Upcoming Events

- Case Management Orientation Training:
  - Aug. 4-8, 2014
  - Sept. 8-12, 2014
  - Oct. 6-10, 2014
  - Nov. 3-7, 2014
  - Dec. 1-5, 2014
  To register, contact aauproviderquestion@aau.okdhs.org

- Regional Provider Trainings:
  - Region 1 at Enid – TBD
  - Region 5 at Tulsa – Sept. 9
  - Region 5 at McAlester – Sept. 23
  - Region 3 at Norman – Oct. 7
  - Region 2 at Lawton – Oct. 8
  To register, visit events.oucpm.org/advantage when that registration page has opened.

- OUHSC/OKGEC Summer Geriatric Institute, “Celebrating 25 Years of Geriatric Care!”
  - July 24 – 25, 2014
  For more information visit ouhsc.edu/okgec

The Citizen Potawatomi Nation Veterans’ Color Guard presents the colors at Senior Day at the Capitol.

Senior Day at the Capitol

The 2014 Senior Day at the Capitol was a success as more than 450 Oklahomans visited the state capitol on Monday, Feb. 24. The annual event gives Oklahoma’s seniors and their advocates an opportunity to discuss the needs of the more than 711,000 Oklahomans age 60 and older.

Speakers included Sen. Frank Simpson, Rep. David Dank, Sen. Jim Halligan, DHS Director of Community Living and Support Services Mark L. Jones and DHS Aging Services Director Lance Robertson. Shirley Cox, DHS Legal Services developer; Esther Houser, State Long-Term Care Ombudsman; and Dusty Darr, AARP Oklahoma, gave an update on legislation. The Citizen Potawatomi Nation Veterans’ Color Guard presented the colors.

A Senior Day attendee takes part in the day’s activities.

(Continued on page 2)
Upcoming Events
Continued from page 1

- Assisted Living Case Manager Training

Tulsa – Aug. 27, 2014

To register, visit events.oucpm.org/advantage when that registration page has opened.

Senior Day at the Capitol volunteers gather for a photo with Lance Robertson, DHS Aging Services director (top right).

Senior Day
Continued from page 1

Before and after the program, attendees had the opportunity to visit with lawmakers to voice their concerns, ideas and needs. Students from the University of Central Oklahoma gave seniors a tour of the capitol and helped them find their representatives’ offices. Approximately 30 nonprofit and government agencies distributed information about their services to attendees.

The Aging Services booth provides information to seniors at the State Capitol.

Senior Day at the Capitol participants gather in the House of Representatives Chamber.
Senior Day at the Capitol in pictures....

Left, DHS Aging Services Director Lance Robertson greets Senior Day attendees. Right, booths offer seniors a wide range of information.

Left, the Alzheimer’s Association booth provides information. Right, seniors fill the House of Representatives Chamber at the State Capitol.

Left, seniors listen from the balcony in the House of Representatives Chamber. Right, seniors read informational materials.
Nearly 2,000 Oklahomans gathered at the 39th Annual Oklahoma Conference on Aging May 20-22 at the Embassy Suites Norman Hotel & Conference Center. The large attendance, engaging presentations, special events, and more than 60 exhibitors made the conference a huge success. More than 1,000 seniors registered for Senior Day and a total of 1,771 people registered for all three days.

R. Murali Krishna, M.D., DLFAPA, was the keynote speaker May 20 and 22. Dr. Krishna is president and chief operating officer of INTEGRIS Mental Health, and co-founder and president of the James L. Hall, Jr. Center for Mind, Body and Spirit, an educational organization devoted to improving health through raising awareness of the healing power of the connection between mind, body, and spirit. He is also the author of “VIBRANT: To Heal and Be Whole — From India to Oklahoma City” and serves as president of the Oklahoma State Board of Health.

Dr. Krishna presented research showing the connection between the mind and physical wellness, which shows that with a healthy attitude, connectivity and coping skills, one can develop an inspired, fully resilient and vibrant life. For more information about Dr. Krishna and his book, visit www.drkrishna.com.

Clinical psychologist Julie Nelson, Ph.D., served as keynote presenter May 21. She presented information about the psychology of aging and therapeutic groups. An avid quilter, Nelson discussed the history of quilting groups and her research on how

(Continued on page 5)
Conference

Continued from page 4

quilting groups meet the criteria of a therapeutic community group. Her colorful presentation included examples of quilts and highlighted the Quilts of Valor project, which supports veterans in hospice care. Nelson encouraged professionals to connect seniors with similar community groups which have therapeutic value.

