



# Area Plan Training: Part III Groups 5 & 6 Nutrition Services & DP/HP

May 1, 2025

# AGENDA

## Overview/Recap

- Review General Instructions
- Document
  - Functionality
  - Submission
- Tool Tips
- [AP Companion Manual](#)

## Nutrition

- Congregate Nutrition
  - Grab & Go Nutrition
- Home Delivered Meals
  - HDM-ID Waiver
    - Unwinding some current HDM-IDs
  - Recap Consumable Supplies, re: ONS
- RDN information
- Nutrition Counseling
- Nutrition Education

## DP/HP

- Disease Prevention/Health Promotion
- Health Education & Screening
- Wrap-Up/Questions
- Following the training, for those AAAs impacted: Unwinding some current HDM-IDs

Office Hours for Groups 5 & 6: Monday, May 12 from 1-2:30PM

# AP Document Functionality

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- Download the [document](#) from the Providers Portal
- Open the document in Adobe (either Reader or Acrobat) on your desktop. Using the web application may cause functionality issues.
- DO NOT use a web browser (such as Chrome) to complete the Area Plan. The built-in functionality will not work, and if you start completing the plan and then save/download, it will delete all the built-in components out of the document and will not be recoverable later.

# Document Submissions

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- DO NOT merge the Direct Service Waivers and/or the Other Services Pages to the Area Plan. Keep them as separate files.
- If you try to combine multiples of these files, it will either generate an error or overwrite the subsequent copies.
- Adobe will not recognize that these pages have unique values and sees them as duplicate copies. It will assume that the first copy is the default and overwrite anything in the fields after it.
- The fields must be individualized before merging, so Adobe will recognize them as unique. DARS will do this for you.



# Review of General Instructions



VIRGINIA DEPARTMENT FOR AGING  
AND REHABILITATIVE SERVICES

**DIVISION FOR AGING SERVICES**

Most Service Pages will follow in this general order.  
Each Service Page section will have a similar 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 typically been pre-filled.  
If this field is blank, the AAA must state the unit type for that particular service.

## Total Units:

Enter the total number of proposed or projected units. This information must match 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 that are entered into these fields account for both totals contained within their respective tabs on the Area Plan Budget.



# Review of General Instructions



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## **Target Populations:**

Identify the target populations for the service. Include a focus on individuals with GEN and GSN. Target populations may be the same or generalizable across multiple services. Some services have additional considerations. Target populations may be more specific for a service based on how the service is designed or the unique needs of the PSA. Describe how those clients will be reached.

## **Service Description:**

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.

See Companion Manual pages 44-45

# Tool Tips

## 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?

- Hover over each block – these only show up when in Adobe
- Aligns with AP Companion Manual
- For any prepopulated language, you can elaborate more, but the key points have been provided



# Congregate Nutrition



# Congregate Nutrition: page 70



VIRGINIA DEPARTMENT FOR AGING  
AND REHABILITATIVE SERVICES

## DIVISION FOR AGING SERVICES

- Unit Type: prefilled
- Direct Service: if “Yes”, complete the DS Waiver Form
- Proposed Expenditure Amount
- Name Service Provider
  - Locality or Localities they serve
  - Entity type
- Total CM Sites
- Emergency Meals
  - If yes, complete G&G page 74-75

Service: Congregate Nutrition						Direct Service Waiver	
Unit Type	Meals	Total Units		People Served		Yes	No
Proposed Expenditure Amount		Funding Source				Match Funding	
		Title III-C(1)					
		Title III-E					
		NSIP					
		General Funds- OAA General				X	
		General Funds- Supplemental Nutrition				X	
		Voluntary Contributions					
						X	
		\$0.00				Total Proposed Expenditures	
Locality Served		Service Provider				Entity Type	
						Select Option ▼	
						Select Option ▼	
						Select Option ▼	
						Select Option ▼	
						Select Option ▼	
Total Congregate Meal Sites:							
<b>Service Definition:</b> Congregate nutrition services provide nutritious meals to older adults at senior centers or other group settings, ensuring that meals meet the latest dietary guidelines. These meals are designed to support the health and well-being of older adults, with adjustments made for any special dietary needs. In addition to providing balanced nutrition, congregate nutrition sites offer opportunities for socialization and recreation, helping to reduce isolation and foster a sense of community.							
Does the AAA provide emergency meals, in the event of unexpected closure of a congregate site?							
Yes		No		If yes, ensure completion of the Grab and Go service pages.			

# CM continued: page 71

## 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:

## Nutrition Assessments, Referral and Screening Information:

- Meal Prep & Service
- Innovative/Modernized services
- Assessments, Referrals, Screenings

# CM continued: page 71

**Program Evaluation for Effectiveness:**

**Vendors or Subcontractor Monitoring Process and Frequency:**

Describe how you subcontractors and/or vendors are monitored and the frequency of that process.

