



Commonwealth Council on Aging
2022 Annual Report
with
2023 Legislative Recommendations

Commonwealth of Virginia
Richmond
September 28, 2022



September 28, 2022

Dear Honorable Glenn Youngkin,
Members of the General Assembly, and
Members of the Public:

Pursuant to § 51.5-127 of the Code of Virginia, the Commonwealth Council on Aging (“Council”) is charged with promoting an efficient, coordinated approach by state government to meeting the needs of older Virginians.

There are approximately 1.9 million adults in Virginia who are over 60 years old. In service to the Commonwealth, the Council commends the Department for Aging and Rehabilitative Services (DARS), the 25 local Area Agencies on Aging, and the array of public and private service providers, all of which provide crucial support to older Virginians and their caregivers. They help ensure that older adults are safe, healthy, and engaged with their family and friends and in their communities. Looking ahead, the Council welcomes the opportunity to work with Governor Youngkin, Secretary of Health and Human Resources John Littel, and the General Assembly in striving to make Virginia a great place to grow old.

The Council was pleased to celebrate its 2022 Best Practices Awards winners. The Best Practices Awards honor model aging programs that improve the lives of older Virginians and support caregivers. With support from DARS and the Virginia Association of Area Agencies on Aging (V4A), the Council hosted a webinar to acknowledge these ever vital programs on July 26, 2022.

The Council has prepared its 2023 legislative recommendations, which include:

- Expand the Senior Farmers Market Nutrition Program and Enhance the Supplemental Nutrition Assistance Program;
- Strengthen Staffing and Licensure Requirements for Virginia Nursing Homes;
- Increase the Medicaid Home and Community-Based Services Waiver Personal Maintenance Allowance;
- Enhance Assisted Living Facility Affordability through Measures such as Increasing the Auxiliary Grant Rate and Using Medicaid Funding;
- Increase Funding and Opportunities for Home Modifications to Age in Place;
- Mandate Sick Leave and a Living Wage for Direct Care Workers in Nursing Homes, Assisted Living Facilities, and Home and Community-Based Care;
- Enact Reforms in Virginia’s Guardianship and Conservatorship System;
- Transition Virginia from a Medicaid 209(b) State to Simplify SSI Medicaid Applications;
- Strengthen the Legal Standards for Court Review of Administrative Appeals of Agency Public Benefit Decisions; and
- Establish a Prescription Drug Affordability Review Board.

The Council is grateful for the opportunity to submit this report to you for your consideration. The Council looks forward to partnering with policymakers in advocating for older Virginians.

Sincerely,

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Beverley A. Soble, Chair

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COMMONWEALTH COUNCIL ON AGING 2022 BEST PRACTICES AWARDS

Established in 2006, the Best Practices Awards recognize and encourage the replication of model programs, particularly those that foster aging in place, livable communities and home and community-based services. With financial support from Dominion Energy, the Council encourages the development of these innovative programs.

FIRST PLACE (\$5,000): NV Rides – NV Rides was founded in 2014 after data from Fairfax County revealed that seniors who wished to age in place were concerned about transportation when they may no longer be able to drive. NV Rides is a network of volunteer rides programs serving seniors and persons with disabilities in the Northern Virginia region. NV Rides operates in Arlington, Loudoun, Fairfax, and Prince William counties through a partnership of 15 organizations (e.g., community centers, Shepherd’s Centers, and faith-based organizations) that provide free rides to older adults via a network of volunteer drivers. Funded via a grant from the Washington Council of Governments with matching funding from Fairfax County, NV Rides supports volunteer transportation in the Northern Virginia region through coordination of rides, marketing, software, and volunteer recruitment and background checks provided to partner organizations. Since the COVID-19 pandemic, NV Rides also provides contactless deliveries from grocery stores, pharmacies, and food banks. In 2021, NV Rides partners served 926 seniors with a network of 506 drivers. Since inception, NV Rides has provided over 60,000 rides and visits, with over 20,377 rides, deliveries and visits in 2021. With its diverse coalition of organizations that serve seniors in the region and an emphasis on recruiting bilingual volunteers, NV Rides works to help seniors get where they need to go.

