



Coalition of Agencies in Service to the Elderly Bio Information Form

Date: **8/15/18**

Name: **Meghan Arnold**

Title: **Intake and Outreach Coordinator**

Agency Name: **Venture Forthe**

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What age range do you serve? **18 and up**

A brief description of your position: **Completes referral process and directs clients to appropriate health care services.**

A brief description of what your agency does: **Provide specialized in-home health care services for individual with disabilities.**

Please list any other programs your agency provides: **Clinical supports/services (Community Intergration, Counseling, Independent Living Skills Training), Personal Care Aids, CDPAP, HCBS (HARP), Health Home**