**Service Description:**

- Program Evaluation
- Vendor/Subcontractor Monitoring
- Service Description

# Nutrition Site Info: page 72-73



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**DIVISION FOR AGING SERVICES**

## Nutrition Site Information:

	Site Name and Street Address	City or County of Site	Days and Hours of Operation	Food Provider
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

- Street (Physical) address
- City or County
- Days/Hours of Operation
- Food
  - Where is it coming from?
  - Who is the vendor?



# Grab & Go Nutrition: page 74



VIRGINIA DEPARTMENT FOR AGING  
AND REHABILITATIVE SERVICES

**DIVISION FOR AGING SERVICES**

## Service: Grab and Go Nutrition

### Title III Funding Source:

☐ Title III-C(1)

☐ Title III-C(2)

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

(A) During disaster or emergency situations affecting the provision of nutrition services and

(B) To older individuals who have an occasional need for such meal

For Grab and Go Nutrition funded with Title III-C(2) only, address Grab and Go in the Home Delivered Nutrition service page. **For Title III-C(1) funded Grab and Go Nutrition:**

**Address how Grab and Go will enhance and not diminish the congregate meals program. Describe how the agency will monitor the impact on Congregate Nutrition. Provide detailed evidence based on current participant data and program projections:**

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.

- Title III C-1 Funding Source –cap of 25%
  - A. During disaster or emergency situations affecting the provision of nutrition services
  - B. To older individuals who have an occasional need for such meal

# Grab & Go Nutrition, continued



VIRGINIA DEPARTMENT FOR AGING  
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For Grab and Go Nutrition funded with Title III-C(2) only, address Grab and Go in the Home Delivered Nutrition service page. **For Title III-C(1) funded Grab and Go Nutrition:**

**Address how Grab and Go will enhance and not diminish the congregate meals program. Describe how the agency will monitor the impact on Congregate Nutrition. Provide detailed evidence based on current participant data and program projections:**

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.

- Scope
- Volume
- Confirm the 25% Cap
- Methods to monitor this

# Grab & Go Nutrition: page 74-75



VIRGINIA DEPARTMENT FOR AGING  
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- Title III C-1 Funding Source –cap of 25%
  - A. During disaster or emergency situations affecting the provision of nutrition services
  - B. To older individuals who have an occasional need for such meal

## **Target Populations:**

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

## **Eligibility Criteria:**

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.

## **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:**

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 [INSERT DATE] and through the 30-day public comment period held on [INSERT DATE]. 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.].

# Grab & Go Nutrition: page 74-75



VIRGINIA DEPARTMENT FOR AGING  
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**DIVISION FOR AGING SERVICES**

## **Service Implementation:**

In this section, AAAs should describe their general plans for implementing Grab & Go using C1 funding. AAAs should speak to the provision of Grab & 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 include: 1) Does your agency provide emergency meals, in the event of unexpected closure of a congregate site? What type of Grab & Go meals frequency of the meal will the AAA provide (e.g., shelf-stable, takeout)? 2) How will the AAA coordinate the provision of Grab & Go meals with the AAA's nutrition services provider(s), if one? 3) How will C1 participants access Grab & Go meals? 4) Does the AAA provide a box of shelf-stable meals to C1 participants on a standing basis (e.g., twice per year) for emergencies or occasional need?

- Address G&G for disasters/emergencies
- Occasional need



# Grab & Go Examples: A & B



## A: Disasters or Emergencies

- Examples include inclement weather, power outages, water issues, congregate site is closed unexpectedly due to staff illness
- Includes the distribution of boxes of shelf-stable meals to III C-1 participants twice per year in anticipation for potential emergencies

## B. Occasional Needs

- Examples include temporary or time-limited medical or disability reasons, caring for a sick grandchild, family visiting from out of town, or scheduling conflicts for other personal appointments
- Includes distribution of meals in advance or Grab & Go if the individual cannot stay to eat it on-site

Grab & Go Meals may be provided to existing or active Congregate Meal Site Participants

# Area Plan Requirement



If the AAA wants to use III C-1 funds for Grab & Go meals, the AAA must include the following in the AAA's Area Plan:

1. **Evidence**, using participation projections based on existing data, that provision of such meals will **enhance** and not diminish the congregate meals program, and a commitment to monitor impact on congregate meals program participation;
2. Description of how provision of such meals will be targeted to reach those populations identified as in **greatest economic need and greatest social need**;
3. Description of the **eligibility criteria** for service provision;
4. **Evidence of consultation** with nutrition and other direct services providers, other interested parties, and the general public regarding the need for and provision of such meals; and
5. Description of how provision of such **meals will be coordinated** with nutrition and other direct services providers and other interested parties.