More than 60 breakout sessions covered a wide variety of topics including the ADvantage program. Other conference highlights included the Exhibit Hall, a Wellness Expo, Statewide Senior Spelling Bee finals, Mich Magness Film Festival and walking events.

Aging Services’ prestigious 2014 Achievement in Aging awards were presented to individuals and organizations who have made significant contributions to improving the lives of seniors in Oklahoma. The following awards were presented:

- Aging Network Partner of the Year – Oklahoma Healthy Aging Initiative
- Advocate of the Year – Esther Houser, MSSW, Oklahoma City
- Media Partner of the Year – Vintage Newsmagazine, Tulsa
- Professional of the Year – Anita Martinez, Blair
- Program of the Year – Golden Opportunities, Bartlesville
- Volunteer of the Year – Darlene Hundon, Oklahoma City
- Volunteers of the Year – ConocoPhillips Retiree Association, Ponca City
- Lifetime Achievement – Dorothy Cassel, El Reno, and Mich Magness

(Continued on page 6)
In addition to DHS Aging Services, many other sponsors provided substantial support of the conference:

**Platinum**
Oklahoma Healthy Aging Initiative

**Gold**
AARP Oklahoma
LIFE Senior Services Inc.

**Silver**
Health Care Innovations Private Services
Med-Corp Plus Inc.
OG&E

**Bronze**
Absolute Senior Care
Blue Cross Blue Shield
Emeritus at Statesman Club
Home Care Assistance
Invest Ed
McBride Foundation
Medical Park West Rehabilitation
Oklahoma Department of Mental Health and Substance Abuse Services
Oklahoma Geriatric Education Center
Touchmark at Coffee Creek

Planning is already underway for the 40th Annual Oklahoma Conference on Aging, which will be May 5-7, 2015, at the Embassy Suites Norman Hotel and Conference Center. Visit www.okagingconference.com for more information and to receive email notifications about the upcoming event.

SAVE THE DATE!

Being a GRANDfamily — a free conference for grandparents raising grandchildren and other relatives raising children.

Sept. 11, 2014
8 a.m.-3:30 p.m.
Crossings Community Center
2208 W. Hefner Road
Oklahoma City, Oklahoma

Visit www.okgrandfamily.com for more information and to register.
Member Spotlight:
Iris Whickam

In 1981, Iris Whickam uprooted her life in New Orleans and moved to Lawton to help take care of her mother, who was recovering from a stroke. In Louisiana, Whickam was a cafeteria worker and dishwasher; in Oklahoma, she was able to find a job as a short-order cook at Fort Sill and care for her mother with the help of her two sisters and three brothers. Years later, Whickam unexpectedly had a stroke of her own. It damaged her ability to control the left side of her body, making it difficult to walk and requiring her to use a wheelchair. It also took away her speech and use of her left hand.

At the time of her stroke, Whickam was working in a nursing home laundry, but her new physical limitations made it impossible for her to maintain her job. Suddenly finding herself in a vulnerable position that was all-too-familiar, Whickam turned to the Oklahoma Department of Human Services, who helped her get into the ADvantage program.

“They helped me out a lot,” Whickam said.

“There’s a lot of things I wouldn’t have if I didn’t have ADvantage.”

Through ADvantage, Whickam has received dental work, corrective lenses, a wheelchair, a hospital bed, medicine, a breathing machine, home-delivered meals, and access to an adult day health care center that has greatly improved her quality of life. The ADvantage program also helped her get an apartment and made it possible for Whickam’s sister, Tinetta Tetrault, to become her caregiver. Tetrault takes Whickam to doctor visits and other places, and keeps up with Whickam’s medication. “I’m glad to have her,” Whickam said.

In the years since her stroke in 1994, her speech has improved. At first, Whickam could not say anything. Early on, a dry erase board allowed her to communicate. This simple victory was a big step for Whickam. Her first words on the dry erase board, proving her eagerness to get back to the simple things she enjoyed before her stroke, were, “I want ice cream.”

(Continued on page 8)
Member Spotlight
Continued from page 7

Surprisingly, one of the greatest assets to Whickam’s recovery, made possible by ADvantage, has been a very unique prescription – not for medicine, but for a cat. Apartment rules forbid pets, but with a doctor’s note Whickam was able to bring Kacidy home. The furry, orange feline is shy around newcomers but fiercely protective of her “mama.” Whickam’s loyal new friend helps keep her spirits up, and for the past year-and-a-half, he has helped her with her physical therapy in a startling way. Kacidy will climb up and sit under Whickam’s immobile hand, persistently insisting that Whickam pet him with that hand specifically. Whickam believes Kacidy knows what he is doing, and with his help she has started to make her first movements with that hand in nearly two decades. Last year, Whickam moved her little finger. She didn’t notice it at first, but Tetrault did. Her sister exclaimed, “You’re moving your pinky! Do that again!”

