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1. Introduction and Overview

Welcome to the Aging Resources Management System (ARMS). The ARMS system is accessible by all area agencies on aging, service providers, and any government entity with the need to access ARMS data and reports.

In order to streamline the information sharing between the Aging Resource Management System (ARMS) system and other Department of Health and Human Services (DHHS) division’s systems, the ARMS system will interface with the Common Name Data Service (CNDS) system and obtain a single unified ID called the “Person ID” provided by CNDS to its clients. This unified ID is common to DHHS systems and will bring seamless information sharing and client verification to ARMS.

The following assumptions are made:
- Data provided by the client on the DAAS-101 Client Registration Form (CRF) is accurate
- There are NO data entry errors when searching for the client record in CNDS
- The user verified data keyed for search criteria is correct before searching CNDS
- The user verified information transferred from the CRF accurately before creating a new person in CNDS

1.1 What is ARMS?

The Aging Resource Management System (ARMS) is a client tracking system for demographic data and a reimbursement system that ties reimbursement to performance.

ARMS provide users with the convenience of on-line web access. The system includes functionality and features to facilitate data entry, reporting, and tracking of client information and service impacts over time. At any given time during the year, data is available to report service unit, program costs and income, and non-unit reimbursement.

1.2 ARMS Objectives

ARMS is designed with the following goals:

- To establish a statewide database for reporting client demographic data including eligibility
- To establish a statewide database for budgetary control, delivery of units of service and non-unit activities incorporating Older Americans Act regulations on matching, program income, and other requirements as needed and other funding sources
- To provide a linkage of databases to track services and costs to the client level
- To meet federal reporting requirements

1.3 Who uses ARMS?

The ARMS system is written for the use of the Division of Aging and Adult Services (DAAS) and its constituents. Those who will use ARMS include:

- Regional Area Agencies on Aging staff
- Aging Service Providers (non-profit, profit, public, minority)
- County Lead Agencies and other DHHS Personnel
Only authorized users can access the ARMS System using any Internet connection. An ARMS User ID and password are assigned. User roles require a different level of access to the features and functionality of ARMS. User access is managed by DAAS ARMS Administrators, which will assign each individual ARMS User a different role that is appropriate to the access level of User. User type functionality is shown in Table 1.

<table>
<thead>
<tr>
<th>User Type</th>
<th>Functions Available</th>
</tr>
</thead>
</table>
| Region    | Users assigned the "Region" role can perform all the Provider functions, with the addition of these administrative functions:  
- Add / Modify Region Details  
- Add / Update Region Budget  
- Add / Update Region Expenditures  
- Add / Update Provider Contract Segments |
| Provider  | Users assigned a role in ARMS as “Provider” will be able to perform the following functions.  
- Search for clients and review their information  
- Add / Update a new client  
- Add / Update a service to a client  
- Add / Update monthly service totals for client  
- Add / Update a site/route/worker code  
- Modify provider agency information  
- View / Print Provider specific reports  
- Import Service Data  
- Add / Update non-unit reimbursement data  
- Add / Update consumer contributions/program income |
| County    | Users with “County” access can only View or Print County Reports for their County |
| Report    | Those assigned “Report” access can only View or Print Reports |

Table 1 – User Functionality

This document presents text in different formats which communicate specific information about the system. These formats are described below in Table 2:

<table>
<thead>
<tr>
<th>Format or Style</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Boldface text</strong></td>
<td>Indicates an action to take in the system such as clicking a button or selecting a drop-down list box item or item on a menu.</td>
</tr>
<tr>
<td><em>Italics</em></td>
<td>Indicates text to enter into a field in ARMS.</td>
</tr>
<tr>
<td><strong>Hyperlinks</strong></td>
<td>A link to a web site or to another part of this User Guide. These are working links for those reading this document electronically.</td>
</tr>
<tr>
<td>**Pipe</td>
<td>Separated</td>
</tr>
<tr>
<td><strong>Links…</strong></td>
<td>Drill-down links are usually found in columns. Clicking these opens additional detail screens specific to the data item displayed</td>
</tr>
<tr>
<td><img src="image" alt="tear away” line" /></td>
<td>ARMS screens are often quite long. This “tear away” line indicates that the actual display is too long to include in this document, and users will need to scroll down to see the full list.</td>
</tr>
</tbody>
</table>

Table 2 – Document Conventions
List below are frequent navigation buttons that display based on screen selected. There are many buttons used throughout ARMS and

<table>
<thead>
<tr>
<th>Button</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Previous</td>
<td>Click <strong>PREVIOUS</strong> to return to the previous screen</td>
</tr>
<tr>
<td>Finish</td>
<td>Click the <strong>FINISH</strong> when you have completed the screen to save data keyed</td>
</tr>
<tr>
<td>Cancel</td>
<td>Click <strong>CANCEL</strong> to end function without saving</td>
</tr>
<tr>
<td>Next</td>
<td>Click the <strong>Next</strong> button to advance to next screen</td>
</tr>
<tr>
<td>Update</td>
<td>Update will save the record</td>
</tr>
<tr>
<td>Search</td>
<td>Click to Search for specific criteria</td>
</tr>
<tr>
<td>Reset</td>
<td>Clear search criteria</td>
</tr>
<tr>
<td>Add Client</td>
<td>Click to Add Client to Provider Client List</td>
</tr>
<tr>
<td>Add</td>
<td>This Add can be found on the SRW Details screen to allow User to add names in drop down list to be added to the SRW. Select the name in list and click Add</td>
</tr>
<tr>
<td>Verify</td>
<td>Verify can be found on the Provider Client Site/Route/Worker Service Totals Screen. Click to Verify units keyed.</td>
</tr>
<tr>
<td>Generate Report</td>
<td>This button is found on the Reports screen. Click this button to generate reports based on criteria selected.</td>
</tr>
<tr>
<td>Create New Person</td>
<td>The Create New Person displays with CNDS Search and is used to create a new client in ARMS and CNDS.</td>
</tr>
</tbody>
</table>

Table 3 – Screen Navigation
2 Basic ARMS Functionality

2.1 ARMS System Availability and Connectivity

ARMS is designed to be available 24 hours a day including weekends. There will be times when ARMS may be down for maintenance or to run reimbursement reports. There may also be occasional times the server might be unavailable to users.

**Connectivity** for users is available from DHHS Customer Support Center Monday through Friday from 7:00 a.m. to 5:30 p.m. except State observed holidays.

For **Application/Support** e-mail the Division of Aging and Adult Services (DAAS) at ARMS.Inquiry@dhhs.nc.gov. To help with the troubleshooting process, provide exact details about the behavior, issues, or error messages received.