# Home Delivered Meals



# Home Delivered Meals: pg 76



VIRGINIA DEPARTMENT FOR AGING  
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## DIVISION FOR AGING SERVICES

- Unit Type: prefilled
- Direct Service: if “Yes”, complete the DS Waiver Form
- Proposed Expenditure Amount
- Name Service Provider
  - Locality or Localities they serve
  - Entity type
- Target population
- Types of Meals Served

Service: Home Delivered Nutrition				Direct Service Waiver	
Unit Type	Meals	Total Units	People Served	Yes	No
Proposed Expenditure Amount		Funding Source		Match Funding	
		Title III-C(2)			
		Title III-E			
		NSIP			
		General Funds- OAA General		X	
		General Funds- Home Delivered Meals		X	
		General Funds- Supplemental Nutrition		X	
		Voluntary Contributions			
		\$0.00		Total Proposed Expenditures	
Locality Served		Service Provider		Entity Type	
				Select Option ▼	
				Select Option ▼	
				Select Option ▼	
				Select Option ▼	
				Select Option ▼	
				Select Option ▼	
				Select Option ▼	
<b>Service Definition:</b> Home Delivered Meals provide eligible clients with nutritious, balanced meals delivered directly to their homes. Meals comply with the latest dietary guidelines. The service accommodates special dietary needs and ensures food safety in handling, preparation, and delivery. This service is intended for homebound individuals who are unable to leave home and attend social activities and does not have access to proper nutrition and transportation.					
<b>Target Populations:</b>					
<b>Types of Home Delivered Meals Served (check all that apply):</b>					
Frozen		Chilled		Shelf Stable	
Hot		Other:			



# HDM continued: page 77

## 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? Are volunteers utilized for this service?

## Emergency Meal Provision- Type and Frequency:

## Nutrition Assessments, Referral and Screening Information:

- Meal Prep & Service
- Emergency Meal Provision
- Assessments, Referrals, Screenings

# HDM continued: page 77

## Program Evaluation of Effectiveness:

## 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:

- Program Evaluation
- Vendor/Subcontractor Monitoring
- Service Description

# State Funded HDM

## PART 5: STATE GENERAL FUND SERVICES

Service: State Funded Home Delivered Nutrition			
Unit Type	Meals	Total Units	People Served
<b>Proposed Expenditure Amount</b>		<b>Funding Source</b>	
		General Funds- Home Delivered Meals	
		General Funds- Supplemental Nutrition	
		Fees	
\$0.00		<b>Total Proposed Expenditures</b>	
<b>Locality Served</b>		<b>Service Provider</b>	<b>Entity Type</b>
			Select Option ▼
			Select Option ▼
			Select Option ▼
			Select Option ▼
<b>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.</b>			
<b>Service Definition:</b> Home Delivered Meals provide eligible clients with nutritious, balanced meals delivered directly to their homes. Meals comply with the latest dietary guidelines. The service accommodates special dietary needs and ensures food safety in handling, preparation, and delivery. This service is intended for homebound individuals who are unable to leave home and attend social activities and does not have access to proper nutrition and transportation.			
<b>Target Populations:</b>			

- Types of Meals
- Target Populations
- Service Description
  - How it differs from HDM
  - How the AAA handles uncollected fees

# Consumable Supplies: page 52

Service: Consumable Supplies				Direct Service Waiver	
Unit Type	Payments	Total Units		People Served	
				Yes	No
<b>Proposed Expenditure Amount</b>		<b>Funding Source</b>		<b>Match Funding</b>	
		Title III-B			
		Title III-E			
		General Funds- OAA General		X	
		Voluntary Contributions			
		Fees			
\$0.00		<b>Total Proposed Expenditures</b>			
<b>Locality Served</b>		<b>Service Provider</b>		<b>Entity Type</b>	
				Select Option ▼	
				Select Option ▼	
				Select Option ▼	
				Select Option ▼	
				Select Option ▼	

**Service Definition:** Consumable Supplies refers to the provision of essential, disposable items necessary for the health and well-being of older adults. These supplies may include items such as incontinence products, wound care materials, nutritional supplements, and other short-term use products required for daily care and health management. The service ensures that older adults have access to necessary supplies to maintain their independence, comfort, and overall health.