Following her stroke, it took years for Whickam to lower her arm, but now she is moving it more than ever. “She’s doing very good; I’m very happy,” Tetrault said. Whickam’s hand and arm are now the focus of her therapy, and therapists are still working on her legs as well. “In the past four to six weeks, she has improved a lot,” Tetrault said.

In addition to reaching new mobility with her hand, with therapy, Whickam has been able to gradually walk more. Her journey of recovery has been one of small, progressive victories, and crucial to those victories has been her positivity, which has been amplified by her cat and her participation with a local adult day health center.

Before ADvantage provided a way for Whickam to start attending the center in 2004, she spent all of her time at home with no one to talk to except her sisters and her doctors. Tetrault said, “Now, she has friends. She gets to do things and go places.”

“It got me out of my shell,” Whickam said.

At first, Whickam attended the center three days a week to receive therapy for her speech and hand. Now, she goes every weekday and sometimes participates in field trips on Saturdays. They have gone to Duncan to see country singers, Chickasha to see Christmas lights, and Oklahoma City to visit the zoo. “They wanted me to get out and move around because I was staying in the house and wasn’t really talking to anybody,” she said.

The center also takes a group to the VFW to play bingo, as well as other outings, and it hosts birthday parties, dances and a prom.

Through ADvantage, the center helped Whickam get her wheelchair and personal items, like her hospital bed and medication. “They come check on me about once or twice a month and see what I need,” Whickam said. “They help me do what I can’t do.” Workers clean her apartment and help her take a bath.

The center still does physical therapy three times a week, and nurses come to her home regularly.

Modest, progressive victories continue to describe Whickam’s path to recovery, but with the help of her sister, her cat, her doctors and ADvantage, her spirits are high and her outlook is bright.

“Her journey of recovery has been one of small, progressive victories.”
Inside ADvantage: Training and Development Team

The Medicaid Services Unit’s ADvantage Administration (AA) training and development team is a crucial support service to ADvantage providers, each of the departments within the AA, and ultimately to ADvantage Members. The training and development team identifies, develops, facilitates and presents needed training and provides support to other departments within the AA for specified training needs. The team continually seeks current information and resources to update training and cascade this information to ADvantage provider agencies; both ultimately improve and enhance Member services. One of the primary roles of the training and development team is to empower and support new ADvantage case managers with a comprehensive and functional orientation curriculum, which includes tools for effective service delivery and encourages “out of the box” thinking for creative solutions. The training and development team strives to reinforce case managers’ confidence in their skills by ensuring a fruitful and holistic case management orientation training experience.

The training and development team supports other AA departments by collecting information regarding provider performance issues, assisting with development of resolutions for those issues, and using that information to enhance future provider trainings. The team also identifies issues of concern expressed in provider training sessions and communicates those back to the specified departments’ supervisors for consideration and possible action on improving AA process and policy.

The training and development team provides support for other departmental trainings ranging from edit recommendations to curriculum development and participation in training sessions. This includes assisting Melinda Spalding, Brenda Lambeth and Cathy Murrell with the Assisted Living service option; Jonathan Vanbeber, Martha Spann and Kim Stoots with the Consumer Directed Personal Assistance Services and Supports (CD-PASS) service option; and Darryl Washington and Melinda Carter with the integrated voice recognition authentication (IVRA) system. The team also assists with new provider orientation and regional provider trainings.

“The training and development team strives to reinforce case managers’ confidence.”

The training and development team’s core members are Kirk Shrader, programs manager, and Catherine Gervasio, training specialist II.

Shrader has been with DHS Aging Services since August 2009. Prior to that, he worked in the fields of training and development; health, safety, and environment; and in human resources in the transportation and general manufacturing industries for 20 years. Additionally, Shrader was previously employed by social services as a case manager and

(Continued on page 10)
Inside ADvantage
Continued from page 9

youth specialist working with court adjudicated youth.