To contact NV Rides: Pozez JCC of Northern Virginia, 8900 Little River Turnpike, Fairfax, VA 22031, Phone: 703-537-3071, Email: info@nvrides.org, Website: www.nvrides.org

SECOND PLACE AWARD (\$3,000): Virginia Tech Center for Gerontology and the New River Valley Agency on Aging (NRVAOA) for COVID Companions - Launched in 2021, COVID Companions is a program to connect older adults and community members in the Blacksburg area and New River Valley. Older adults are provided with an optional tablet and a resource guide so that they can connect over video or the phone (or in some cases, socially distanced outdoors) with their assigned community member. Connections are made on a weekly basis. While the program began with volunteers, most of whom were Virginia Tech students, it has since expanded to include some faculty and community members from the surrounding area. The program is currently serving about 50 older adults, and includes the unique aspect of serving veterans through the engagement of Virginia Tech’s large Corp of Cadets. This program was created to curb older adults’ loneliness during a time of social isolation, but surveys indicate that the younger adults’ perceptions of older adults has improved due to their participation in the program as well. This program will continue post-pandemic as a way to connect community members and form intergenerational connections. The goal of the program is to create an intergenerational bridge to decrease negative stigmas and help older adults maintain or improve mental health.

To contact COVID Companions: Carlisle Shealy, Ph.D., MPH, Assistant Director, Center for Gerontology (0555), 230 Grove Lane, Virginia Tech, Blacksburg, VA 24061, Email: ecs@vt.edu, Website: <https://liberalarts.vt.edu/research-centers/center-for-gerontology.html>

COMMONWEALTH COUNCIL ON AGING 2022 BEST PRACTICES AWARDS

THIRD PLACE AWARD (\$2,000): Northern Virginia Resource Center (NVRC) for Deaf and Hard of Hearing Persons for Deaf Seniors Stay Connected - “NVRC Deaf Seniors Stay Connected” is a free, hosted, weekly online Zoom chat for Deaf seniors and American Sign Language (ASL) students that provides meaningful interaction for all participants. This free online chat program connects Deaf seniors and ASL college students/interpreters from several Mid-Atlantic states to converse virtually using ASL in an informal, but structured atmosphere. Each week, a Deaf facilitator introduces a new topic for discussion among the average 12-15 attendees. While initially just for seniors using ASL, the program has now welcomed hard of hearing older adults who do not sign. The goal of the program is to ensure that Deaf and hard of hearing seniors feel less isolated and more connected, especially those who are homebound and unable to access or participate in many community activities. The benefit of the virtual format has even allowed one member who moved to a different area to stay in touch with friends who sign, keeping those friendships from fading. NVRC believes this program reduces feelings of isolation, connects Deaf seniors with their peers, and provides meaningful language practice for ASL students.

To contact NVRC: Eileen McCartin, Ph.D., Executive Director, 3951 Pender Drive, Suite 130, Fairfax, VA 22030, Phone: 703-352-9055, Video Phone 571-207-7758, TTY: 703-352-9056, Email: info@nvrc.org, Website: www.nvrc.org

The Council gave **Honorable Mentions** to the following organizations:

- **Arlington Agency on Aging** for Pop-Up Farmer’s Markets at long-term care and senior facilities
- **Insight Memory Care Center** for Caregiving at a Glance Workshop and Caregiver Cohort
- **Mountain Empire Older Citizens, Inc.** for Leveraging Technology to Combat Isolation during a Pandemic and Beyond
- **Rappahannock-Rapidan Regional Commission** in Partnership with **Ageing Together** for the Regional Transportation Collaborative
- **Senior Services of Alexandria** for Senior Ambassadors
- **Southwest Virginia Legal Aid** and **Southwest Virginia Elder Justice Taskforce** for “SILENCE ISN’T GOLDEN”, a Public Education and Awareness Campaign about Elder Abuse
- **The Longevity Project for a greater Richmond** with The Thelma Bland Watson Person-Centered Personal Care Aide School

Webinar: 2022 Best Practices Awards: Advancing Innovation in Aging Programs

The Council, DARS, the Virginia Association of Area Agencies on Aging (V4A), and Dominion Energy joined together to celebrate the Council’s 2022 Best Practices Award Winners. Held on July 26, 2022 from 1:00 pm to 2:00 pm, the webinar highlighted this year’s amazing winners. Webinar attendees learned more about these award winning programs, how the programs can be replicated, and how programs can be nominated for the Council’s 2023 Best Practices Awards.