- Unit Type: prefilled
- Direct Service: if “Yes”, complete the DS Waiver Form
- Oral Nutrition Supplements (ONS) cannot be counted as a meal in HDMs
  - Must be counted in Consumable Supplies (CS)
  - Indicate in CS Service Narrative
    - NSI and part A (4-pages) of the UAI are required
    - Supplements tracked as “Payments”





# Home Delivered Meals - Infrequent Delivery Waiver

# HDM Regs – In Summary



Ideally - HDM client receives 1 meal delivered each day, on 5 or more days per week

DARS flexibility - defines compliance with OAA as at least 5 meals delivered weekly

## **A. Examples:**

- 5 meals delivered once per day M-F

- 4 meals delivered once per day M-T with 1 add'l meal provided on Thursday for Friday consumption

- 3 meals delivered once per day (MWF), with 1 add'l meal provided on both M and W for T & Th consumption

- 1 meal delivered on M with 4 additional meals for T-F consumption

## **B. Infrequent Delivery Examples:** $\geq 25\%$ total HDM clients receive meals through this scenario:

- 5 meals delivered once per day M-F every other week, with 5 add'l meals provided F for the next week

- 10 meals delivered every other Monday

- 20 meals delivered on the first day of the month

HDM-ID: pg. 79



**VIRGINIA DEPARTMENT FOR AGING  
AND REHABILITATIVE SERVICES**

## DIVISION FOR AGING SERVICES

## HOME DELIVERED MEALS INFREQUENT DELIVERY (HDM-ID) WAIVER FORM

**The Area Agency on Aging (AAA) requests a HDM-ID Waiver due to the feasibility of providing at least 1 home delivered meal per day on 5 or more days per week in a rural area:**

PSA #: [Click Here](#)

Select the PSA # from the drop down list then click the button to auto fill the localities within the PSA. Returning to -select- then clicking the button clears the fields.

Select the localities within the PSA where meals are delivered less than weekly and state the method and frequency of delivery for those localities:

[illegible]

**Total number of participants receiving HDMs in the PSA:**

**Total number of participants receiving less than weekly delivery:**

Percentage of HDM-ID participants:

What is the AAA's **specific criteria** for identifying HDM clients who are most vulnerable?

- Select PSA #; click box; localities appear
- Check which localities, method of delivery, frequency
- Total # HDM; Total # HDM-ID
- % HDM-ID calculated
- Specific criteria for ID

See Companion Manual pages 64-67

# HDM-ID, continued: pg. 80

Describe the AAA's plan for contact of socially isolated and vulnerable HDM-ID participants:

How will the AAA provide access to Nutrition Education and Nutrition Counseling for these participants?

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.

- Socially isolated and vulnerable
- Nutrition Education & Nutrition Counseling
- Monitor & Evaluate

# Unwinding from HDM-ID



- [All HDM-ID documents](#) found on Providers Portal
  - HDM-ID Waiver
  - HDM-ID Plan
  - HDM-ID Transition Plan

## 6 Scenarios

- [See AAA Input Session on 3-26-25](#)





# Nutrition Counseling and Education



# RDN Information: page 81

Registered Dietitian Information			
Total Number of Hours Worked			Full-time Employee
	Hours per week or		Part-time Employee
	Hours per month		Contractor/Consultant

RDN required for:

- Menu analysis – all menus
- Nutrition Counseling – 1 to 1
- Nutrition Education – group or individual

# Nutrition Counseling: page 81

## Screening & Assessment:

## Program Evaluation:

The RDN evaluates the client's outcomes and maintains documentation in a secure location.

## Service Description:

- Staff Qualification
- Screening & Assessment
- Program Evaluation
- Service Description

# Nutrition Education: page 83

**Frequency of Service for both Congregate and Home Delivered Participants:**

**Annual Education Plan Accommodations for Older Adult Learners:**

**Program Evaluation:**

**Service Description:**

- Staff Qualification
- Frequency: Both CM & HDM
- Annual Education Plan
- Program Evaluation
- Service Description



# Group 6: Disease Prevention/Health Promotion

# Disease Prevention/Health Promotion: pg 85



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**DIVISION FOR AGING SERVICES**

<b>Program Staffing:</b>
<b>Service Locations:</b>
<b>Participation Tracking:</b>
<b>Screening:</b>
<b>Assessments:</b>
<b>Service Description:</b>

- List All EB Programs
- Staffing
- Locations
- Participant Tracking
- Screening
- Assessments
- Service Description