Gervasio graduated from Mesa High School and received her associate degree in arts in speech communication and English from Mesa Community College. While in college she joined the competitive speech and debate team, winning five national championships. She also became involved in the campus theater and went on to spend many years in community, regional, repertory and dinner theaters in the greater Phoenix area. Twenty-seven years after her first college graduation she went back to school at Colorado Technical University in Boulder, Colorado, to finish her bachelor’s degree in criminal justice with a minor in social services and public administration. A downturn in the economy and a twist or two of fate brought her family to Tulsa in 2008, where they all fell in love with the beautiful scenery and lovely people in their new hometown. Gervasio has a rich and varied work background, including many years as an art teacher, a K-12 substitute teacher, and an adult probation officer in Maricopa County, Arizona. She has been with the AA since 2010, serving first in service plan authorization before transferring to the training department.

Other regular members of the AA training and development team include:

Rhonda James, RN, Health Care Management Nurse (HCMN) III
Rhonda James is the area nurse for the Redetermination Unit with DHS Aging Service’s Medicaid Services Unit. She is responsible for maintaining Center for Medicare and Medicaid Services requirements and state compliance regarding the annual redetermination of medical-level of care for ADvantage Members. She supervises a professional nursing staff of HCMN IIs who review Members’ reassessment Uniform Comprehensive Assessment Tools (UCAT) for redetermination of medical eligibility.

James began her nursing career in 1988 and soon fell in love with intensive care unit, surgery and emergency room work. She went from operating room supervisor in the hospital to the “new thing” of the early 1990s – Medicare home health. She was a registered nurse case manager and later became co-owner of a Medicare agency that continues to serve Oklahomans today. She started with DHS in 1999 and worked as an HCMN II until being promoted to area nurse with the Redetermination Unit in August 2009. She has a passion for working with the elderly and thinks everyone should have the opportunity to live out their lives at home if at all possible. She shares her home with, and is a primary caregiver to, her 99-year-old grandmother and 70-year-old mother. James believes in her heart that nursing is a gift of healing and her hope is to inspire others to be and do the best they can, both in their personal and professional roles. She insists on being an efficient and productive nurse and helps the AA with training new certified case managers. She loves to teach, especially if she has a captive audience. She loves life, laughter and wants to be an inspiration and positive person to others. Her expectation is to retire with honors from DHS.

Marla Martin, RN, Health Care Management Nurse III
Marla Martin attended Southwest Missouri State University, graduating and obtaining her associate

(Continued on page 11)
degree in nursing in 1985. She worked in a nursing facility at night as charge nurse for the first five years of her nursing career, leaving that position to move to Oklahoma in 1989. She began working at Medical Home Health as a case manager in September 1989 and was later promoted to home health aide supervisor. The agency was acquired by Americare Home Health and she was promoted to clinical supervisor. Martin held this position until resigning to become the branch supervisor with the Tulsa office of HealthCare Innovations Private Services in 2004. She left that position to accept the HCMN II position with the AA in August 2010.

David Virili, Social Services Specialist II
David Virili began working with the ADvantage program in 2000. He started in the intake and screening department and currently serves Oklahomans as a social service specialist II in service plan authorization.

He is responsible for conducting health and safety screenings, and certifies plans and addenda for the ultimate delivery of ADvantage products and services. Prior to ADvantage, Virili’s professional background was as service manager for Best Buy Inc. and as the regional service manager for Silo where he supervised technicians and managed the processing and repairs of returns and defective merchandise.

Virili received his associates in medical assisting and minor in technical theater from Palomar College in San Marcos, California. His love for the performing arts and in assisting various community theaters around Tulsa is evident by his being awarded the Bank of America Achievement Award for his pursuit in theater. Virili was recently named honoree for his years of service as president of Theatre Tulsa Inc., which holds the distinction of being the oldest continually running community theater west of the Mississippi.

Aubrey McDonald, Social Services Specialist II
Aubrey McDonald has been with the ADvantage program since June 2001. She initially started as a Member health information processor, was promoted to a Member information analyst, and then moved to service plan authorization. She has seen many different aspects of the AA. As a result, she absolutely loves the concept of helping aging Oklahomans.

McDonald is currently attending Tulsa Community College, where she plans to graduate in December 2014 with an associate degree in business. She plans to pursue a bachelor’s degree in business at Oklahoma State University. McDonald was invited to join Phi Theta Kappa due to her 4.0 grade point average and is currently a member. Due to her stellar academic performance and exemplifying leadership qualities, she was also one of 200 scholars in the world to receive an invitation to participate in the business delegation with the Laureate Honors Scholar Program of 2013. The program McDonald attended took her to Washington, D.C., Philadelphia, and New York, and extended an amazing opportunity to network with other scholars from around the globe while studying business practices within other companies and cultures. McDonald is excited about completing her educational goals and furthering her knowledge base and experience within the AA.
Team Spotlight: Kathleen Kelley

The AA’s Administrative Support and Quality Assurance team provides a foundation of information for the entire ADvantage program in a wide range of situations – such as working with new providers, conducting case management training, helping a Member who is receiving Consumer Directed Personal Assistance Services and Supports (CD-PASS) program services or helping resolve a claim problem.