Real-time captioning and ASL interpretation was provided.

To View the Recorded Webinar, please visit: <https://www.youtube.com/watch?v=cstm4d5fcMM>.

For More Information on the Council, the 2022 Best Practices Award Winning Programs, and the 2022 Honorable Mention Programs, please visit: <https://vda.virginia.gov/boardsandcouncils.htm>.

COMMONWEALTH COUNCIL ON AGING 2023 LEGISLATIVE RECOMMENDATIONS

Expand the Senior Farmers Market Nutrition Program and Enhance the Supplemental Nutrition Assistance Program

1. Senior Farmers Market Nutrition Program (SFMNP). Through federal funding from the U.S. Department of Agriculture (USDA) and in partnership with the Virginia Department of Agriculture and Consumer Services, the Virginia Department for Aging and Rehabilitative Services operates the SFMNP. Each spring and summer, SFMNP provides low-income older adults with vouchers for eligible foods at farmers' markets and roadside stands. The Program aims to: (1) provide older Virginians with fresh, nutritious, unprepared, locally grown fruits, vegetables, and herbs; and (2) increase the consumption of agricultural commodities by helping to develop and expand farmers' markets and roadside stands.

With federal funding, 11 of the 25 Virginia Area Agencies on Aging (AAAs) and one city participate in SFMNP. In 2021, SFMNP served 10,254 older adults. In 2022, the General Assembly provided a new investment of \$125,000 for SFMNP expansion, allowing the SFMNP to add up to three new regions for the 2023 season. Increasing the number of participating AAAs statewide would require additional General Assembly funding, estimated at about \$625,000, for additional vouchers and staff support to serve the remaining geographic areas.

This is a budget request.

2. Supplemental Nutrition Assistance Program (SNAP). SNAP is a federal program that provides nutrition benefits to low-income individuals and families to purchase groceries. Federally, the program is administered by the USDA Food and Nutrition Service, and in Virginia, through the Department of Social Services. In Virginia, more than 35% of SNAP participants are in families with members who are older or have a disability.¹

In 2021, the General Assembly passed legislation estimated to open the SNAP program to about 25,000 additional families by increasing the income threshold and eliminating a cap on assets for individuals below 200% of the federal poverty level – but more outreach, especially among older Virginians, is required to encourage enrollment.

In addition to outreach, the SNAP benefits need to be increased. Currently, during the federal health emergency older adults and individuals with disabilities are getting the maximum benefit amount of \$250 for a single individual. However, once the emergency ends, many will see a dramatic decrease in their benefit, and some may have their benefits reduced to \$20 per month. A state supplement – for older Virginians, those with a disability, and those who are homeless – to bring up the minimum benefit would help to address hunger for these needy populations.

This is a budget request. This is also a 2023 legislative priority for the Virginia Poverty Law Center.

¹ Center on Budget and Policy Priorities, SNAP State by State Fact Sheet, 2022, https://www.cbpp.org/sites/default/files/atoms/files/snap_factsheet_virginia.pdf

COMMONWEALTH COUNCIL ON AGING
2023 LEGISLATIVE RECOMMENDATIONS (continued)

Strengthen Staffing and Licensure Requirements for Virginia Nursing Homes

1. Minimum Nursing Home Staffing Levels. For two decades the Virginia General Assembly has been asked to establish minimum staffing standards in Virginia nursing homes, yet no action has been taken. The pandemic only exacerbated long-standing issues related to a lack of staffing. National research consistently has found a strong correlation between facility staffing and quality of care. Virginia is one of only 16 states with no established staffing minimums.

In 2021, the Joint Commission on Health Care completed a study on Workforce Challenges in Virginia's Nursing Homes.² The study found that one-fifth of Virginia's nursing homes are not meeting federal Centers for Medicare and Medicaid Services (CMS) expectations for total direct care hours per resident. It stated that: (1) Virginia has more facilities with low staffing ratings than other states (with 43% of certified facilities receiving only a one or two star CMS staffing rating); (2) low staffing increases the risk of low-quality care; and (3) facilities with the fewest staff per resident are more likely to have lower health inspection ratings. The study highlighted that staffing shortages disproportionately impact facilities with low-income and Black residents; and that facilities with a high percentage of Medicaid beds tend to have fewer direct care staff.