# Health Ed. & Screening: page 87



VIRGINIA DEPARTMENT FOR AGING  
AND REHABILITATIVE SERVICES

**DIVISION FOR AGING SERVICES**

<b>Service: Health Education and Screening</b>					<b>Direct Service Waiver</b>		
<b>Unit Type</b>	<b>Hours</b>	<b>Total Units</b>		<b>People Served</b>		<b>Yes</b>	<b>No</b>
<b>Proposed Expenditure Amount</b>		<b>Funding Source</b>			<b>Match Funding</b>		
		Title III-B					
		General Funds- OAA General			X		
		Voluntary Contributions					
		Fees					
\$ 0.00		<b>Total Proposed Expenditures</b>					
<b>Locality Served</b>		<b>Service Provider</b>			<b>Entity Type</b>		
					Select Option ▼		
					Select Option ▼		
					Select Option ▼		
					Select Option ▼		
					Select Option ▼		
<p><b>Service Definition:</b> Health Education and Screening services are designed to promote the well-being of older adults by providing essential information and assessments to support their health needs. Health education offers targeted information or materials on age-related diseases, chronic conditions, prevention, self-care, and independence, focusing on prevention, diagnosis, treatment, and rehabilitation. Health screening services include comprehensive assessments to determine an individual's current health status, aiming to detect or prevent common illnesses in older adults. These services may also include counseling, follow-up, and referrals to ensure optimal care and support for the individual's health and wellness.</p>							
<b>Target Populations:</b>							
<b>Service Description:</b>							

- Target Population
- Service Description
  - Staff Qualification
  - Frequency: Both CM & HDM
  - Annual Education Plan
  - Program Evaluation

# Office Hours: Groups 5 & 6



## Office Hours for Nutrition Services

- **Monday, May 12, 2025**
- **1PM-2:30PM**
- Drop-in style meeting,  
no registration is required.
- Link to join: <https://dsa-virginia.zoomgov.com/j/1608928679>





Q & A





# HDM-ID Reference Slides

6 Scenarios

# Area Plan – HDM-ID

## CURRENT PROCESS

- HDM-ID Waivers Are Not Part of the Area Plan
- HDM-ID Waivers Can Be Requested and Are Reviewed on a Rolling Basis
- HDM-ID Plan Must Be Submitted with Relevant Documents upon Request to DARS for Review and Approval



## NEW PROCESS

- Area Plan Includes HDM-ID Waiver Request Form
- HDM-ID Waiver Requests Include a Synopsis of HDM-ID Intentions and Operations
  - HDM-ID Waiver Request is Subject to the Area Plan Public Input Process
- HDM-ID Implementation Plan Submitted with Relevant Documents to DARS for Review along with Area Plan Submission
  - These Materials Are Not Subject to the Area Plan Public Input Process, but Still Available for Public Inspection if Requested



# HDM-ID Documents

HDM-ID Waiver  
Request Form

- Used to request a new HDM-ID Waiver or to renew an existing HDM-ID Waiver

HDM-ID  
Implementation  
Plan

- Used to provide additional details to DARS about the AAA's implementation of HDM-ID

HDM-ID  
Transition Plan

- Used for AAAs that need to unwind an existing HDM-ID program by the next Area Plan Cycle

# HDM-ID Content

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## ■ HDM-ID Waiver Requests:

- Identify the localities, method of delivery, and frequency
- Include # of participants receiving HDMs and expected to receive HDM-ID (with an auto-calculation that would total more than 25%)
- Identify key activities related to vulnerable participants, social isolation, and interfaces with other Nutrition Services
- Describe the process to monitor and evaluate the of HDM-ID

## ■ Additional Documents Required:

- HDM-ID Plan
- AAA RDN's Nutrient Analysis/Meal Pattern
- Governing Board (GB) & Advisory Council (AC) Approved HDM-ID Policy or Minutes
- Current Food Vendor Contract/Agreement (for Waiver Renewals)
- Commercial Package Delivery Procedures (if applicable)