The four functional units within the team are Training and Development, CD-PASS, IVRA/OKAuthentiCare, and Claims, Closures and Reactivations. Each unit works directly or indirectly with ADvantage Members or providers to explain ADvantage services and ensure quality services continue to be provided.

Leading the unit is Kathleen Kelley, RN, programs assistant administrator. Kelley was born in Sulfur, Oklahoma, into an Air Force family. Some of her earliest childhood memories are of her first five years spent living with her family in Japan. The family returned to live near Tinker Air Force Base, where Kelley spent her elementary and middle school years before moving again for high school in Illinois. Returning to Oklahoma for college, Kelley graduated from Northwestern Oklahoma State University, Alva, with a bachelor’s degree in nursing.

She has chosen a career path dedicated to the field of home and community-based services (HCBS). Kelley joined the AA in 2011 as a health care management nurse on the clinical review team. Prior to joining the AA, she was employed with the Long Term Care Authority of Tulsa and worked with the Living Choice Medicaid demonstration project. This program helps states increase the use of HCBS and reduce the use of institutionally-based services. When not leading the Support and QA team, Kelley enjoys quiet country living and gardening in Gore, Oklahoma, where she lives with her partner of 15 years, three dogs and two cats.
Benefits of Adult Day Health Services

After a busy weekend with her family, Mary is anxiously awaiting the first day of a new “school” week. Mary started attending “school” about a year ago. Since that time she has made a new best friend, her health has improved and her attitude about life is brighter. Mary is not unlike many seniors who find attending an adult day health program has brought new significance to their lives.

Ben has early onset Alzheimer’s, and each day that he attends his center he believes he is going to work. Ben has taken it upon himself to care for the patio and lawn area of the adult day center he attends and, at the end of the week, his family provides him with a small faux check for his services. Ben has found fulfillment and a purpose.

Brooke attends an adult day health center where she greets visitors and makes folks feel welcome. Brooke always has a smile on her face and a sweet nature. Rhonda, another participant who has Alzheimer’s disease, enjoys watching the fiber optic lights displayed at the center she attends. The lights and circular walking paths have proven to keep her calm. These are just a few stories of participants who attend one of the 33 state-funded adult day health centers in Oklahoma.

(Continued on page 14)
The adult day health program provides a two-fold purpose. First, it provides a safe, secure, friendly environment for the participant to receive a variety of health, social and other related support services. It provides seniors the skills that support individual growth through a structured environment including group conversations, daily trivia, current events, field trips, exercise, and other activities. Adult day health services also help individuals remain in their own homes or with their families rather than going to a nursing facility. A number of the adult day health centers offer intergenerational activities such as seniors interacting with the local childcare centers during events at Christmas, Valentine’s Day and Halloween. Secondly, adult day health care allows the caregiver the opportunity to continue to work or to meet the needs of other family members, while also providing a respite for the caregiver. It is a win-win situation for both the participants and their caregivers.

According to national data, the average adult day health participant is a 76-year-old female who lives with a spouse, adult child or other family member. About 50 percent of the individuals have some form of cognitive impairment and more than half require some assistance with at least two activities of daily living. The primary goal of adult day health services is to help the participant achieve as much independence as possible and to keep them at that level for as long as possible.

The cost for adult day health care services in Oklahoma is $60 per day, with most participants attending for longer than eight hours. Compare this to the average cost of home health aides at $168 per eight hours, nursing homes at $143.50 per day and assisted living at $105 per day. Although Medicare does not cover the cost of adult day health services in Oklahoma at this time, state funds, long-term health care insurance, the ADvantage Medicaid waiver and the Veterans Administration may cover the costs depending on program-specific eligibility requirements.

As one provider recently said, “When people sit at home day-in and day-out by themselves, they lose the skills they need to socialize and join in activities with others. You will see them slowly draw into themselves.” Adult day health care services are an outstanding resource available to Oklahoma seniors. Let us continue to keep the Oklahoma spirit alive and support individual growth for our elders through adult day health services.