In 2022, bills were introduced in both the Senate and the House to require nursing homes to meet a baseline staffing level; however these bills did not pass.³

This is a legislative and budget request. This is also a 2023 legislative priority for AARP Virginia, and Northern Virginia Aging Network, the State Long-Term Care Ombudsman, and Virginia Poverty Law Center.

2. Dedicated Infection Preventionist. Infection control was a persistent problem in nursing homes prior to COVID-19. In Virginia from 2013 through 2017, of 298 nursing homes, 114 had infection control deficiencies in multiple consecutive years.⁴

Federal regulations require nursing homes to establish "an infection prevention and control program" and designate an infection preventionist who must work at the facility but may have other assigned duties, such as director of nursing (42 CFR § 483.80). VDH regulations require a nursing home infection control program, but not designation of dedicated staff for implementation (12VAC5-371-180). To promote effective infection control, each nursing home should be required to employ a full-time trained professional, with continuing education.

This is a legislative request that may have budget implications.

²JCHC Report: <http://jchc.virginia.gov/Workforce%20Challenges%20in%20Virginia's%20Nursing%20Homes%20Final%20Report%20-%20Updated%20with%20technical%20changes%20Nov%2009.pdf>

³ [HB330](#), [HB646](#), and [SB406](#)

⁴ U.S. Government Accountability Office, *Infection Control Deficiencies Were Widespread and Persistent in Nursing Homes Prior to COVID-19 Pandemic* (May 20, 2020), <https://www.gao.gov/assets/gao-20-576r.pdf>

COMMONWEALTH COUNCIL ON AGING
2023 LEGISLATIVE RECOMMENDATIONS (continued)

Strengthen Staffing and Licensure Requirements for Virginia Nursing Homes (continued)

3. LGBT Cultural Competency Long-Term Care Staff Training. Research shows that some lesbian, gay, bisexual and transgender (LGBT) older adults encounter violations of their rights when seeking long-term care; and that many are uneasy about acceptance, concerned about how they might be treated, or fear neglect, abuse, or verbal or physical harassment.⁵

Federal regulations require nursing homes to promote resident rights (42 CFR § 483.10). State law sets out residents' rights, and staff training requirements concerning these rights (§ 32.1-138). State regulations further specify staff training (12VAC5-371-260). Additionally, state law sets out assisted living residents' rights (§ 63.2-1808), and regulations address staff training (22VAC40-73-120).

The 2020 General Assembly prohibited discrimination on the basis of sexual orientation and gender identity in a range of settings.⁶ A requirement for LGBT cultural competency training in long-term care would align with these new protections. There are models of long-term care staff training on LGBT cultural competency.⁷

This is a legislative request that may have budget implications.

Increase the Medicaid Home and Community-Based Services Waiver Personal Maintenance Allowance

Medicaid home and community-based services (HCBS) waivers are designed to allow individuals who would otherwise qualify for nursing home or other institutional placement to remain in the community. The personal maintenance allowance is the amount the HCBS waiver recipient is allowed to deduct from income to cover the basic expenses of community living – including housing and other costs such as utilities, home maintenance, food, clothing, drugs, technology, transportation, medical services not covered by Medicaid, and personal items.⁸

In 2022, the Virginia Medicaid HCBS personal maintenance allowance monthly amount is \$2,288.75. This amount may limit access to the program. Many older people with disabilities are not able to cover their housing and other living expenses with that amount, and thus could not use the waiver. A 2022 budget amendment would have raised the amount from 165% of SSI to 200% of SSI.⁹

This is a budget item. This is also a 2023 legislative priority for the Virginia Poverty Law Center.

⁵ MetLife Mature Market Institute, Lesbian and Gay Aging Issues Network (ASA), & Zogby International, *Out and Aging: The MetLife Study of Lesbian and Gay Baby Boomers* (2006), National Resource Center on LGBT Aging, <https://www.lgbtagingcenter.org/resources/resource.cfm?r=31>

⁶ See Virginia Human Rights Act, *Virginia Code* § 2.2-3900 et seq.

