

Seniors Transportation Grant Policy

1.005

Section: 1.0 Council
Authority: Chief Administrative Officer

Statement

The Municipal District of Bonnyville (M.D.) will provide certain financial relief to senior citizens for required medical travel.

Purpose

To financially assist senior citizen's who are required to travel for medical reasons.

Definitions

For the purposes of this policy:

- (1) "CAO" means the Chief Administrative Officer for the M.D.;
- (2) "FCSS" means Bonnyville and District Family and Community Support Services;
- (3) "M.D." means the Municipal District of Bonnyville;
- (4) "Declaration" means a signed statement proclaiming that all information provided by the applicant is true and valid.

Policy

Senior citizens may be eligible to receive a monetary amount as set by Council, per kilometer, as described below, per calendar year for approved medically necessary travel requirements.

(1) Eligibility to a Maximum of \$600.00

To be eligible for a Seniors Transportation Grant, to a maximum of \$600.00, claimants must prove that they are 65 years of age or older. In addition, claimants must complete the application form provided. The application will include:

- (a) a declaration confirming that their primary residence is within the boundaries of the M.D.;
- (b) a declaration confirming:
 - (i) the name of the referring Doctor;
 - (ii) the name of the Specialist or Service Provider to whom the claimant has been referred.

Mileage is paid for trips of 150 kilometers (one way) outside the "Municipal Boundaries". This means the official boundaries of the M.D., but also includes Cold Lake, Bonnyville and Glendon.

When a medical product(s), service(s) or any other medical requirement(s) is available within the "Municipal Boundaries", but the senior has travelled elsewhere for the medical requirement, this travel will not be considered to be medically required travel. Under this condition, the senior is not eligible for reimbursement under the Seniors Transportation Grant.

All claims must be submitted within 6 months from the date of the appointment.

(2) Eligibility to a Maximum of \$1200.00

To be eligible for a Seniors Transportation Grant, to a maximum of \$1200.00, claimants must:

- (a) meet all the eligibility requirements outlined in section “1” of this policy;
- (b) provide proof of qualification for Canada Pension’s Guaranteed Income Supplement (GIS).

(3) Reimbursement

The M.D. will transfer sufficient funds to an FCSS bank account to be used solely for the Seniors Transportation Grant.

- (a) Cheques are to be issued by the FCSS.
- (b) Claims will be processed on a monthly basis and should be available for distribution within 6 weeks.
- (c) Records of these payments will be retained by the FCSS.
- (d) Cheques will require the signature of the FCSS Director and the M.D. CAO or designate.
- (e) The FCSS will notify the M.D. Municipal Administrator when the balance on the account is below \$500.00.
- (f) A review of any or all records under the care and control of the FCSS regarding transactions of the Seniors Transportation Grant may be carried out as deemed necessary by the M.D.

(4) Appeals

Applicants may appeal decisions that deny coverage to the M.D.’s CAO or designate.

Policy Review

Within five (5) years from date adopted / amended / reviewed.

For administrative use only:

Previous Policy Number: (prior to July 24, 2019)	10.11.04
Related Documentation: (plans, bylaws, policies, procedures, etc.)	Attachment A: Seniors Transportation Grant Application



Seniors Transportation Grant Policy: ATTACHMENT A

1.005

Seniors Transportation Grant Application Form



Seniors Transportation Grant Application

To qualify for this grant you must normally reside in the Municipal District of Bonnyville, and be over 65 years of age.

RETURN APPLICATION TO BONNYVILLE & DISTRICT FCSS

(4714 48th Street – mailing address Bag 1006 Bonnyville, AB T9N 2J7)

Name: _____ Date of Birth: _____

Mailing Address: _____

Phone #: _____ Tax Roll #: _____

I am receiving the GIS (Guaranteed Income Supplement) Yes No

If yes, I must provide verification to FCSS with initial claim and on an annual basis.

Referring Medical Doctor: _____ Date of Visit: _____

Purpose & Location: _____

By Car (Kms – Round Trip): _____ By Bus (attach receipt) : _____

Signature of Attending Doctor or Health Care Provider Date

I certify that, to the best of my knowledge, all of the information indicated on this application, is true, correct, and made in good faith. I understand that a false claim on this application constitutes fraud.

Applicant's Signature Date

FOR OFFICE USE ONLY

Cheque Number _____ Cheque Amount: _____

Pick-Up Signature: _____ Issued By: _____

MD of Bonnyville Transportation Grant

1. The MD of Bonnyville offers a grant to seniors who are over 65 and whose ***primary residence is in the MD of Bonnyville***. Only claims for medically necessary appointments referred by a Medical Doctor will be accepted.

A) Eligibility to a Maximum of \$600 per calendar year

To be eligible for the Senior's Transportation Grant, to a maximum of \$600 per calendar year, claimants must complete the application form and sign the declaration confirming:

- they are 65 years of age or older and
- that their primary residence is within the boundaries of the MD of Bonnyville

B) Eligibility to a Maximum of \$1200 per calendar year

To be eligible for the Senior's Transportation Grant, to a maximum of \$1200 per calendar year, claimants must complete the application form and sign the declaration confirming:

- they are 65 years of age or older,
- that their primary residence is within the boundaries of the MD of Bonnyville and
- that the claimant is receiving the Guaranteed Income Supplement (Box #21 on T4(OAS))

2. When a medical treatment is available within the boundaries of the MD of Bonnyville, Cold Lake, Bonnyville or Glendon, but the senior has elected to travel elsewhere for this treatment, such travel will not be considered eligible for reimbursement under the Senior's Transportation Grant.
3. Applying the above principal the following services are to be excluded. Note this list is not exhaustive and other services may be denied coverage based on the above principal.
 - a. basic dental services (oral surgery referred by Medical Doctor will be accepted),
 - b. denture fittings
 - c. hearing aid services
 - d. medical equipment purchases or pick up
 - e. cosmetic surgery
 - f. chiropractic treatments (physio-therapy with Medical Doctor referral is acceptable)
 - g. holistic / alternative health services including massage (Note: therapeutic massage provided within the scope of an Alberta Health Services treatment plan under the supervision of a Medical Doctor is acceptable).
 - h. Optician – Eye exam for prescription lenses
4. Applicants must provide their tax roll number on the application form.
5. Completed forms may be dropped off at the Bonnyville and District FCSS office at the Parent Child Centre or mailed to: Bonnyville & District FCSS Bag 1006, Bonnyville AB T9N 2J7.
6. Claims must be submitted within 6 months of the date of the appointment.
7. Applicants may appeal the decision to deny coverage to the M.D. of Bonnyville C.A.O. or his/her designate.
8. Note: claims are processed on a monthly basis and cheques may take up to six weeks before they are ready for pick up.

Call (780) 826 2120 for further information.