2.2 ARMS User Data Entry Requirements

ARMS data must be keyed in ARMS by 5:00 p.m. on or before the 11\(^{th}\) of the each month to be reimbursed for the current report period. When the 11\(^{th}\) falls on a holiday the due date is the next working day. If the 11\(^{th}\) falls on a weekend, data is due the following Monday. The link to schedule [https://www2.ncdhhs.gov/aging/arms/arms-schedule.pdf](https://www2.ncdhhs.gov/aging/arms/arms-schedule.pdf).

The processing of reimbursement reports and other financial documents will occur on the 12\(^{th}\) calendar day of the month. When the 12\(^{th}\) falls on a holiday the processing date is the next working day. If the 12\(^{th}\) falls on a weekend, the processing date will be the following Monday. These reports along with previous months will be available at all times. Other reports, such as demographic, verification, waiting list, etc. are available on demand.

2.3 Starting ARMS

Follow these steps to begin using the ARMS system:

1. Launch your Internet browser. Internet Explorer is the **Preferred browser**.
2. Link to WIRM Portal to Access ARMS [https://wirm.dhhs.state.nc.us](https://wirm.dhhs.state.nc.us)

**Helpful Hint:** Users may want to change their Internet Options Browsing History Settings to **Every time I visit the webpage**. This will ensure an updated webpage will display when keying data and not pull from Cache.

Cache is a temporary place on your computer to keep a copy of web pages for faster retrieval on the second request. [Link for more information](https://www2.ncdhhs.gov/aging/arms/arms-schedule.pdf).
Users may get a Security Alert screen similar to this:

![Security Alert](image)

Figure 1 – Security Alert

Click **Yes** to continue.

**NOTE:** You must have pop-ups **ENABLED** in order for the menu structure to operate correctly.

1. To enable pop-ups in Internet Explorer, Click on the **Tools menu | Pop-up Blocker | Pop-up Blocker Settings**

2. Enter the ARMS website address in the text box under “Address of Web site to allow”

3. Click **Add**. This will be required for each PC used to access ARMS.

![Pop-Up Blocker Settings](image)

Figure 2 – Pop-Up Blocker Settings

Pop-up Blocker must be **ENABLED** to run reports
3. The Web Identity Role-based Management (WIRM) login page will display.

4. Enter the assigned WIRM user Name and Password. (This name is typically the user’s first and last name (Example – linda.owens). There will be some exceptions with common names (John Smith, Mary Smith) as these require using middle initials or some other combination. The password must be at least 8 alphanumeric characters. The password is case-sensitive and will expire every 90 days.

**NOTE:** The screen below is what displays at the WIRM Portal Login, but the instructions are not the ones used for ARMS Users. ARMS Users should use the e-mail address in Figure 3 ONLY to have their existing WIRM Account unlocked or password reset.
5. Click Login.

A user profile has been set up for authorized users. Functionality in ARMS is based on the user's unique profile. The profile includes identifying information about each user and the information a user can access. Users will see only that functionality which is assigned to one of the five access roles (described in Table 1).

You may change your password and other information at any time by using the My Settings link after you login.

If the name is not found a message will appear, check the assigned username and try again.

If the password is incorrect a message will appear, check the password and type it again.

WIRM users have three consecutive tries to login with their User Name and Password, after which they will be locked out of the WIRM portal. This helps prevent “hackers” from gaining system access.

If locked out of the WIRM Portal, users can call 919-855-3200, option 2 or e-mail DHHS.Customer.Support.Center@dhhs.nc.gov.

The following must be included in the e-mail.

1. ARMS User
2. Your Name or User ID (example: linda.owens or linda.m.owens)
3. Phone number

Users will be contacted by return e-mail or phone that password has been reset with the ARMS temporary password. If users are not familiar with the temporary password contact DAAS ARMS Staff.

**NOTE:** DAAS ARMS Staff cannot reset password
Some users have multiple applications in WIRM, all of which are visible by clicking the **My Applications** tab which appears beneath the WIRM logo. Therefore, **users should never share login name and password with other.**

![WIRM Portal “My Applications” Screen](image)

**Figure 6 — WIRM Portal “My Applications” Screen**

6. Click the **thumbprint screen shot** or the **title text** to open ARMS to the home page.

7. The WIRM portal automatically logs users OFF the system after a period of inactivity. If the following screen appears simply login again to continue using ARMS.

![Session Expired Screen](image)

**Figure 7 – Session Expired Screen**
2.4 ARMS Recommended Internet Settings

Users should change their Internet Settings to load ARMS Web Pages each time they visit a particular page. Changing this option will allow users to see the current webpage each time they click on a link.

Follow the steps outline below with Internet Explorer open
1. Click Tools from the menu
2. Select Internet Options
3. Click Settings
4. Select Every time I visit the webpage
5. Click Ok

NOTE: This refers to Internet Explorer only. Check the browser you are using to ensure a new webpage is displayed in ARMS each time you access it.
Google Chrome - Clear Browsing data

1. Open Google Chrome, click three vertical dots on right.
2. Select Settings
3. Stroll down to bottom to click on Advanced
4. Select “Clear Browsing Data”

2.5 Logging Out of ARMS

When finished using ARMS, always log out by clicking Logout in top right corner of screen. Logging out helps prevent unauthorized access to ARMS. The WIRM portal will automatically log users out of ARMS after a given period of inactivity. (See Figure 7).

Figure 9 - Logout Prompt
2 Region User

The Region user role in ARMS provides utility for those who manage providers, agency information, budgets and client service data.

2.1 Navigating the Region Functions

The header section of the ARMS screen provides links to available functions. Click on any of the headings on this menu bar to open a separate area of Region user functions.

![Region User Navigation Bar](Image)

2.2 Initial Screen (Home)

Region users will see the following screen when they log into ARMS.

![Region User Initial Screen](Image)

To update Region Details, click Modify.

The second part of the Region Details screen is View Only and shows the Allocations for the Region. Users cannot change the allocated amounts.

County Allocations

Users cannot change (View Only)

**NOTE:** Clicking either Home or Region / County Allocations from the menu bar will display this screen – Region Details.
2.3 Change Region Contact Information

The initial screen (for both Home and Region / County Allocations) is divided into two main sections. The top section contains the contact information for the Region User.

![Region Details](image)

Figure 8 – Region User Contact Details

The user may update the Region Details by clicking on Modify. Click Cancel to return to the previous screen without saving.

![Update a Region](image)

Figure 9 – Modify Region Contact Information

Changes can be made to any of the editable fields, then click Update to save. Click Cancel to return to the previous screen without saving.

**NOTE:** The Region Code cannot be changed by User.
2.4 Region Budget

Click on Region Budget on the navigation bar to view the regional budgets associated with the Region.

