

# Action Request Transmittal Aging and People with Disabilities



Jane-ellen Weidanz

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**Number: APD-AR-23-004**

**Issue date: 2/17/2023**

**Topic:** Long Term Care

**Due date:**

**Subject:** Adult Protective Services Information for Service Consumers

**Applies to (check all that apply):**

- |  |   |
|--|---|
| <input type="checkbox"/> All DHS employees                             | <input type="checkbox"/> County Mental Health Directors                       |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type B     | <input type="checkbox"/> Health Services                                      |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs                     | <input type="checkbox"/> ODDS Children's Intensive In Home Services           |
| <input type="checkbox"/> County DD program managers                    | <input type="checkbox"/> Stabilization and Crisis Unit (SACU)                 |
| <input type="checkbox"/> Support Service Brokerage Directors           | <input type="checkbox"/> Other ( <i>please specify</i> ):                     |
| <input type="checkbox"/> ODDS Children's Residential Services          |   |
| <input type="checkbox"/> Child Welfare Programs                        |   |

**Action required:**

Effective immediately, APD/AAA case managers no longer need to provide individuals receiving LTSS benefits the "Reporting Abuse of Older Adults and People with Physical Disabilities" (DHS 9373) brochure, unless requested. APD is preparing to send out information about adult abuse awareness as follows:

- For 2023, a one-time mailer to individuals currently receiving LTSS benefits
  - By 2024, information will be provided to individuals who receive the "Notice of Service Eligibility Review" (Buckley Bill, APD 0070B)
- Ongoing, a mailer each month to individuals new to receiving LTSS benefits

The communication will provide information about the different types of abuse and neglect and how to report suspected abuse or neglect. The mailer is written in large print and will be provided in English and the top 12 languages other than English based on assessment census data. The mailer will indicate it is from an individual's local office so each individual or Authorized Representative is more likely to read it and case managers can look into and act on any returned or undeliverable mail.

Alternate formats should be provided if requested. A copy of the mailer will be posted under CM Staff Tools, "Assessment, Service Planning and CA/PS" and the section

“Client Details, Treatment, Form and Misc LTC Info.” Local offices will receive a list of individuals who need an oral presentation.

The “APD Long Term Care Services Form Requirements” will be updated with this change.

As part of ensuring individuals and Authorized Representatives receive the adult abuse awareness communication and other communication, APD Central Office will reach out to local offices to follow up and request action on any individuals or Authorized Representatives without an address listed.

**Reason for action:** APD is committed to making individuals age 18 and older aware of Adult Protective Services for older adults and people with physical disabilities. The automatic mailing also meets compliance requirements with the Centers for Medicare and Medicaid Services (CMS) for assuring health and welfare.

**Field/stakeholder review:**  Yes  No

**If yes, reviewed by:** APD Policy & Ops

*If you have any questions about this action request, contact:*

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