

REFERRING AGENCY LIAISON TRAINING CHECKLIST

Prior to beginning the eligibility process, BRAG Staff will travel to each Referring Agency location to meet with the Liaison and conduct a short training session using this checklist.

<p>Referring Agency: _____</p> <p>Referring Agency Liaison: _____</p>

CHECKLIST

Training Element	Complete?
<p>How to choose participants who may be eligible for the program:</p> <ul style="list-style-type: none"> ▪ Participants who are struggling with ongoing transportation issues to get to medical appointments 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>How to explain the program to participants during initial discussions:</p> <ul style="list-style-type: none"> ▪ How it works ▪ Pilot program ▪ Types of trips ▪ Eligibility prioritization 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>How to determine eligibility (five criteria):</p> <ol style="list-style-type: none"> 1. Participant must meet disability criteria: <ol style="list-style-type: none"> i. Has a disability in accordance with the Americans with Disabilities Act (ADA) 2. Participant must meet the financial eligibility criteria: <ol style="list-style-type: none"> i. Participant must be living at less than 130% of poverty level and/or qualifies for Medicaid 3. Participant must <u>not</u> live within the limits of the region’s fare-free ADA Paratransit service area (see the CVTD service area map in section 6 of this document). <i>Exception: if a person has a severe disability that does not allow them to utilize curb-to-curb service but still lives within the limits of the region’s free-fare ADA Paratransit service then they may still be considered for the flex voucher program.</i> 4. Participant must <u>not</u> have access to other transportation reimbursement programs or funding. 5. Participant must utilize the voucher(s) for non-emergency medical or health related trips 	<input type="checkbox"/> Yes <input type="checkbox"/> No

Prioritization of eligible participants:

- If presented with a higher number of eligible participants than the program can accommodate, participant selection will be prioritized as follows:
 1. Participant is over the age of 60; and/or,
 2. Participant has a serious medical or health related condition; and/or,
 3. Participant has experienced a recent physical or economic hardship.

Notes

BRAG Staff who completed training: _____

Date of training: _____

Notes: