

The Moderate Need Program is for adult Vermonters who may not meet nursing home level of care but require some services to assist them to remain independent in their home, preventing a more intense level of service. Eligible applicants are Vermont residents, 18 years or older, and have a functional limitation related to a physical condition or associated with aging.

Mail applications to the Case Management Agency of your choice in your region located on the back.

Information

Name: _____ Male Female
Last First Middle Initial

Mailing Address: _____ Phone: _____
Street/PO Box City State Zip Code

SSN#: _____ Date of Birth: _____ Medicaid: Yes No

Moderate Needs Services (check all services being requested) **Moderate Needs services are limited to available funding.**

Adult Day Services Home Maker Flexible funding for: _____

Case Management Agency

Choose one of the agencies on the reverse side of this form to provide Case Management services if found eligible. The case manager will assist with a person-centered plan and ongoing service coordination.

Local Area on Aging Home Health Agency Name: _____

Agreement of Terms and Conditions

By signing this application form, the applicant/legal representative agrees to the following statements:

- I understand that I must meet all eligibility criteria to be eligible for Moderate Needs services.
- I understand that if funding or services are not available, I will be notified by the Case Management Agency and my name may be placed on a waiting list.
- I understand the amount of services authorized are based on my assessed needs, and a person-centered plan
- I understand that homemaker services are limited up to but no more than 6 hours/week.
- I understand that adult day services are limited up to but no more than 50 hours/week.
- I understand that flexible funding is limited to available funds.
- I agree to provide information to the people who will determine my eligibility and provide services.
- I give permission for the case management agency and the Department of Disabilities, Aging and Independent Living staff to contact my legal representative (if applicable), and providers I am currently involved with in order to determine eligibility and services
- I understand that if found ineligible for Moderate Needs services, I will be informed of my appeal rights.
- I understand if found eligible, I will contact my case manager to report changes in my contact information and all changes that may affect my eligibility for services.
- I understand that each provider of service has a complaint process. I may contact the case management agency or DAIL for assistance in resolving complaints.
- To the best of my knowledge, the information on this application is correct.

Applicant / Legal Representative Signature: _____ Date: _____

Please choose an agency below to send your Moderate Needs Application to

Case Management Provider Name		
County	Area Agency on Aging Providers	Home Health Agency Provider
Addison	Age Well 875 Roosevelt Highway Colchester, VT 05446	Addison County Home Health & Hospice PO Box 754 Middlebury, VT 05753
Bennington	Southwestern Vermont Council on Aging 160 Benmont Ave, Suite 90 Bennington, VT 05201	VNA & Hospice of the Southwest Region 7 Albert Cree Dr. Rutland, VT 05701
Caledonia	Northeast Kingdom Council on Aging 481 Summer St., Suite 101 St. Johnsbury, VT	Caledonia Home Health and Hospice 161 Sherman Dr. St. Johnsbury, VT 05819
Chittenden	Age Well 875 Roosevelt Highway Colchester, VT 05446	UVM Home Health & Hospice 1110 Prim Rd. Suite 1 Colchester, VT 05446
Essex	Northeast Kingdom Council on Aging 481 Summer St., Suite 101 St. Johnsbury, VT	Orleans/Essex VNA & Hospice 46 Lakemont Rd. Newport, VT 05855
Franklin	Age Well 875 Roosevelt Highway Colchester, VT 05446	Franklin County Home Health & Hospice 3 Home Health Circle, Suite 1 St. Albans, VT 05478
Grand Isle	Age Well 875 Roosevelt Highway Colchester, VT 05446	UVM Home Health & Hospice 1110 Prim Rd. Suite 1 Colchester, VT 05446
Lamoille	Central Vermont Council on Aging 59 N. Main St., Suite 200 Barre, VT 05641	Lamoille Home Health & Hospice 54 Farr Ave. Morrisville, VT 05661
Orange	Central Vermont Council on Aging 59 N. Main St., Suite 200 Barre, VT 05641	Visiting Nurses of VT and NH 88 Prospect St. White River Jct., VT 05001
Orleans	Northeast Kingdom Council on Aging 481 Summer St., Suite 101 St. Johnsbury, VT	Orleans/Essex VNA & Hospice 46 Lakemont Rd. Newport, VT 05855
Rutland	Southwestern Vermont Council on Aging 143 Maple St. Rutland, VT 05701	VNA & Hospice of the Southwest Region 7 Albert Cree Dr. Rutland, VT 05701
Washington	Central Vermont Council on Aging 59 N. Main St., Suite 200 Barre, VT 05641	Central VT Home Health & Hospice 600 Granger Rd. Barre, VT 05641
Windham	Senior Solutions – Council on Aging for Southeastern Vermont 38 Pleasant St. #1 Springfield, VT 05156	Visiting Nurses of VT and NH 88 Prospect St. White River Jct., VT 05001
Windsor	Senior Solutions – Council on Aging for Southeastern Vermont 38 Pleasant St. #1 Springfield, VT 05156	Visiting Nurses of VT and NH 88 Prospect St. White River Jct., VT 05001

For more resources or contact information call 211 or the Senior Help Line at (800) 642-5119