This town made of popsicle sticks and duct tape was created by a participant in Bartlesville.
Case Manager’s Toolbox

Did you know there is a treasure chest of information and resources waiting for you on the MSU-ADvantage Administration website in the Case Manager’s Toolbox? You can find this treasure trove at www.okdhs.org/programsandservices/aging/adw/case/docs/ServicePlan.htm. You will want to save this link to your desktop! The tools and resources listed in the toolbox are intended to assist case managers in the development of an individualized, comprehensive plan of care for ADvantage Members.

What are some of the tools? For service plan development, you can find current reimbursement rates for ADvantage services, a tool to determine the earliest allowable reassessment UCAT date, contact information for the Redetermination Unit, a listing of commonly used acronyms with links to agencies, a glossary of relative ADvantage program terminology, Health and Safety Risk Indicator criteria, and a current listing of all DHS hotlines.

To assist with plan development for fall and injury prevention, case managers can link to information from the Oklahoma State Department of Health, Centers for Disease Control, and National Council on Aging. Printer-friendly fact sheets are also available that may be provided to Members. Linking to the Family Caregiver Alliance yields a plethora of knowledge from other caregivers across the nation, including webinars on current topics. Resources for setting personal goals and end of life planning are also available in the virtual toolbox. Do not miss the “Quick Links” on the right side of the page for links to other resources. Check it out!

ADvantage Service Option Updates

CD-PASS is currently available in 19 counties, with plans to expand statewide by 2016. Ten counties were added to the CD-PASS service area March 1: Adair, Cherokee, Haskell, Hughes, McIntosh, Muskogee, Okfuskee, Okmulgee, Seminole and Sequoyah. A full listing of current counties served can be viewed online at: www.okdhs.org/programsandservices/aging/adw/docs/cdpass.htm.

The next expansion is planned for this fall and will be announced by ADvantage bulletin and posted at the Web address above.

Assisted Living has seven ADvantage-certified assisted living facilities in Oklahoma serving approximately 160 ADvantage Members monthly. We are excited to announce that North County Assisted Living in Collinsville became certified for ADvantage effective February 2014. If you know of an Assisted Living facility in your area that may be interested in becoming an ADvantage provider, please contact our Contracts unit at 918-933-4900.
Avoid Service Plan Reviews
With These Helpful Tips

You have just received an eagerly awaited ADv6g on the service plan you submitted for authorization and you see the dreaded words, “Not Authorized: See attached SPR.” This means more work for everyone and can lead to service delays. Wouldn’t you love to know the “secret” to receiving a “clean” ADv6g each and every time?

This four-part series, based on the criteria used by the ADvantage clinical review team, is designed to help remove the mystery from service plan authorization. In part one, we give handy tips on what is expected in service plan goals regarding the topics of disease management and personal emergency response systems (PERS).

1) **Disease Management** – Include outcomes and action steps pertinent to the Member, particularly basic information for all of the Member’s health conditions. For example:

- **Diabetes**: Member is taking medication according to the physician’s orders, checking blood sugar, attending appointments, following prescribed diet.
- **Hypertension**: Member is taking medication according to the physician’s orders, having blood pressure monitored (at appointments/at home by a nurse/at home by themselves or an informal care giver).
- **Seizure disorder**: Member is taking medications according to the physician’s orders, is attentive of signs and symptoms of seizure. Is safety supervision required? If so, who provides it?
- **Substance abuse, such as smoking**: Member educated on risks of smoking and benefits of cessation.

Remember to address disease management as it pertains to fall prevention; include any other symptom relative to falls, such as dizziness, shortness of breath, neuropathy, etc.

Address education on disease processes provided by an RN or LPN and specify frequency and pay source (ADvantage, Medicare or State Plan Personal Care) in the goals.

2) **Personal Emergency Response Systems** – State that ADvantage will pay and an ADvantage certified provider will deliver, install and instruct Member in use of system, and monitor on a monthly basis.

- Address how PERS is worn, such as “Member wears PERS when alone” or “Member wears PERS 24 hours a day, seven days a week.”
- Include how and when Member demonstrates use of PERS to the case manager. For example, “Member will verbalize understanding of use of PERS and demonstrate proper activation of PERS unit at each home visit.”
- Include disease management as it pertains to fall prevention (see No. 1). Don’t forget dizziness!
- If the Member does not live alone, include hours and frequency of time Member is left alone. For example, “Member is left alone nine hours per day, four days per week while informal support works outside the home.”

If you use this series of articles as a checklist before submission of service plans and addenda, you will be on your way toward banishing those SPRs!