![Region Budget Screen](image)

**Figure 10 – Region Budget Screen (Sample)**

2.4.1 View / Modify Regional Budget Details and Expenditures

Details for each budget are available for viewing by clicking the Details… hyperlink. For example, details for the State AAA Admin Cost are:

Region Users may change any editable fields for the Approved Regional Budget on this screen. Click Update to save the changes or Cancel to return to the previous screen.

![Regional Budget Details](image)

**Figure 11 – Sample Regional Budget Details**
To view expenditure details, click the **Expenditures…** link:

![Figure 12 – Sample Expenditure Details](image)

From this screen Region Users view or edit monthly expenditures prior to reimbursement generation by clicking **Details…** Details for January are shown in this example:

![Figure 13 – Sample Regional Expenditures by Month](image)

See **Appendix A** for additional information
Users may add new regional expenses by clicking the **Add Regional Expense** on the **Regional Expenditures** Details screen:

![Add Regional Expenditure](image)

**NOTE:**

Region Users cannot change Regional Expenditures of a **Previous Month** after reimbursement has been generated for that particular month. Changes and/or updates should be included in the next month reimbursement period.

![Table of Regional Expenditure and Reimbursement Percentages](image)

**Table 4 -Regional Expenditure and Reimbursement Percentages**
2.5 Provider Budgets

2.5.1 Add Provider Budgets

Click Add Provider Budget to set up a new budget or provider contract segment.

The region code and name cannot be changed and is filled in based on user access. The user should select the Funding Source by clicking this symbol - . A drop down box will display with available funding sources. Available services will display based on the Funding Source selected from the drop down menu.

In this example, Home and Community Care Block Grant was selected as the Funding Source.

When you click on Service, only services tied to funding source Home and Community Block Grant can be selected.

Note: Services are available by Funding Service.
Figure 19 - Provider Budget – NSIP

If no funding source is selected, service defaults to NSIP service codes 021 and 181.

Figure 20 Provider Budget - Legal

If funding source – Legal is selected, only service Legal will appear. This also applies to Senior Center General Purpose Fund and Outreach, Disease Preventions and Family Caregiver.

Figure 21 – Provider Budget -Provider

Select provider from the list of all available providers in ARMS. All providers are listed because regions can have contracts across regions, for example, Legal.
Users may add the provider budget information in editable fields and click **Update** to save or **Cancel** to return to the previous screen.

**Net Unit Cost** should **NOT** be keyed for Non-Unit Services. If a Net Unit Cost is keyed, Reimbursement will **NOT** calculate for Non-Unit Service Codes. See Service Chart for a list of Non-Unit Service Codes. **Hint:** If Reimbursement is displayed as shown in Figure 23, it is a Non-Unit Service Code. Therefore, **NO** Net Unit Cost for this Provider Budget should be keyed.

### Instructions for Data Entry in Figure 22

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net Unit Cost</td>
<td>Net Unit Cost is used in calculating actual expenses for unit-based expenses. <strong>Do not key for non-unit services. Refer to service code chart</strong></td>
</tr>
<tr>
<td>Net Service Cost</td>
<td>The Net Service Cost is the actual budgeted amount of Federal/State/Local. When keying the budgeted amount for a provider, key the GROSS amounts. The allocations given to each Region/Service are NET amounts. Regions add the respective LOCAL match to the NET to get the GROSS amount to be keyed into ARMS. This is based on Funding Source Reimbursement Percentages – See Table 5</td>
</tr>
<tr>
<td>Total NSIP Dollars</td>
<td>NSIP – <strong>Optional Entry</strong> for NSIP Only Service Codes</td>
</tr>
<tr>
<td>Other Matching Resources</td>
<td>Other matching resources received – <strong>Optional Entry</strong></td>
</tr>
<tr>
<td>Other Non-Matching Resources</td>
<td>Other non-matching resources received – <strong>Optional Entry</strong></td>
</tr>
<tr>
<td>Projected People</td>
<td>Number of people this provider expects to serve this year. This number is <strong>NOT</strong> used in calculating expenses, but used on several demographic reports.</td>
</tr>
<tr>
<td>Is Budget Finalized</td>
<td>Check Yes or No to show whether budget is finalized and/or verified. <strong>Note: This option was never implemented in ARMS.</strong></td>
</tr>
</tbody>
</table>

**Table 3 Provider Budget Data Entry Instructions**
2.5.2 Viewing / Modifying Provider Budget Information

Click on **Provider Budgets** to view the complete list of Provider Budgets/Contract Segments for the Region: A linked index bar is available to help users find Providers by County order.

<table>
<thead>
<tr>
<th>County</th>
<th>Provider</th>
<th>Service</th>
<th>Service Budget</th>
<th>Finalized</th>
<th>▲</th>
<th>△</th>
<th>△</th>
<th>△</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alamance</td>
<td>ALAMANCE CO. NEALS ON WHEELS (62440)</td>
<td>CS-ASSISTANCE WITH ACCESS (800)</td>
<td>$4,025.00</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alamance</td>
<td>HOMECARE PROVIDER'S (6099)</td>
<td>IN-HOME LEVEL 2 - PERSONAL CARE(042)</td>
<td>$27,481.00</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alamance</td>
<td>HOMECARE PROVIDER'S (6099)</td>
<td>IN-HOME LEVEL 3 - PERSONAL CARE(041)</td>
<td>$37,109.00</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alamance</td>
<td>REACH OF CO.SENIOR ADULT (6099)</td>
<td>CARE MANAGEMENT (601)</td>
<td>$135,000.00</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alamance</td>
<td>FRIENDSHIP ADULT DAY SERVICES (6023)</td>
<td>ADULT DAY CARE (600)</td>
<td>$96,957.00</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alamance</td>
<td>LEGAL AIDE OF NO GREENBERO (6020)</td>
<td>LEGAL SERVICES (116)</td>
<td>$7,050.00</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alamance</td>
<td>ALAMANCE CO TRANSP AUTHORITY (6240)</td>
<td>TRANSPORTATION (600)</td>
<td>$81,629.00</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alamance</td>
<td>HOMECARE PROVIDER'S (6099)</td>
<td>IN-HOME LEVEL 1 - HOME MANAGEMENT (601)</td>
<td>$133,111.00</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alamance</td>
<td>ALAMANCE RUGBED, INC. (6003)</td>
<td>CARE MANAGEMENT (601)</td>
<td>$85,629.00</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 24 – Provider Budgets per Region

Simply click on any of the letters in the bar to index on County Name beginning with that letter. **Click the heading link for additional sort order**

Figure 25 - Additional Sort Orders

On the Provider Budgets screen the user have four links to choose from:

- **Details** link will allow the user to update or modify existing provider budget (contract)
- **SRWs** link allow the user to add service totals to SRW, create new routes, add clients to SRW
- **Reimbursements** link allow user to add non-unit reimbursements, update existing data
- **Contributions** link allow the user to add Consumer Contribution, update existing data

Figure 26 – Provider Budget Links
2.5.3 View / Edit Provider Budget Details

Click on the Detail link to View or Edit Provider Budget details. Users can Edit only amounts in editable fields. Click Update to save or Cancel to return to the previous screen.

