

Alliance for Aging, Inc.

*Area Agency on Aging for
Miami-Dade & Monroe Counties*



Transportation Training 12/23/14

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Answers on Aging.

Transportation Services

- ▶ The purpose of this training is to notify the AAAs that the Department is changing the reporting requirements for non-registered transportation services provided through the Local Services Program (LSP) and Older Americans Act Title IIIB (OA3B).
- ▶ **Effective January 1, 2015**, monthly aggregate reporting by client will be required.
- ▶ This method of reporting was recommended by the Inspector General and will improve the Department's reporting of National Aging Programs Information System (NAPIS) data.

Definition of Service

DESCRIPTION:

Transportation is defined as travel to or from community services and resources, health and medical care, shopping, social activities, or other life sustaining activities.

Delivery Standards/ Special Conditions

DELIVERY STANDARDS/SPECIAL CONDITIONS:

1. All transportation provided with federal, state and local government funds shall be purchased through a contractual arrangement with the community transportation coordinator (CTC) or approved coordination provider within the coordinated system. Exceptions are permitted in accordance with Chapter 41-2, Florida Administrative Code.
2. When transportation suited to the unique and diverse needs of an elderly person cannot be met through the coordinated system; the provider may purchase or provide transportation utilizing the following alternatives:
 - a. Privately owned vehicle of an agency volunteer or employee;
 - b. State owned vehicles;
 - c. Privately owned vehicle of a family member or custodian;
 - d. Common carriers, such as commercial airlines or bus; or
 - e. Emergency medical vehicles.
3. The provider may utilize other modes of transportation when the CTC determines it is unable to provide or arrange the required service.
4. Providing transportation through sources other than the CTC shall be approved by the CTC. Local procedures for the review/approval process apply.
5. Transportation providers shall hold applicable licenses issued by the Department of Highway Safety and Motor Vehicles in accordance with Chapter 322, Florida Statutes, and shall maintain minimum vehicle liability insurance coverage, as required by law.

CTC Agreements

- ▶ CTC Agreements are required when:
 1. Vehicles are procured through the FDOT 5310 program
 2. The major population being served are seniors and those with disabilities
 3. Transportation is provided free of charge
 4. You are a non-profit entity

- ▶ Exclusions:
 1. Motor vehicles owned, operated by or operated under contract with a municipality in a local public transportation system providing “circulator service” when authorized by an **interlocal agreement** with Miami-Dade County which has been approved by the Board. “Circulator services” means:
 - a. The provision of fixed route or semi-fixed route transportation service where at least seventy (70) percent of the route is within one municipality.
 - b. The municipality utilizes its own staff/employees for service operation (including drivers)
 - c. The municipality procured its vehicles independently
 - d. Transportation services are provided free of charge

Providing transportation through sources other than the CTC shall be approved by the CTC.

CTC Contact Information

► Miami-Dade

Community Transportation Coordinator (CTC)

Ed Carson, Manager-Grant Administrator

701 NW 1st Court, Suite 1300

Miami, FL 33136

Phone: 786-469-5000

E-mail: ecarson@miamidade.gov

Website: www.miamidade.gov/transit

► Monroe

Community Transportation Coordinator (CTC)

Maureen “Mo” Grynewicz

3000 41st Street Ocean

Marathon, FL 33050

Phone: 305-434-7660 ext 31302

E-mail: maureen.grynewicz@westcare.com

New CIRTS Requirements

Beginning January 1, 2015, transportation services provided through LSP and OA3B must be reported using the Monthly Aggregate Reporting by Client method.

Under LSP and OA3B, each client receiving transportation services will be:

1. Entered into CIRTS with the following required information:
 - a. Client's first and last name;
 - b. Client's Social Security Number (SSN);
 - c. Owner ID;
 - d. County of service;
 - e. Client's date of birth; and
 - f. Client's address, including street, city, state, and ZIP code;
 2. Enrolled in LSP and/or OA3B; and
 3. Reported monthly by SSN for transportation services received by program. The number of trips provided to the client will be entered at least once a month by client.
- This change **will not** require an initial or annual assessment for clients who receive **only** transportation services.

