**Part I: Service Provision**

[DAAS Administrative Letter 20-16, 20-19, 20-21]

AAA Monitor: Indicate all Service Codes being reimbursed to Provider through Family Caregiver Support Program, CARES Act funds.

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| **ARMS**  **Code** | **Service Description**  **COVIDCARES Series** | **Indicate if the Service is delivered by Provider or Subcontractor?** | **Name of Subcontractor** |
| 870 | Program Planning & Administration | Provider  Subcontractor | Click or tap here to enter text. |
| 871 | Information | Provider  Subcontractor | Click or tap here to enter text. |
| 872 | Access | Provider  Subcontractor | Click or tap here to enter text. |
| 873 | Counseling/Training/Support | Provider  Subcontractor | Click or tap here to enter text. |
| 874 | Respite | Provider  Subcontractor | Click or tap here to enter text. |
| 875 | Supplemental Service | Provider  Subcontractor | Click or tap here to enter text. |

**Part II. Subcontractor Monitoring—CARES Act Funding**

For any service codes in the chart on the Service Provision Chart (above) that are subcontracted by the Provider to another agency, the Provider will submit copies of the subcontracts related to Family Caregiver Support Program services funding. **At a minimum, the subcontract must include the following three elements: the full scope of work, deliverables, and appropriate references to service standard requirements.**

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| **Subcontract Monitoring Verification** | | |
| Did AAA Monitor see subcontracts? | Yes  No | List documentation used to verify: Click or tap here to enter text. |
| Does AAA Monitor attest that all subcontracts include three required elements above (**bolded**)? | Yes  No | List documentation used to verify:  Click or tap here to enter text. |
| Does AAA Monitor attest that the subcontractor monitoring was completed, as required by AAA Policy & Procedures, Section 308? | Yes  No | List documentation used to verify:  Click or tap here to enter text. |
| Additional notes and/or comments: | | |

**Part III. Compliance and Reporting—CARES Act**

[DAAS Administrative Letter 20-16, 20-21]

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| **Division of Aging & Adult Services Policy Compliance** | | | | |
| Is there evidence to support Provider compliance with waiver of signatures on DAAS-101 Client Registration Form? | | Yes  No | | List documentation used to verify:  Click or tap here to enter text. |
| Is there evidence to indicate that Provider continued to solicit and receive voluntary contributions, as specified in the Consumer Contributions Policy? | | Yes  No | | List documentation used to verify:  Click or tap here to enter text. |
| Has the Provider made any building modifications and/or capital acquisitions in excess of $5,000 on a single item? | | Yes  No | | List documentation used to verify:  Click or tap here to enter text.  **If No, proceed to Expenditure Cap.** |
| If yes, did Provide submit written request to AAA and DAAS prior to encumbering funds? | | Yes  No | | List documentation used to verify: Click or tap here to enter text. |
| **Expenditure Cap on Respite and Supplemental Services Funded Through the CARES Act** | | | | |
| Did Provider assure that expenses between Service Codes 874 and 875 were less than $3,500? | | Yes  No | | List documentation used to verify: Click or tap here to enter text. |
| Did Provider submit written justification for purchases exceeding $3,500? | | Yes  No | | List documentation used to verify: Click or tap here to enter text. |
| **Required Reporting for Codes 871 and 872** | | | | |
| Are entries for code 871—Information COVIDCARES accurate and updated in ARMS? | | Yes  No | | List documentation used to verify: Click or tap here to enter text. |
| Are entries keyed to the accurate digit? | | Yes  No | | List documentation used to verify: Click or tap here to enter text. |
| Are entries for 872—Access COVIDCARES accurate and updated in ARMS? | | Yes  No | | List documentation used to verify: Click or tap here to enter text. |
| Are entries keyed to the accurate digit? | | Yes  No | | List documentation used to verify: Click or tap here to enter text. |
| **ARMS 🡪 Tracking Template Reconciliation**  **Fiscal Review for 870, 873, 874, 875** | | | | |
| Has Provider submitted Tracking Template to AAA in a timely manner? | | Yes  No | | List documentation used to verify: Click or tap here to enter text. |
| Is Tracking Template accurate and updated as of the time of monitoring visit? | | Yes  No | | List documentation used to verify: Click or tap here to enter text. |
| **A: 870**  Instructions for AAA Monitor: For expenses related to FCSP CARES **870**, select a month of reimbursement in ARMS and the same month of expenses reported on the FCSP III-E CARES Tracking Template and address each question below.  Check here if Provider does not use this code; skip to B. 873 | | | | |
| Does reimbursement correlate to actual expenses?  *Ex: receipts on file for cleaning products* | Yes  No | | List documentation used to verify:  Click or tap here to enter text. | |
| Does the selected month’s reimbursement match the reporting of expenses on the Tracking Template worksheet for the same sample month? | Yes  No | | List documentation used to verify:  Click or tap here to enter text. | |
| Other comments/observations:  Click or tap here to enter text. | | | | |
| **B. 873**  Instructions for AAA Monitor: For expenses related to FCSP CARES **873**, select a month of reporting in ARMS and the same month of reporting on the FCSP III-E CARES Tracking Template and address each question below.  Check here if Provider does not use this code; skip to C. 874 | | | | |
| Does the selected month’s reimbursement match the reporting of expenses on the Tracking Template worksheet for the same sample month?  *Ex: # of attendees matches on both report and Tracking Template* | YesNo | | List documentation used to verify:  Click or tap here to enter text. | |
| If the agency has collected consumer contributions, does the ZGA-370 match the financial record? | Yes  No | | List documentation used to verify: Click or tap here to enter text. | |
| Other comments/observations:  Click or tap here to enter text. | | | | |
| **C. 874**  Instructions for AAA Monitor: For expenses related to FCSP CARES **874**, select a month of reporting in ARMS and the same month of reporting on the FCSP III-E CARES Tracking Template and address each question below.  Check here if Provider does not use this code; skip to D. 875 | | | | |
| Does reimbursement correlate to actual expenses?  *Ex: invoices on file from in-home aide agencies, timesheets of hired respite workers* | Yes  No | | List documentation used to verify:  Click or tap here to enter text. | |
| Does the selected month’s reimbursement match the reporting of expenses on the Tracking Template worksheet for the same sample month?  *Ex: # of respite hours matches in ARMS and Tracking Template* | Yes  No | | List documentation used to verify:  Click or tap here to enter text. | |
| If the Provider has collected consumer contributions for this service, does the ZGA 370 match the financial record? | Yes  No | | List documentation used to verify: Click or tap here to enter text. | |
| Other comments/observations: Click or tap here to enter text. | | | | |
| **D. 875**  Instructions for AAA Monitor: For expenses related to FCSP CARES **875**, select a month of reporting in ARMS and the same month of reporting on the FCSP III-E CARES Tracking Template and address each question below.  Check here if Provider does not use this code | | | | |
| Does the reimbursement correlate to actual expenses?  *Ex: receipts are on file for items purchases and match amounts reported in ARMS and on Tracking Template* | Yes  No | | List documentation used to verify:  Click or tap here to enter text. | |
| Does the selected month’s reimbursement match the reporting of expenses on the Tracking Template for the same sample month? | Yes  No | | List documentation used to verify: Click or tap here to enter text. | |
| If the Provider has collected consumer contributions for this service, does the ZGA 370 match the financial record? | Yes  No | | List documentation used to verify: Click or tap here to enter text. | |
| Other comments/observations:  Click or tap here to enter text. | | | | |