![Provider Budget Details]

Figure 27 – Provider Budget Details

Reimbursement is made based on the funding source name and funding percentage.

<table>
<thead>
<tr>
<th>Code</th>
<th>Name</th>
<th>Status</th>
<th>Type</th>
<th>Category</th>
<th>Funding Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>NSIP</td>
<td>A</td>
<td>REGION</td>
<td>SERVICE</td>
<td>100.00</td>
</tr>
<tr>
<td>01</td>
<td>HOME COMMUNITY CARE BLOCK GRANT</td>
<td>A</td>
<td>COUNTY</td>
<td>SERVICE</td>
<td>90.00</td>
</tr>
<tr>
<td>02</td>
<td>LEGAL</td>
<td>A</td>
<td>Region</td>
<td>Service</td>
<td>90.00</td>
</tr>
<tr>
<td>03</td>
<td>Senior Center Outreach</td>
<td>A</td>
<td>Region</td>
<td>Service</td>
<td>75.00</td>
</tr>
<tr>
<td>04</td>
<td>Disease Prevention/Health Promotion</td>
<td>A</td>
<td>Region</td>
<td>Service</td>
<td>90.00</td>
</tr>
<tr>
<td>07</td>
<td>Senior Center General Purpose Fund</td>
<td>A</td>
<td>Region</td>
<td>Service</td>
<td>75.00</td>
</tr>
<tr>
<td>08</td>
<td>Family Caregiver</td>
<td>A</td>
<td>Region</td>
<td>Service</td>
<td>100.00</td>
</tr>
</tbody>
</table>

Table 5 - Funding Sources and Reimbursement Percentage

Note: If Net Unit Cost is changed during the fiscal year, YTD units will re-calculate and display on current reimbursement period. Changing the Net Unit Cost in March, will prompt the report to re-calculate units from July to March at the new Net Unit Cost.
2.5.4 View / Edit Provider Budget SRWs

Click on the SRWs link to view Site/Route/Workers (SRW) Details (See Figure 24). The following screen appears:

![Figure 28 – Site/Route/Workers Details](image)

All the Site/Route/Workers associated with this Provider will appear, therefore, the list may be long. Click on Provider Budgets or Cancel to return to the previous screen.

Click on the Add Provider Site/Route/Worker button (see Figure 29) to add a new SRW for this provider.

![Figure 29 – Add Site/Route/Worker](image)

Users may add the information in the two editable fields. Click Add to save or Cancel to return to the previous screen.

**NOTE:** Identical functionality for this feature is available for Provider users.
The SRW Details screen provides two additional links for more information. Click on **Details** to view the clients assigned to this route and a list of Clients that can be assigned this SRW. Select the name from the list, click **Add** and then click **Update** to Save. Click **Cancel** to return to previous screen.

![Figure 30 – SRW Additional Details](image)

To view details for a client, click the **Details** link to view the **SRW Service Totals** an individual client.

![Figure 31—Service Details (from Site/Route/Worker)](image)

Users can add or edit the monthly totals for the client on Provider Site/Route/Worker Service Totals screen in any month. Click one of the four buttons to:

- **Verify** to recalculate the Totals.
- **Update** to save the changes
- **Provider** Budgets to return to the Provider Budgets screen without saving
- **Cancel** to return to the previous screen without saving
Users can click [Remove] permanently remove a client from a provider S/R/W list only if the client does not have Service Totals. The user will have to make the client Inactive if they do not want to add additional service totals amounts.

2.5.5 View / Edit Provider Budget Reimbursements

Click the Reimbursements link to add, edit or view Provider Non-Unit Reimbursements data.

![Figure 32 – View / Edit Provider Budget Reimbursements](image)

Click Add Non Unit Reimbursement to add a monthly non-unit reimbursement record.

Choose the correct month from the drop-down and complete the editable fields. Click Add to save the information or Cancel to exit without saving.

**NOTE:** Only whole numbers should be entered in the monetary fields. But, if the User key amounts with decimal the system will automatically round up or down.

Keying examples:

$99.49 = $99 00  
$99.50 = $100.00
To view the existing non-unit reimbursement information for any month, click the appropriate **Detail** link.

Amounts can be keyed into the Administrative Direct Cost, Administrative Direct Cost and/or Program Cost fields. *Each line is a separate cost.*

When complete, click **Update** to save or click **Cancel** to return to the previous screen.

**Figure 33 – Add / Edit Non-Unit Reimbursement**

**Click Detail to update existing record.**
**Click Add Non Unit Reimbursement to add a new month**

**Select month, key data, Click Add to save**
2.5.6 View / Edit Provider Budget Contributions

Click **Contributions** to add, edit or view Provider Consumer Contribution/Program Income. Click the **Add Consumer Contribution** button to **Add** a new month. Click **Detail** to edit or view a current month.

Click **Detail** to edit an existing record. Click **Update** to save changes.

**Note:** Enter deduction amount on the second line ONLY if the agency is reporting costs to collect cost sharing.
3 Providers

To view list Provider Agencies, click on the **Providers** link on the navigation bar. A list of provider agencies will display.

Users can list all **Providers** by selecting the **All** link or User may narrow the list by clicking on the letter links on the index bar across the top to sort by **Agency Name**. Additional sorting can be done by clicking on the column headings. For example, to sort by City, click the column heading **City**.

Provider codes consist of the Region code and a three digit numeric number. Provider Agency Codes are assigned by the DAAS ARMS Staff and will not change. Once a **Provider Code** is setup in ARMS it will never be assigned to another Provider Agency.

**Status** = A indicates that the Provider Agency is Active for the current fiscal year.

The **Details...** link will allow the user to edit or view Provider Agency information.

The **Clients...** link will allow the user to Add, Edit, or View Clients assigned to a Provider Agency.
3.1.1 Edit / View Provider Details

Click on Details… to edit / view Provider Agency information in the editable fields. Provider Code or Registration Date cannot be changed. The user can edit or modify any of the editable fields on this form. When complete, click **Update** to save or **Cancel** to return to the previous screen.