⁷ For example, the U.S. Administration on Community Living and the HHS Office of the Assistant Secretary for Public Affairs have collaborated to develop an online training tool for staff of long-term care facilities. See "Building Respect and Dignity for LGBT Older Americans in LTC," <http://www.advancingstates.org/sites/nasuad/files/ACL%20-%20Building%20Respect%20and%20Dignity%20for%20LGBT%20Older%20Americans%20in%20Long%20Term%20Care.pdf>. Also see National Resource Center on LGBT Aging, "LGBT Aging Cultural Competency Trainings," <https://www.lgbtagingcenter.org/training/index.cfm>

⁸ Department of Medical Assistance Services, www.dmas.virginia.gov.

⁹ <https://budget.lis.virginia.gov/amendment/2022/1/SB30/Introduced/MR/304/54s/>

COMMONWEALTH COUNCIL ON AGING
2023 LEGISLATIVE RECOMMENDATIONS (continued)

Enhance Assisted Living Facility Affordability through Measures such as Increasing the Auxiliary Grant Rate and Using Medicaid Funding

An Auxiliary Grant is a supplement to income, available from local departments of social services, for recipients of Supplemental Security Income (SSI) and certain other aged, blind or disabled individuals in assisted living, adult foster care or other certified supportive housing.¹⁰

Funding for Auxiliary Grants is limited, especially compared to the growing need for affordable assisted living care.¹¹ The Auxiliary Grant rate in 2022 is \$1609 per month,¹² which is far too low to cover the cost of the services provided (a home, meals, medication management, and assistance with homemaking and personal care). The number of individuals receiving Auxiliary Grants has declined over the years because the number of participating providers has decreased due to the low rate.

The Joint Commission on Health Care is engaged in a study of “Affordability of Assisted Living Facilities.” The study will examine challenges in the Auxiliary Grant Program, and other avenues for funding affordable assisted living, including Medicaid, as occurs in a number of other states. Urgent action is needed to promote realistic options for Virginians who need assisted living care.

This is a legislative and budget item. This is also a 2023 legislative priority for the Alzheimer’s Disease and Related Disorders Commission, Northern Virginia Aging Network and the Virginia Poverty Law Center.

Enact Reforms in Virginia’s Guardianship and Conservatorship System

Guardianship is a legal process in which a court-appointed individual or entity makes decisions and supervises the affairs of an adult whom the court has found to be incapacitated. In conservatorship, a court-appointed person or entity manages the financial affairs of an incapacitated adult.

In 2021, the Virginia Joint Legislative Audit and Review Commission (JLARC) completed a study of the state’s guardianship and conservatorship system.¹³ The JLARC report made 42 recommendations to strengthen oversight, restore rights when possible, and prevent and detect abuse and exploitation. Among the key legislative recommendations not yet acted upon were: (1) requiring periodic court hearings to review cases; and (2) requiring initial and ongoing training for guardians and conservators.

In 2022, legislation updated the role of the guardian ad litem, hearing notices, and the annual guardian report form. Yet further safeguards are needed to protect adults subject to guardianship and conservatorship and promote person-centered approaches.

This is a legislative request with budget implications. Training for guardians and conservators is a 2023 legislative priority for the Virginia Public Guardian and Conservator Advisory Board, the Northern Virginia Aging Network, and the Virginia Poverty Law Center.

¹⁰ <https://vadars.org/aps/AuxGrants.htm>

¹¹ Joint Commission on Health Care, *Study Resolution on Affordability of Assisted Living Facilities* (December 2021), <http://jchc.virginia.gov/Affordability%20of%20ALFs%20-%20Study%20Resolution-2.pdf>

¹² With a higher rate set for Northern Virginia localities.

¹³ <http://jlarc.virginia.gov/landing-2021-virginias-adult-guardian-and-conservator-system.asp>

COMMONWEALTH COUNCIL ON AGING
2023 LEGISLATIVE RECOMMENDATIONS (continued)

Increase Funding and Opportunities for Home Modifications to Age in Place

An estimated one in 10 Virginians have a disability. More than 25% of Virginians will be over the age of 60 by the year 2025. For these individuals, accessible housing is a high priority.

The Livable Home Tax Credit program, operated by the Virginia Department of Housing & Community Development, aims to improve accessibility and universal visitability in Virginia homes.¹⁴ It provides state tax credits for the purchase of new units or the modification of existing units. Tax credits are available for up to \$5,000 for purchase of a new accessible unit, and up to \$5,000 or 50% of the cost of modification of existing units. Raising the level above \$5,000 would provide a more effective incentive, as would making it a grant program for taxpayers whose income is too low to qualify for a tax credit.