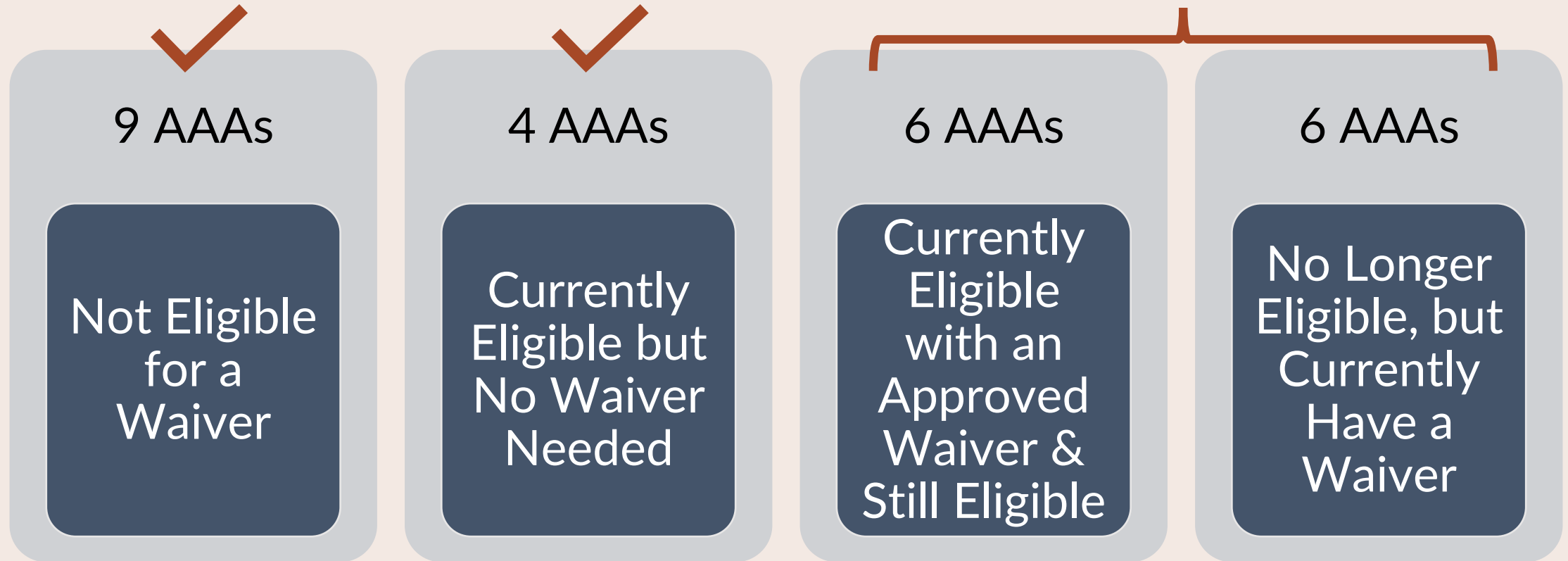
# Waiver Validity and Expiration



- DARS-Approved HDM-ID Waivers will be valid for the duration of the Area Plan Cycle:
  - Unless the AAA opts to return to standard HDM delivery OR unless DARS has concerns with the AAA's implementation of the HDM-ID Program AND
  - Regardless of the AAA's 50% rural designation status for duration of the Area Plan Cycle
    - However, if the AAA's rural locality designations fall below 50%, the AAA must submit an HDM-ID Transition Plan with their next annual Area Plan submission that outlines how the AAA will come into compliance with the HDM requirements by the next Area Plan Cycle

# Option 1: AAA Impacts

DARS is Going to Outline the Transition Process



# Scenario 1

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- This scenario would apply to the 9 AAAs that are not eligible for a waiver
- AAA1 should continue to provide HDMs under the regular HDM Service Standard.
- AAA1 will outline how they provide HDM in their Area Plan.
- AAA1 should not complete the HDM-ID Waiver Request form with their Area Plan.



# Scenario 2

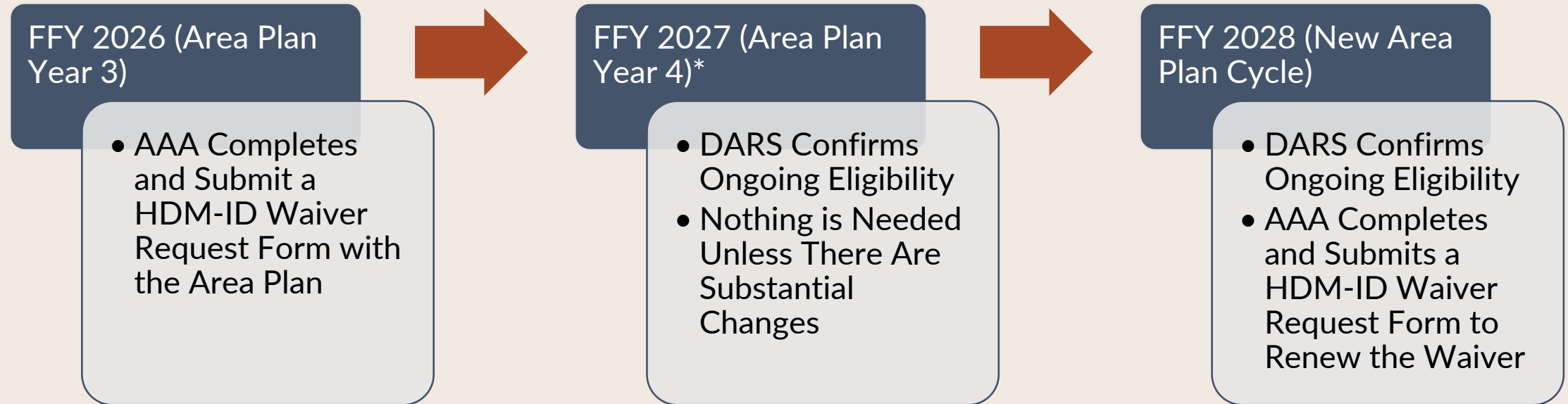


- This applies to the 6 AAAs that are Currently Eligible and have HDM-ID Waivers approved by DARS
- AAA2 has an existing approved HDM-ID Waiver from DARS and has maintained its rural locality designations above the 50% requirement going into the next Area Plan year.
  - For the current Area Plan Cycle, AAA2 must complete a new HDM-ID Waiver Request Form through the Area Plan
  - DARS expects to continue its approval for AAA2's HDM-ID program through the duration of the current Area Plan Cycle (FFY 2026 & FFY 2027)\*
  - In future Area Plan Cycles, AAA2 would submit an HDM-ID Waiver Request Form in Year 1 of the Area Plan Cycle only