![View / Modify Provider by Region](image)

**Figure 37 – View / Modify Provider by Region**
3.1.2 View Clients for Region Providers

To view the list of Clients associated with a Provider, click on **Clients**... and the full client list for that Provider will appear:

![Client List for a Provider in a Region](image)

To see the details for a particular Client, click the **Details**... link to open the Clients Detail screen, which allows the Region User to perform all the same functions as described in the **Provider User Manual**, Sections 4-7.

Region Users may also add a new Client by clicking on **Add Client**.

To return to the list of Providers click on either the **Providers** link on the navigation bar or the **Providers** Button.
Appendix
Regional Expenditures are to be keyed as YTD Expenses. Any corrections to Prior Months must be made in Current Month. Once reimbursements are generated for Current Month, changes to Regional Expenditures will be locked for the Current Month. Changes to Regional Expenditures must be sent ARMS Staff to key corrections if errors are found before reimbursement payments are made.

Fields are disabled and cannot be changed after Reimbursement has been generated on the designated day for the current month. If these amounts are wrong, corrections to the YTD Expenditures must be keyed in the next report month. Changes for the current month can be made up until Reimbursement is generated. Therefore, if you key on the November 1 and find on November 5 that you made an error you can correct that error because Reimbursement won’t be generated until later that month.

With the keying of YTD Expenditures for Regional Expenses, corrections to a previous month must be corrected in the Current Month. If no expenditures are reported for a current month the User are encouraged to re-key the Previous Month in the Current Month for the ZGA-060 to calculate correctly. In the example below no Current Month expenditures for August were keyed; therefore, the report had nothing to calculate.
Below are the YTD for July and the ZGA-060 report for Report Month July.

In Figure 40, the ZGA-060 report did not calculate because no YTD expenditures were keyed in the current report month. The ZGA-060 calculated correctly in Figure 42 for report month July. For the report to calculate correctly, the user can re-key the previous as shown in Figure 43.
Keying the same YTD Expenditures in Current Month (August) as was in Previous Month (July) will allow the ZGA-060 to perform the calculations correctly. The report is setup to subtract the previous month YTD from the Current Month YTD as shown in Figure 44. Therefore, if the user decides not to key Current Month expenditures, the User are encouraged to key the Previous Month YTD expenditures as the Current Month YTD Expenditures, which is actually the YTD expenditures being reported in ARMS.

In comparing the ZGA-060 for July (Figure 42) and August (Figure 44) you will note that in July expenditures show up on the Current Month, but in August, the Current Month expenditures are zero.

![Figure 44](image-url)
Appendix B – Access to ARMS - User Request Form

Access to ARMS is **ONLY** granted to Agencies that have contracted to key client and service data for reimbursement in ARMS in the current Fiscal Year. Therefore, if access is given to a User and there is no provider budget in the current fiscal year or the Provider Agency is not **Active**, the User will get a server error.

Regional Staff should check the **Directory** in the WIRM Portal to see if the User has an existing WIRM Account. If the new User is not found after a Search, select **Add New User** on the form for the User Type. When prompted for the WIRM Name, type New. **Note:** To search the Directory, it must be selected before selecting the ARMS application.

There are several ways to search the directory, as illustrated above. In this illustration a search was performed on last name “Owens” and County “Wake.”

**ARMS User Request Link to Form**

The ARMS User Request Form is available to Users with Region Administrator rights to ARMS. Click link on menu bar to access the form.
DAAS: ARMS User Access Request Form

First Name *

Middle Initial *

Last Name *

Email *

Agency *

Position Title *

Phone Number *

(###) ###-####

Street Address *

City *

State *

Select State from list

Zip Code *

County *

Select County from list

ARMS User Role *

- Region Administrator/User
- Provider Administrator/User
- County Report User
- Report User

When ARMS User Role is chosen a selection list will display.  **Except Report User**
ARMS will not allow more than one User Role per WIRM Account. The different types of User Roles are explained in Section 1.3 - Who Uses ARMS.

Region Administrator/User can only be assigned to one Region

Only one User Role can be selected

Region Needed

- (A) Cherokee, Clay, Graham, Haywood, Jackson, Macon, Swain
- (B) Buncombe, Henderson, Madison, Transylvania
- (C) Cleveland, McDowell, Polk, Rutherford
- (D) Alleghany, Ashe, Avery, Mitchell, Watauga, Wilkes, Yancey

Select the County where the Agency is located

All fields with red asterisk * are mandatory and must be completed or selected.
Provider Administrator/User can be assigned multiple Providers across Regions. For example: Provider C005 can also have access to G003, J017, etc.

County Report User

Select County from List
Multiple Counties can be selected

County/Counties Needed
☐ Alamance (001)
☐ Alexander (002)
☐ Alleghany (003)
☐ Anson (004)
Select the Report User Role if User ONLY needs to print and/or view ARMS Reports.

**Report User**

When the **Submit ARMS Inquiry** is selected, a message will display regarding sensitive information. If there is no sensitive information click Ok to submit the form.

---

### Message to Requester

<table>
<thead>
<tr>
<th>User Type</th>
<th>Selection Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Add New User</td>
<td>User does <strong>NOT</strong> have access to ARMS and User <strong>NOT FOUND</strong> WIRM Directory</td>
</tr>
<tr>
<td>Update User</td>
<td><strong>Add</strong> ARMS attributes to a WIRM Account or <strong>Add additional attributes</strong> to an <strong>existing</strong> ARMS User. (Include the WIRM Name found in WIRM Directory)</td>
</tr>
<tr>
<td>Change User</td>
<td>Change/Replace <strong>ONLY</strong> ARMS attributes for existing ARMS User with new attributes (Include the WIRM Name found in WIRM Directory)</td>
</tr>
<tr>
<td>Remove/Deactivate User</td>
<td><strong>REMOVE</strong> ARMS User Access Only (Include the WIRM Name found in WIRM Directory)</td>
</tr>
</tbody>
</table>

**ARMS User Request Selection Criteria**
Three e-mails are generated when form is submitted:

1. The AAA ARMS Coordinator will receive an e-mail similar to the one illustrated below. This e-mail alerts the ARMS Coordinator that the request has been received by DAAS Staff.

   Confirmation E-mail

   Your ARMS User Access request has been submitted for processing within the next 2 business days. If you did not submit a request please notify this office immediately.