Similarly, individuals enrolled in Medicaid's Commonwealth Coordinated Care (CCC) Plus Waiver Program may be eligible to receive environmental or home modifications covered at up to \$5,000 per person per year. However, advocates report that the current benefit cap does not always cover the full costs needed to make the modifications, thus limiting those individuals who are able to take advantage of the benefit. Increasing the cap would allow more individuals to make necessary modifications to their homes and to avoid unnecessary institutionalization.

Virginia Housing also operates two home modification programs. First, the Granting Freedom Program, in partnership with the Virginia Department of Veteran Services, makes funding available to assist with modifications to homes and rental units for Virginia service members and veterans who sustained a line-of-duty injury resulting in a service-connected disability.¹⁵ Second, the Rental Unit Accessibility Modification Grants program makes funding available to assist with modifications to rental units to make them accessible for a specific tenant.¹⁶

Enhancing home modification programs would encourage more accessibility in private homes and promote aging in place. In 2022, the General Assembly directed the Virginia Department for Aging and Rehabilitative Services to determine the potential cost of addressing unmet needs for in-home services and home modifications provided to older adults by Area Agencies on Aging and local departments of social services. A report is due to the Joint Commission on Health Care and the Chairs of the House Appropriations and Senate Finance and Appropriations Committees by December 1, 2022.¹⁷

This is a budget request.

¹⁴ <https://www.dhcd.virginia.gov/lhctc>.

¹⁵ <https://www.vhdagrants.com/insideLinkOpps.jsp?documentPk=1620073537299#:~:text=Virginia%20Housing's%20Granting%20Freedom%20Program,duty%20injury%20resulting%20in%20a>

¹⁶ <https://www.vhdagrants.com/insideLinkOpps.jsp?documentPk=1620073833127>

¹⁷ Item 331 L: <https://budget.lis.virginia.gov/item/2022/2/HB30/Chapter/1/331/>

COMMONWEALTH COUNCIL ON AGING
2023 LEGISLATIVE RECOMMENDATIONS (continued)

Mandate Sick Leave and a Living Wage for Direct Care Workers in Nursing Homes, Assisted Living Facilities, and Home and Community-Based Care

Direct care workers in nursing homes, assisted living, and home-based settings are essential to the welfare of older adults and people with disabilities. They provide personal care and help with activities of daily living. Ensuring paid sick leave for these workers is a major public health issue. They often go to work when they are sick to continue to earn their meager incomes to support themselves and their families, thus exposing those in their care and others to grave illness.¹⁸ Some must work more than one job due to the low wages, carrying infection directly from one setting to another. A growing number of states now protect at least some direct care workers through broader paid sick leave employment policies that vary in their requirements, but Virginia offers no such option.

Additionally, despite being one of the fastest-growing professions in the country, direct care workers often receive poverty-level wages, and some rely on public assistance.¹⁹ In Virginia, the average direct care worker salary was \$27,338 as of August 29, 2022.²⁰ Low wages, combined with a high rate of part-time work, result in a median annual income of just \$20,200.²¹ To address the workforce crisis and to recruit and retain the necessary number of providers, Virginia should increase Medicaid reimbursement rates to provide a living wage and other benefits.

This is a budget request. Paid sick leave is also a 2023 legislative priority for the Northern Virginia Aging Network.

Strengthen the Legal Standards for Court Review of Administrative Appeals of Agency Public Benefit Decisions

When an individual is denied public benefits by an administrative agency, they have the right to appeal to the court to review the decision and determine if the agency followed the law. In Virginia, this review is limited in a number of ways:

- Virginia Code §2.2-4025 lists only specific types of cases that can be reviewed by the court – temporary assistance for needy families, Medicaid, food stamps [SNAP], general relief, auxiliary grants, and state-local hospitalization.
- The review “shall be based solely upon the agency record, and the court shall be limited to ascertaining whether there was evidence in the agency record to support the case decision....” The section does not permit any intermediate relief, such as postponing the effective date of the decision.

This proposal seeks to expand the bases on which the court can overturn an administrative agency decision adverse to a beneficiary.

This is a legislative item. It is a 2023 legislative priority for the Virginia Poverty Law Center.