\*unless there are extenuating circumstances or DARS has concerns about the service provision

# Scenario 3 Transition Illustrated

- This applies to the 6 AAAs that are Currently Eligible and have HDM-ID Waivers approved by DARS



# Scenario 3

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- This scenario would apply to the 4 AAAs that are eligible for the HDM-ID Waiver but do not need a HDM-ID Waiver
- If AAA3 wants to continue to provide HDMs under the regular HDM Service Standard, AAA3 should follow the same steps under Scenario 1 for AAA1 (i.e., Complete the HDM Service page in the Area Plan and do NOT complete the HDM-ID Waiver Request)
- If AAA3 decides it needs to request a HDM-ID Waiver to change how it provides HDMs, AAA3 should follow the steps outlined in the next scenario (Scenario 4 for AAA4)

# Scenario 4

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- Hypothetical scenario
- AAA4 decides to seek approval for a HDM-ID Waiver in the middle of an Area Plan Cycle (Years 2, 3, or 4)
  - AAA4 submits an HDM-ID Waiver Request Form to DARS with their next Area Plan submission
  - If approved, AAA4's HDM-ID Waiver would be valid the duration of the current Area Plan Cycle
  - AAA4 must submit a new HDM-ID Waiver Request Form for Year 1 of the next Area Plan Cycle

# Scenario 5



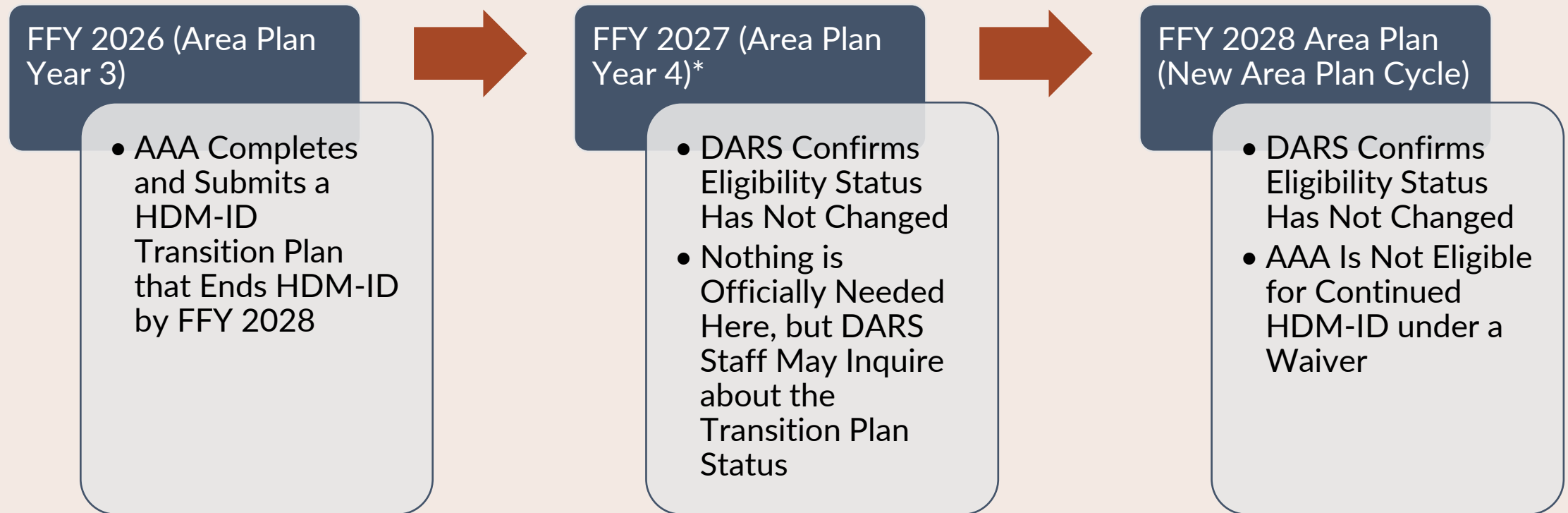
- This applies to the 6 AAAs that are no longer eligible for an HDM-ID Waiver
- AAA5 goes into a new Area Plan Cycle with at least 50% of its localities meeting the rural designation, at which time AAA5 sought and received DARS approval for a HDM-ID Waiver. In starting the process to plan for Year 3\* of the Area Plan, however, AAA5 falls below the 50% rural requirement.
  - DARS notifies AAA5 that it has fallen below the rural requirement
  - AAA5 submits an ID-HDM Transition Plan to DARS for the Year 3 Area Plan
  - If approved by DARS, AAA5 can continue to operate its ID-HDM program in Years 3-4
  - DARS and AAA5 continue to monitor rural locality designations on an annual basis for any changes
  - AAA5 must be in compliance with the HDM requirements by the next Area Plan Cycle; AAA5 is not eligible for an HDM-ID Waiver in the next Area Plan Cycle