   ARMS Job ID: 4977
   Submission Date & Time: Friday, September 30, 2016 - 9:14 am
   -----------------------------------------------
   User Type: Change User
   WIRM Account Name: swarna,reddy
   -----------------------------------------------
   First Name: Swarna
   Middle Initial: D
   Last Name: Reddy
   Email: swarna.reddy@dhhs.nc.gov
   Agency: DAAS
   Position Title: Data Specialist
   Phone Number: 919-855-3442
   Office Address: 693 Palmer Drive, Raleigh, NC 27699-2101
   County: Wake (092)
   -----------------------------------------------
   ARMS User Role: Provider/Administrator/User – choose Provider(s) below

   Region Needed:
   
   Provider(s) Needed:
   - F001 Legal Services of Southern Piedmont
   - G040 Alamance Co Meals On Wheels
   - K095 Legal Aid of NC Region K
   - M065 Legal Aid of NC-Fayetteville
   - P026 Legal Aid of NC-Wilmington

   County/Counties Needed:
   
   Director/Coordinator’s Name: Linda Owens
   Director/Coordinator’s Email: linda.owens@dhhs.nc.gov

   Thank you,
   Division of Aging and Adult Services (ARMS Application)
2. The person ARMS Access is being requested for will receive a similar e-mail as illustrated below. This e-mail alerts the User that the request has been made and the AAA ARMS Coordinator will let them know they have been granted access to ARMS and provide the User with the temporary password.

From: webmaster.ncgov@its.nc.gov [mailto:webmaster.ncgov@its.nc.gov] On Behalf Of ARMS Inquiry
Sent: Friday, September 30, 2016 9:14 AM
To: Reddy, Swarna <swarna.reddy@dhhs.nc.gov>
Subject: ARMS 4977: Swarna Reddy

You are receiving this communication to inform you that your request for ARMS access has been submitted and is being processed. Once your access has been established, you will be contacted by your regional AAA ARMS Coordinator for guidance in logging in and technical assistance.

ARMS Job ID: 4977
Submission Date & Time: Friday, September 30, 2016 - 9:14 am

User Type: Change User
WIRM Account Name: swarna.reddy

First Name: Swarna
Middle Initial: D
Last Name: Reddy
Email: swarna.reddy@dhhs.nc.gov
Agency: DAAS
Position Title: Data Specialist
Phone Number: 919-835-3442
Office Address: 693 Palmer Drive, Raleigh, NC 27699-2101
County: Wake (092)

ARMS User Role Provider Administrator/User – choose Provider(s) below

Region Needed:

Provider(s) Needed:
- F001 Legal Services of Southern Piedmont
- G040 Alamance Co Meals On Wheels
- K095 Legal Aid of NC-Region K
- M065 Legal Aid of NC-Fayetteville
- P026 Legal Aid of NC-Wilmington

County/Counties Needed:

Director/Coordinator’s Name: Linda Owens
Director/Coordinator’s Email: linda.owens@dhhs.nc.gov

Change User Request
3. The third e-mail is sent to DAAS Staff. The information in this e-mail is used to create, change, update and or remove the User Account.

```
ARMS User ID: 4977
Submission Date & Time: Friday, September 30, 2016 - 9:14 am

User Type: Change User
WIRM Account Name: swarna.reddy

First Name: Swarna
Middle Initial: D
Last Name: Reddy
Email: swarna.reddy@dhhs.nc.gov
Agency: DAAS
Position Title: Data Specialist
Phone Number: 919-855-3442
Office Address: 693 Palmer Drive, Raleigh NC 27699-2101
County: Wake (092)

ARMS User Role: Provider Administrator/User – choose Provider(s) below

Extended Attributes Needed:

Region:

Provider(s):
- F001 Legal Services of Southern Piedmont
- G040 Alamance Co Meals On Wheels
- K095 Legal Aid of NC-Region K
- M065 Legal Aid of NC-Fayetteville
- P026 Legal Aid of NC-Wilmington

County/Counties:

Director/Coordinator’s Name: Linda Owens
Director/Coordinator’s Email: linda.owens@dhhs.nc.gov
```

E-mail Sent to DAAS Staff
Appendix C - Consumer Directed Services ARMS Requirements

With GT Financial Services serving as fiscal intermediary for Consumer Directed Services (CDS) some unique challenges arose with reporting. A new procedure for compiling clients and reimbursements in ARMS was created to reduce duplication of effort and increase fiscal transparency and ease of reporting.

There are four main types of data entry in ARMS for Consumer Directed Services (CDS) Provider Agencies:

1. Client information
   - Client demographics
   - Assessment information

2. Units for services received

3. Non-unit based reimbursement requests

4. Consumer contributions

**CDS Reporting Procedures**

Duties will be split between GT Financial and Local Agency

The illustration below displays the local agency, Yancey County Committee on Aging (D060), home screen when they login into ARMS. The local agency (D060) is given access to their agency as well and access to GT Financial (D160).

<table>
<thead>
<tr>
<th>Code</th>
<th>Provider</th>
<th>Status</th>
<th>Address</th>
<th>City</th>
<th>Details</th>
<th>Clients</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>D060</td>
<td>YANCEY CO COMMITTEE ON AGING</td>
<td>A</td>
<td>PO BOX 546</td>
<td>BURNSVILLE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D160</td>
<td>GT FINANCIAL SERVICES-YANCEY</td>
<td>A</td>
<td>113 N MONROE ST</td>
<td>STURGIS</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Local Agency Home Screen
GT Financial will have a unique provider code for each county it serves. The home screen for GT Financial is illustrated below. ARMS Provider User Access is given to person(s) identified by GT Financial to access each agency with one login.

A budget for CDS services 501 and 503 will be created in ARMS under GT Financial Provider Code. In ARMS, GT Financial can key units of services for these two service codes and report any contributions. These budgets are set up in ARMS by the Area Agency on Aging (Region) for the county by service.

GT Financial cannot change budgets in ARMS. GT Financial shall submit budget revisions for their budgets to the Area Agency on Aging (Region). In the illustration above, request for budget revisions must be sent to High County COG, which is Region D.

Budgets are set up in ARMS at the beginning of the State Fiscal Year, but with ARMS processes being a month behind; August 1 is when Area Agencies can key new budgets for the year. Provider Agencies are not allowed to add services to new clients or key units of services until the Area Agency have set the budgets up in ARMS. If budgets are not set up by 10th calendar day of the month, provider agencies should call or e-mail the Area Agency of that county.

The local agency can only assign these two budget services for clients of GT Financial as shown below.
Allowable Services

A budget for all other Consumer Directed service codes, 500, 502, 504, 505, 506, and 507 will be set up under the Provider Code of local provider agency.

Clients

The local agency will be responsible for all client entry. This includes setting up new client in ARMS, completing assessment information and adding client to SRW based on service. Therefore, the local agency has full access to GT Financial.