PSA	Owner ID	SSN	Client ID	First Name	Last Name	
11	11030	894565752	1000526616	JOHN	DOE	<input checked="" type="checkbox"/> Demographic Complete <input type="checkbox"/> PAS Complete <input type="checkbox"/> Open Case <input type="checkbox"/> Open Enrollment

A. DEMOGRAPHIC SECTION

SSN	Owner ID	County of Service	First Name	M.I.	Last Name
894565752	11030	DADE-SOUTH	JOHN		DOE

Medicaid Number	Best Contact Telephone Number	Date of Birth	Date of Death	Sex
		10/13/1934		MALE

Race: (Mark all that apply):

<input checked="" type="checkbox"/> White	<input type="checkbox"/> Black / African American	<input type="checkbox"/> Asian	Other Race Description
<input type="checkbox"/> American Indian/Alaska Native	<input type="checkbox"/> Native Hawaiian/Pacific Islander	<input type="checkbox"/> Other	

Ethnicity

HISPANIC / LATINO

Primary Language

SPANISH

Other Primary Language Description

Marital Status

Does client have limited ability reading, writing, speaking, or understanding English? ☐

W = WIDOWED

Physical Location

Home Address

Mailing Address

Contact Person(s)

Home Address

Copy Physical Location

Date of Last Change

11/09/2007 11:58:02 AM

Street 1234 SW 56 ST

CIENROLL	CIRTS	Date	12/23/2014
20131209	CLIENT ENROLLMENTS	User	SUAREZB

(Press Ctrl+Page Down to access Waitlist)

PSA 11 SSN 894565752 Client Id 1000526616 DOB 10/13/1934 Owner ID 11030

First Name	MI	Last Name	Most Recent EMS Release Date
JOHN		DOE	

[illegible]



CISRVPR

CIRTS

Date 12/23/2014

20140708

RECEIVED SERVICES - INDIVIDUAL SSN

User SUAREZB

PSA	Provider	Worker ID	Program	Service	Service Date	Units	Unit Type
11	11030	01					

PSA	Client SSN	Client Id	Program	Service	Service Date	Units	Unit Type	Billed Amount
11	894565752	1000526616	LSP	TRS	10/31/2014	100	TRS	

Client Name DCE, JOHN

<input type="checkbox"/>								
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Client Name

<input type="checkbox"/>								
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Client Name

<input type="checkbox"/>								
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Client Name

<input type="checkbox"/>								
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Client Name

New CIRT Requirements (cont)

RECORD KEEPING AND REPORTING REQUIREMENTS:

- ▶ **Unit of Service- Individual:** **A unit of service is a one-way trip**
- ▶ Until further notice, services will not be reported as “group”, only as “individual” trips. However, we currently do not have any group rates established.
- ▶ Refer to pages 10-13 in Appendix A of the DOEA Programs & Services Handbook for COMMON ISSUES FOR PROGRAMS/SERVICES.
 - As per pg A-10 of the DOEA Programs & Services Handbook, “supporting documentation of services provided must be adequate to permit fiscal and programmatic evaluation, and ensure internal management”.
 - As per pg A-12 of the DOEA Programs & Services Handbook, “accurate, legible and complete client files shall be maintained for all clients receiving case management services. When case management is not offered, the provider shall determine service needs, document service activities and client participation, and report service activity”.

*** Refer to sample transportation service log ***

Electronic Data Interchange

If you have your own systems for registering clients and tracking services provided, and the systems allows for **electronic data interchange** (EDI), the data you collect in your systems can be uploaded on a monthly basis to CIRTS.

Please contact your Contract Manager so we can work with DOEA to request CIRTS EDI access.

New reporting requirements are effective January 1, 2015.

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Thank you for Joining Us Today