\*This would also apply if the scenario indicated the AAA fell below the requirement in planning for Year 2 of the Area Plan.



# Scenario 5 Transition Illustrated

- For the 6 AAAs\* that are no longer eligible for an HDM-ID Waiver:

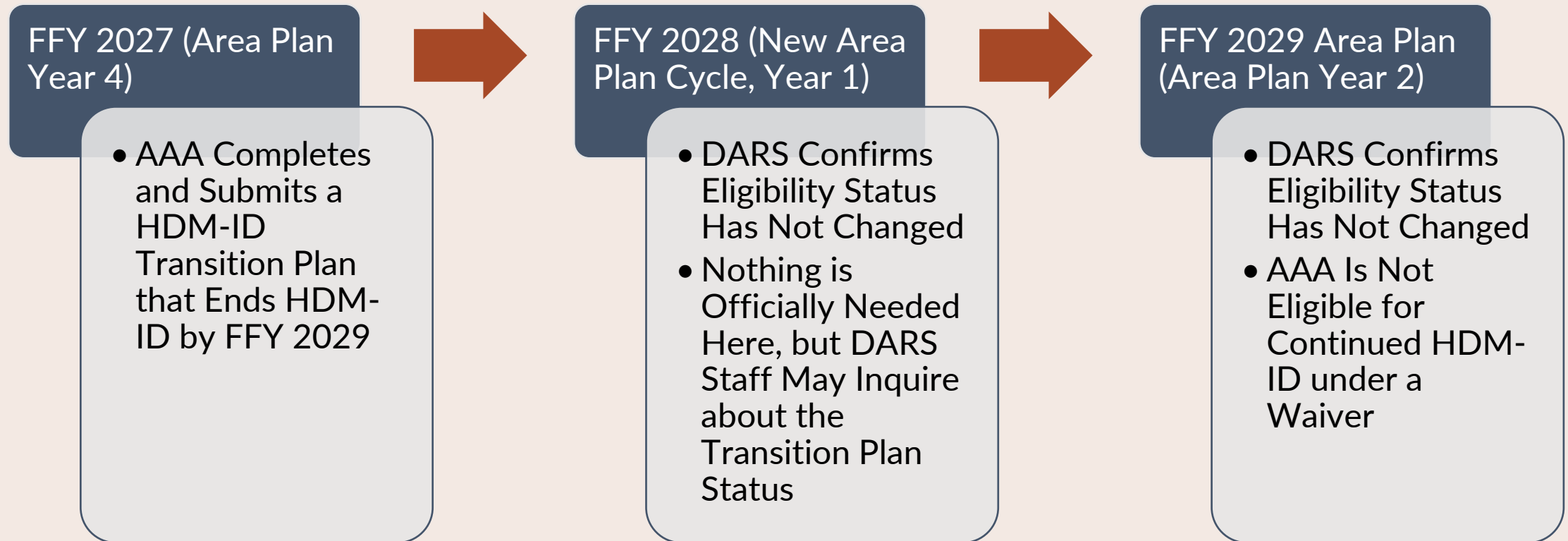


# Scenario 6

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- This is a hypothetical scenario that could occur in FFY 2027
- AAA6 has a DARS-approved HDM-ID Waiver for the current Area Plan Cycle. In starting the process to plan for Year 4 of the Area Plan, AAA6 falls below the 50% rural requirement.
  - DARS notifies AAA6 that it has fallen below the rural requirement
  - AAA6 submits an HDM-ID Transition Plan to DARS for the Year 4 Area Plan
  - AAA6 can continue to operate its HDM-ID program in Year 4 of the current Area Plan Cycle and in Year 1 of the next Area Plan Cycle
  - DARS and AAA6 continue to monitor rural locality designations on an annual basis
  - AAA6 must be in compliance with the HDM requirements by Year 2 of the next Area Plan Cycle; AAA6 is not eligible for an HDM-ID Waiver in Year 2

# Scenario 6 Transition Illustrated





**Wrap up**