<table>
<thead>
<tr>
<th>Code</th>
<th>Provider</th>
<th>Status</th>
<th>Address</th>
<th>City</th>
<th>Details</th>
<th>Clients</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>D060</td>
<td>YANCEY CO COMMITTEE ON AGING</td>
<td>A</td>
<td>PO BOX 546</td>
<td>BURNSVILLE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D160</td>
<td>GT FINANCIAL SERVICES-YANCEY</td>
<td>A</td>
<td>113 N MONROE ST</td>
<td>STURGIS</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Local Agency Home Screen

Local Agency will log into ARMS, click on clients link next to GT Financial Service Code. This will allow local agencies to add clients to GT Financial and assign contracted service(s).

Provider Client List

<table>
<thead>
<tr>
<th>SSN4</th>
<th>Last Name</th>
<th>First Name</th>
<th>Sex</th>
<th>Date Of Birth</th>
<th>Provider Client Status</th>
<th>Registration Date</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>0000</td>
<td>CROUSE</td>
<td>ELVIRA</td>
<td>F</td>
<td></td>
<td>Active</td>
<td>11/28/2007</td>
<td></td>
</tr>
<tr>
<td>0000</td>
<td>EDWARDS</td>
<td>ANNA</td>
<td>F</td>
<td></td>
<td>Active</td>
<td>5/1/2012</td>
<td></td>
</tr>
<tr>
<td>2000</td>
<td>MILLER</td>
<td>EDNA</td>
<td>F</td>
<td></td>
<td>Active</td>
<td>5/10/2011</td>
<td></td>
</tr>
</tbody>
</table>
Local agency will set up Site/Route/Worker (SRW) Codes for budgeted services and add clients to Service Totals data entry screen to key units of services. Refer to ARMS Provider User Manual, pages 54-58. This manual can be found on the ARMS Support Website at www.ncdhhs.gov/aging/arms/manual/ARMS_ProviderUser.pdf.

**Responsibilities**

Local Agency responsible for entering units and data for service codes:

1. 500 – Care Advisor
2. 502 – Adult day health
3. 504 – Personal care supplies, etc.
4. 505 – Home delivered meals
5. 506 – Emergency Response Equipment
6. 507 – Medical Adaptive Equipment

GT Financial responsible for entering units and data for service codes:

1. 501 – Personal Assistant
2. 503 – Financial Management Services

**Implementation (Start-up)**

1. AAA must request a separate provider code for GT Financial for each county where they provide financial management services (FMS). GT Financial name should be “GT Financial-County Name.” Example: GT Financial-Alleghany.

2. DAAS ARMS Staff will assign a unique Provider Code and register the Provider in ARMS. DAAS ARMS Staff will inform the AAA of the new Provider Code.

3. AAA must have local provider complete separate 732 forms for the budget of CDS units of service for service codes 501 and 503 to be entered to ARMS by GT Financial and for the local provider agency to enter those units service for all other service codes.

4. AAA must request ARMS Provider User access for GT Financial designated personnel to enter units for service codes 501 and 503. The ARMS User Request Form must be submitted via link in ARMS from the AAA and not from GT Financial. (revised 1/25/2018)
5. GT Financial and/or the Local Agency will not be able to access this new provider code until a budget has been set up in ARMS by the AAA and the new provider code added to their login.

6. Local service provider should have ARMS access to all CDS service codes for purposes of monitoring and oversight of all funds budgeted for CDS.

Service Codes for Funding Plan

- **Service Code 503** has a set unit rate of $75.00

- Each client will receive **1 unit** of code 503 the **first month** they receive service. This unit will cover the costs associated with setting up a new client and employee.

- Each client will receive **one unit** every month for monthly payroll services provided by GT Financial

- (Note- This means that the very first month of service by GT, a client will receive two units for 503. Every month after they will receive only one unit)

- **Service code 501** should initially be set up with unit rate of $10.87 (per DAAS).

- Twice a year (December 30 and June 30, prior to yearend closeout), GT will send the local agency a breakdown of actual costs for the Personal Assistant code for the preceding six month period.
  - Agency will then need to calculate the updated unit rate. They will take the **total actual costs** and divide that by the number of units reported to ARMS year to date.
  - Agency will complete a 732r with new unit rate for service code 501 and submit to AAA for ARMS entry. GT Financial will be advised of the new reimbursement rate for service code 501 by the AAA.
  - The new unit rate will apply to all units reported for the year to date and ARMS will adjust the reimbursement rate in the following month’s payment.
7. AAA should request 40% of state funds for HCCBG 501 budget for GT Financial from DAAS before service begins. At least 30 days is recommended.

- Once signed HCCBG contract is received by AAA, AAA will release advance to local provider.

- Note- Provider can agree to pay GT Financial the 40% advance before they receive payment from the AAA (in the case of a hold up in HCCBG contract). GT Financial will not be able to start services until advance is received

**Monthly Reimbursement**

ZGA-370 report: This report shows service specific reimbursements by service codes in each county and serves as a monthly invoice of services provided by both GT Financial and the local provider agency.

![Sample ZGA-370 Reimbursement Report](image)

To calculate amount to be paid each month, the AAA will need to:

1. Add together the “total reimbursement” columns for code 501 and 503.

2. Take that total and divide it by 0.9. The new amount will be the total reimbursement to be paid to GT that month. (*note- The reimbursement amount on the ZGA report is 90% of expenditures reported. The 10% local match is provided from local resources and not GT Financial)

3. CDS reimbursements other than service codes 501 and 503 will be remitted to the local agency for the services rendered by the agency or for payment to a contracted local provider.

NOTE: The AAA handles funds for the CDS program per established procedures of the Region for paying providers of HCCBG funded services.
Appendix D – Provider Agency Form – DAAS-150

<table>
<thead>
<tr>
<th>1. TYPE OF INFORMATION</th>
<th>2. DATE</th>
<th>3. REGION</th>
<th>4. PROVIDER CODE</th>
<th>5. CONTRACT YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>![Checkbox] 1 NEW</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>![Checkbox] 2 CHANGE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. AGENCY NAME</th>
<th>7. TELEPHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ext</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. AGENCY ADDRESS</th>
<th>FAX NUMBER</th>
<th>(optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9. CONTACT PERSON(S) FOR AGING SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME</td>
</tr>
<tr>
<td>NAME</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10. TYPE AGENCY</th>
<th>11. TYPE SERVICES PROVIDED</th>
</tr>
</thead>
<tbody>
<tr>
<td>![Checkbox] 1 Non-Profit</td>
<td>Supportive</td>
</tr>
<tr>
<td>![Checkbox] 2 Profit</td>
<td>Nutrition-Congregate</td>
</tr>
<tr>
<td>![Checkbox] 3 Public</td>
<td>Nutrition-Home Delivered</td>
</tr>
<tr>
<td>![Checkbox] 4 *Minority</td>
<td></td>
</tr>
</tbody>
</table>