¹⁸ Eaton, J., AARP, “Nursing Home Workers Face Coronavirus with Low Pay, Inadequate Protection,” April 29, 2020, <https://www.aarp.org/caregiving/health/info-2020/nursing-home-workers-during-coronavirus.html>

¹⁹ Kinder, M., Brookings, “Essential but Undervalued: Millions of Health Care Workers Aren’t Getting the Pay or Respect They Deserve in the COVID-19 Pandemic,” May 28, 2020, <https://www.brookings.edu/research/essential-but-undervalued-millions-of-health-care-workers-arent-getting-the-pay-or-respect-they-deserve-in-the-covid-19-pandemic/>

²⁰ <https://www.salary.com/research/salary/posting/direct-care-worker-salary/va>

²¹ PHI, Direct Care Workers in the United States: Key Facts 2020, <https://www.phinational.org/resource/direct-care-workers-in-the-united-states-key-facts-2/>

COMMONWEALTH COUNCIL ON AGING
2023 LEGISLATIVE RECOMMENDATIONS (continued)

Transition Virginia from a Medicaid 209(b) State to Simplify SSI Medicaid Applications

Under federal regulations, states are not required to follow the Social Security Income (SSI) criteria to determine Medicaid eligibility. They may choose to use at least one criterion that is more restrictive than SSI. Virginia is currently one of nine “209(b)” states – meaning it makes its “own Medicaid eligibility determinations for SSI beneficiaries who apply for Medicaid and process[es] annual redeterminations for SSI beneficiaries who are approved for Medicaid coverage.”²² Virginia has set more restrictive real property resource eligibility requirements than those that apply for SSI.

As a 209(b) state, Virginia requires individuals approved for SSI to apply separately for Medicaid, and thus they are burdened with additional administrative steps. Moreover, some SSI recipients are not aware that they are eligible for Medicaid or that they must submit a separate application to enroll, and thus are left uninsured. A 2021 DMAS report found that “Rather than offering a cost efficiency, the more restrictive real property eligibility requirements result in additional labor and systems costs to the state for eligibility determinations . . . [which is] a burden to these individuals who often have gaps in coverage resulting from administrative complexities.”²³ The DMAS Report recommended that Virginia should transition from a 209(b) state to allow Virginia’s Medicaid policy to align with the SSI Program.²⁴

This is a legislative and budget item. This is also a 2023 legislative priority for the Virginia Poverty Law Center.

Establish a Prescription Drug Affordability Review Board

In 2017, 23% of Virginians stopped taking medications as prescribed due to cost. Between 2015 and 2019, the average increase in the annual cost of prescription drugs rose by 26.3%, while the average income in Virginia increased by only 16.7%.²⁵

This proposal would establish the Prescription Drug Affordability Review Board to protect Virginia residents, state and local governments, commercial health plans, health care providers, pharmacies licensed in the Commonwealth, and other stakeholders from the high costs of prescription drug products.²⁶ AARP Virginia aims to lower the price of prescription drugs through the creation of a Prescription Drug Affordability Board with the authority to set upper payment limits on certain high-cost prescription drugs.

This would align and build off the Inflation Reduction Act (IRA) of 2022, which was recently signed into law. The IRA will expand Medicare Part D “Extra Help” subsidy by raising the income limit, cap Medicare Part D Out-of-Pocket Costs and caps insulin at \$35 a month, expand no-cost vaccine coverage for people with Medicare, lower drug prices, and extend enhanced ACA tax credits for those not eligible for Medicare.

This is also a 2023 legislative priority for AARP Virginia.

²² DMAS, *Implications of Eliminating Restrictive Medicaid Eligibility Requirements through a 1634 Agreement with the Social Security Administration*, House Document No. 15 (2021), <https://rga.lis.virginia.gov/Published/2021/HD15>.

²³ DMAS, *Implications of Eliminating Restrictive Medicaid Eligibility Requirements*

²⁴ DMAS Report: <https://rga.lis.virginia.gov/Published/2021/HD15>

²⁵ <https://states.aarp.org/virginia/aarp-virginia-statement-on-senate-bill-376>

²⁶ [SB376, Petersen](#)

COMMONWEALTH COUNCIL ON AGING 2022 MEETINGS, PRESENTATIONS, AND ACTIVITIES

During this reporting period, the Commonwealth Council on Aging met on: January 26, April 27, July 27, and September 28, 2022. Council meetings featured educational presentations and discussions on:

Development of the
2023-2027 State Plan
for Aging Services

Nutrition Programs,
Initiatives and Policies

Virginia Center on
Aging's Annual
Legislative Breakfast

SHHR's Elevating
Aging Services
Workgroup Report

SHHR's Dementia
Services Workgroup
Report

Joint Commission on
Health Care's Aging in
Place Study

Joint Commission on
Health Care's Nursing
Facility Workforce
Study

Joint Legislative Audit
& Review
Commission's
Improving
Guardianship Study

The Council's Executive Committee and Best Practice Committee held electronic meetings on February 2 and March 14, 2022, respectively. Public access to those recorded meetings is provided through the DARS YouTube page (<https://www.youtube.com/vadrs/videos>).

On July 27, 2022, the Council approved an updated the Electronic Meeting Policy (effective September 1, 2022) to conform to changes to the Virginia Freedom of Information Act.

Also on July 27, 2022, the Council approved Chair Beverley Soble to represent the Council on the Secretary of Health and Human Resources (SHHR) Aging Services Workgroup, which was continued with further direction under Item 283 G of the 2022 Appropriation Act. The workgroup is directed to consider how to elevate aging services in the Commonwealth with a report due to the Governor, the Department of Planning and Budget, and the Chairs of House Appropriations and Senate Finance and Appropriations Committees by December 1, 2022.

On September 28, 2022, as permitted in § 51.5-128 of the Code of Virginia, the Council approved a grant proposal to be submitted to the Virginia Center on Aging Geriatric Training and Education (GTE) Initiative. The General Assembly appropriates funding to the GTE Initiative for the purpose of developing the skills and capacities of the gerontological and geriatric workforce. The Council's GTE grant proposal aims to:

1. Create five visually-engaging micro-learning training and education videos for the Virginia geriatric and gerontological workforce to increase awareness of malnutrition and food insecurity, and the key programs and resources available to older Virginians.
2. Partner with organizations to disseminate and promote the videos among the Virginia geriatric and gerontological workforce, and older adults and caregivers.

If funded, the project would be implemented and completed by June 30, 2023.

Looking ahead, the Commonwealth Council on Aging will meet on January 18, April 19, July 19, and September 20, 2023. During the upcoming year, the Council will be closely following and supporting efforts within the Virginia Department for Aging and Rehabilitative Services to update the Virginia State Plan for Aging Services (October 1, 2023-September 30, 2027).

**COMMONWEALTH COUNCIL ON AGING
MEMBERS**

The purpose of the Commonwealth Council on Aging shall be to promote an efficient, coordinated approach by state government to meeting the needs of older Virginians. (Code of Virginia § 51.5-127)

Council Members	
Beverly A. Soble, Chair, of Richmond Term ends 6/30/24	
John “Jay” White, EdD, MSG, Vice-Chair, 5 th District Term ends 6/30/25	
Harvey E. Chambers, CSA, Secretary, of Glen Allen Term ends 6/30/24	
David Broder, of Vienna Term ends 6/30/24	Diana Paguaga, 11 th District Term ends 6/30/24
Jo-Ann Chase, 10 th District Term ends 6/30/26	Debbie Preston, MS, of Hanover Term ends 6/30/24
Deborah Davidson, RN, 7 th District Term ends 6/30/22	J. Tina Savla, PhD, of Blacksburg Term ends 6/30/24
Amy Duncan, 9 th District Term ends 6/30/25	Michael Wampler, of Big Stone Gap Term ends 6/30/24
Carla Hesseltine, 2 nd District Term ends 6/30/26	Paige H. Wilson, 4 th District Term ends 6/30/26
Tresserlyn L. Kelly, 3 rd District Term ends 6/30/25	Roland Winston, of Henrico Term ends 6/30/24
Joshua L. Myers, of Moseley Term ends 6/30/2026	Erica Wood, Esq., 8 th District Term ends 6/30/24
Ellen M. Nau, 1 st District Term ends 6/30/26	VACANT, 6 th District Term ends 6/30/25

Ex Officio Members
The Honorable John Littel Secretary of Health and Human Resources
Kathryn Hayfield, Commissioner Virginia Department for Aging and Rehabilitative Services
Tara Davis-Ragland Virginia Department of Social Services
Ron D. Boyd Representative, Virginia Association of Area Agencies on Aging
Terry A. Smith Department of Medical Assistance Services

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