintenance tasks critical for wellbeing.

U.S. Housing and Urban Development (HUD) Housing

Low Income Home Energy Assistance Program (LIHEAP)

Service Definition: LIHEAP stands for the Low-Income Home Energy Assistance Program, a federal program providing assistance to low-income households with their home energy costs, helping them afford heating and cooling bills, and potentially weatherize their homes.

Managed Care Services

Medicaid Transportation

Service Definition: Medicaid Transportation, also known as non-emergency medical transportation (NEMT), is a Medicaid benefit that provides transportation to and from medical appointments for enrollees who lack other means of transportation, ensuring access to healthcare services.

Options Counseling

Service Definition: Options Counseling is an interactive decision-support process that helps individuals make informed choices about long-term services and supports. The individual, or their legal representative, directs the process with the option to include others they choose. The individual remains actively involved throughout the entire Options Counseling process, ensuring their preferences and needs are prioritized in the decision-making.

Program for All-Inclusive Care for the Elderly (PACE)

Service Definition: The Program for All-Inclusive Care for the Elderly (PACE) is a federally and state-funded program that provides comprehensive medical and social services to dually eligible older adults who receive Medicare and Medicaid and could otherwise require long-term care in a nursing home, allowing them to remain in their homes and communities.

Virginia Public Guardian & Conservator Program

Service Definition: The Virginia Public Guardian and Conservator Program is designed to assist adults who are incapacitated, indigent, and in need of support in making medical, financial, or daily living decisions, but have no suitable individual to serve as their guardian. This vital service ensures that vulnerable individuals receive the necessary care and advocacy they deserve.

The program is managed by the DARS Division for Community Living (DCL) and is delivered through contracts with human service agencies throughout Virginia. Each client is assigned a dedicated public guardian who visits them at least once a month. The guardian provides comprehensive oversight, including supervising medical and residential care, monitoring social service benefits, and advocating for the client's well-being.

Retired Senior Volunteer Program (RSVP)

Senior Community Service Employment Program (SCSEP; OAA Title V)

Service Definition: The SCSEP, or Title V helps low-income, unemployed older adults find employment by providing paid training and supportive services. While having a disability is not an eligibility factor, those with disabilities have priority of service. Serving older adults requires a collaborative approach, as lower-income adults tend to have complex barriers to employment. These can include lack of secure housing, lack of consistent, reliable transportation, physical or mental disabilities, and food insecurity. The 55 and older sector of the work force will be expanding rapidly in the next ten years, and increased prices on essentials like food and housing are bringing more older adults into the workforce.

Eligible Populations: Participants must be at least 55, unemployed, and have a family income of no more than 125% of the federal poverty level (FPL). Enrollment priority is given to veterans and qualified spouses, then to individuals who are over 65, have a disability, have low literacy skills or limited English proficiency, reside in a rural area, are homeless or at risk of homelessness, have low employment prospects, or have failed to find employment after using services through the American Job Center system.

Senior Companions

Senior Cool Care

Service Definition: Senior Cool Care is a public/private partnership program between DARS and Dominion Energy that provides funding to the local AAAs to purchase and distribute cooling units including fans, window air conditioners, and portable air conditioners to eligible older adults.

Eligible Populations: Adults must be 60 years or higher and need additional cooling devices at home. Eligible participants include those with an adjusted gross income at or below 150% of the federal poverty guidelines.

Senior Farmers' Market Nutrition Program

Service Definition: In Virginia, the Senior Farmers' Market Nutrition Program (SFMNP) is called the Farm Market Fresh program. Farm Market Fresh is a USDA, federally funded initiative designed to improve access to fresh, locally grown fruits, vegetables, and fresh cut herbs for income eligible older adults. This program also supports farmers by increasing the use of farmers' markets and roadside stands.

Eligible Populations: Adults must be 60 years or higher and have a household income at or below 185% of the federal poverty guidelines. Eligible participants include those with an adjusted gross income at or below 150% of the federal poverty level.

Senior Medicare Patrol

Service Definition: The Senior Medicare Patrol (SMP) Program Coordinators assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report healthcare fraud, errors, and abuse through outreach, counseling, and education.

Supplemental Nutrition Assistance Program (SNAP) Benefit Counseling

Service Definition: The federally funded Supplemental Nutrition Assistance Program (SNAP) Outreach Program is a state collaboration between DARS and the VA Department of Social Services (DSS) to assist eligible individuals and families with applying for and accessing the SNAP benefits. The program aims to reduce food insecurity by increasing awareness and participation among underserved populations.

Eligible Populations: Outreach services are targeted toward individuals and families with income(s) at or below 130% of the federal poverty guidelines. Eligible participants include older adults, persons with disabilities, and other vulnerable populations that face barriers to accessing SNAP. This can include communities with low SNAP participation rates such as rural areas and non-English speaking households.

Virginia Insurance Counseling and Assistance Program (VICAP)

Service Definition: VICAP is Virginia's State Health Insurance Assistance Program (SHIP), administered and funded through the Administration for Community Living (ACL). VICAP provides free, unbiased, confidential counseling and assistance. VICAP is primarily a volunteer-based program.

Service Description: All services are provided at the local level through the Area Agencies on Aging. Each local program must have a VICAP Coordinator. The coordinators are required to dedicate 80-100 hours per month to VICAP, they are responsible for recruiting volunteers. Counselors cannot be licensed to sell insurance; everyone is screened through the Bureau of Insurance to ensure they do

not hold an active insurance license. All prospective counselors go through an intense training program and must pass a certification exam, then shadow experienced counselors before being able to provide counseling themselves. There cannot be any conflict of interest, no perceived support of or partnership with any insurance company. In addition, the VICAP programs are also required to provide program awareness and education events in their communities. Events should target the hard-to-reach beneficiaries such as low-income, rural, those under 65 and disabled, Native American and limited English-speaking. Counseling topics include Medicare Parts A & B, Medicare Supplemental Insurance (Medigap), Medicare Advantage Plans (Part C), Medicare Prescription Drug Plans (Part D), Long Term Care Insurance, Duals Special Needs Plans (D-SNPs), and counselors assist with filing health care appeals and denials as well as screening beneficiaries to identify those eligible for low-income subsidies and provide application assistance. VICAP works collaboratively with the Senior Medicare Patrol, VICAP counselors help educate and empower beneficiaries to take an active role in detecting and preventing health care fraud and abuse.

Weatherization