### FOR NUTRITION PROVIDERS ONLY

12. Providers of Congregate Nutrition Service, only - indicate the number of facilities by type:  
<table>
<thead>
<tr>
<th>Senior Center</th>
<th>Operating School</th>
<th>Restaurant</th>
<th>Community Center</th>
<th>Religious</th>
<th>Public or Low Rent Housing</th>
<th>All Others</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

13. CONGREGATE - NUMBER OF DAYS SERVING  
| 7 | 6 | 5 | 4 | 3 | 2 | 1 |

14. Serving More than One (1) Meal Per Day  
| Yes | No |

15. HOME DELIVERED MEALS - NUMBER OF DAYS DELIVERING  
| 7 | 6 | 5 | 4 | 3 | 2 | 1 |

16. Serving More than One (1) Meal Per Day  
| Yes | No |

*Minority Provider - An organization or business concern that is: (a) at least 51 percent owned by one or more individuals who are either an African American, Hispanic origin, American Indian/Native Alaskan/Native Hawaiian, Asian American/Pacific Islander minority, or a publicly owned business having at least 51 percent of its stock owned by one or more minority individuals (or is governed by a board consisting of at least 51% minority individuals in the case of a private non-profit); and (b) has its management and daily business controlled by one or more minority individuals.

NOTE: This form is not applicable to subcontractors of provider agencies.

DAAS-150 (Rev. 2/6/2007)
FORMS INSTRUCTIONS

PROVIDER AGENCY INFORMATION DAAS-150

A. PURPOSE

Provider Agency information is collected each year and/or updated as needed in the ARMS system. This information must exist in ARMS before provider budgets or contract segments can be setup in ARMS and before service unit, consumer contributions, and non-unit reimbursement data, can process for reimbursement.

B. GENERAL INSTRUCTIONS

1. This form is completed for new aging service providers or Department of Social Services (DSS) providing services under Option B. The local service provider must have a contract with the AAA. This form is not applicable to subcontractors.

2. All new forms must be sent to the Division of Aging and Adult Services (DAAS). DAAS will enter the information in the ARMS system.

3. DSS should send the form to DAAS and maintain a copy for their files, if they are providing services under Option B.

C. SPECIFIC INSTRUCTIONS FOR EACH ITEM

1. TYPE OF INFORMATION: Indicate what action is being taken with this form. Check one item only. REQUIRED
   a. New - Check this item the first time this form is completed each contract year
   b. Change - Check this item when information which was previously submitted is being changed.

2. DATE: Enter the date the form is being completed. Enter a two (2) digit number to reflect the month and days. Precede one (1) digit months and days with a zero (0). Enter the four (4) digit year. REQUIRED

3. REGION: Enter the one (1) digit alpha or numeric character which identifies the region. REQUIRED

4. PROVIDER CODE: Leave the four (4) digit Provider Code field blank when submitting new information. The State ARMS Coordinator will assign a provider code. A provider code for a DSS will be identical to the county code with the region code preceding (example: A022). REQUIRED

5. CONTRACT YEAR: Enter the four (4) digit fiscal year. REQUIRED
6. AGENCY NAME: Enter the complete Agency Name. Spaces and dashes are allowed. If adequate spaces are not available, enter as much of the name as possible. Enter no more than one (1) letter per space. REQUIRED for new forms.

7. TELEPHONE: Enter the agency telephone number, include area code. REQUIRED
EXTENSION: OPTIONAL
FAX NUMBER: Enter the agency FAX number, include area code. OPTIONAL

8. AGENCY ADDRESS: Enter the Agency's mailing address. Spaces and dashes are allowed. If adequate spaces are not available, enter as much of the address as possible. Enter no more than one (1) letter per space. Address, City, State, and the first five (5) digits of the zip code are REQUIRED.

9. CONTACT PERSON(S): Enter the first and last name and title of an agency contact person to contact regarding the program and services. At least one contact person, title and a valid e-mail address REQUIRED.

10. TYPE AGENCY: Check the type of agency which is applicable (Non-Profit, Profit, Public, Minority). An agency cannot be Non-Profit and Profit, or Public and Profit, etc. But an agency can be Non-Profit and Minority or Profit and Minority. Those not applicable should be left blank. At least one agency type is REQUIRED.

11. TYPE SERVICES PROVIDED: Check all types of services provided by the agency which are funded by DAAS administered funds. If your agency provides supportive services only, do not complete the remainder of the form. All items can be checked as appropriate. At least one service type is REQUIRED.

12. NUMBER OF FACILITIES BY TYPE: The Number of Facilities by Type for providers of Congregate Nutrition ONLY. Indicate the number of facilities your agency operates by type. Those not applicable should be left blank. At least one (1) type must have a number greater than zero (0).

13. CONGREGATE - NUMBER OF DAYS SERVING: Indicate the number of days serving per-week. This is REQUIRED for providers of Congregate Nutrition.

14. SERVING MORE THAN ONE MEAL PER DAY: Indicate whether the agency serves more than one (1) meal per-day. Check YES if the agency habitually serves more than one (1) meal per-day and NO if it does not. This is REQUIRED for providers of Congregate Nutrition.

15. HOME DELIVERED MEALS - NUMBER OF DAYS DELIVERING: Indicate the number of days the agency normally provides Home Delivered Meals per-week. This is REQUIRED for providers of Home Delivered Meals.

16. DELIVERING MORE THAN ONE MEAL PER DAY: Indicate if more than one (1) Home Delivered Meal is delivered per day per person by checking YES or NO. This is REQUIRED for providers of Home Delivered Meals.

Appendix E – Monitoring


The Division of Aging and Adult Services (DAAS) is dedicated to monitoring and assessing aging services and programs funding through the Older Americans Act and State Allocations.

Monitoring includes a periodic in-depth review of programs and the day to day oversight and guidance of programs. Through a strong monitoring process, the DAAS uses this monitoring process to work toward growth of quality programs and services serving older adults and adults with disabilities and their caregivers.

Tools

1. DAAS Compliance Monitoring Tools
2. DAAS Fiscal Monitoring Tools
3. DAAS Programmatic Monitoring Tools
4. DAAS Self-Assessment Guide for Monitoring of Area Agencies on Aging
5. DAAS Subcontractor Performance Evaluation Tools
6. DAAS Other Monitoring Tools

Policies/Procedures/Service Standards

1. Consumer Contribution Policy and Procedures
2. Division of Aging and Adult Services Monitoring Policy
3. DHHS Monitoring Policy
5. Service Standards
Appendix F – Documents and/or Forms

1. ARMS Support Web page

2. Administrative Letters


4. Reimbursement Manual


6. County Budget Instructions Documents
   Home and Community Care Block Grant (HCCBG)