Medical Transportation

The purpose of these service standards is to outline the elements and expectations all Ryan White service providers are to follow when implementing a specific service category. Service Standards define the minimal acceptable levels of quality in service delivery and to ensure that a uniformity of service exists in the Washington, DC Eligible Metropolitan Area (EMA) such that customers of this service category receive the same quality of service regardless of where or by whom the service is provided. Service Standards are essential in defining and ensuring that consistent quality care is offered to all customers and will be used as contract requirements, in program monitoring, and in quality management.

I. SERVICE CATEGORY DEFINITION

The goal of Medical Transportation is to provide non-emergency transportation services to eligible customers in the Washington, DC Eligible Metropolitan Area (EMA) that enables them to access or be retained in core medical and support services.

Medical transportation may be provided through:
• Contracts with providers of transportation services
• Mileage reimbursement (through a non-cash system) that enables customers to travel to needed medical or other support services, but should not in any case exceed the established rates for federal Programs (Federal Joint Travel Regulations provide further guidance on this subject)
• Purchase or lease of organizational vehicles for customer transportation programs, provided the recipient receives prior approval for the purchase of a vehicle
• Organization and use of volunteer drivers (through programs with insurance and other liability issues specifically addressed)
• HIPAA-compliant rideshare, voucher, or token systems

Subrecipient shall not bill the Ryan White program for the following unallowable costs:
• Direct cash payments or cash reimbursements to customers
• Direct maintenance expenses (tires, repairs, etc.) of a privately-owned vehicle
• Any other costs associated with a privately-owned vehicle such as lease, loan payments, insurance, license, or registration fees
The Ryan White HIV/AIDS Program has the following eligibility criteria: residency, financial, and medical. HRSA requires Ryan White customers to maintain proof of eligibility annually. Supporting documentation is required to demonstrate customer eligibility for Ryan White Services.

A. INITIAL ELIGIBILITY DETERMINATION

1. **HIV-positive status**: written documentation from a medical provider or laboratory reports denoting viral load.

2. **Residency**: The following are acceptable methods of meeting the burden for residency:
   - Current lease or mortgage statement
   - Deed settlement agreement
   - Current driver’s license
   - Current voter registration card
   - Current notice of decision from Medicaid
   - Fuel/utility bill (past 90 days)
   - Property tax bill or statement (past 60 days)
   - Rent receipt (past 90 days)
   - Pay stubs or bank statement with the name and address of the applicant (past 30 days)
   - Letter from another government agency addressed to applicant
   - Active (unexpired) homeowner’s or renter’s insurance policy
   - DC Healthcare Alliance Proof of DC Residency form
   - If homeless, a written statement from case manager, facility or letter from landlord that customer is resident

3. **Income**: Customer income may not exceed 500% of the Federal Poverty Level (FPL). Income sources should be reported by the applicant and any household members for whom applicants have legal responsibility. For each income source the applicant must indicate the gross amount, how often the income is received, and whether it is the applicant’s or a household member’s from each source.
   The following are acceptable forms of proof of income:
   - Pay stubs for the past 30 days. The pay stub must show the year to date earnings, hours worked, all deductions, and the dates covered by the paystub
   - A letter from the employer showing gross pay for the past 30 days, along with a copy of the most recent income tax return
   - Business records for 3 months prior to application, indicating type of business, gross income, net income, and most recent year’s individual income tax return. A statement from the applicant projecting current annual income must be included
   - Copy of the tenant’s lease showing the customer as the landlord and a copy of their most recent income tax return
   - SSD/SSI award letters, unemployment checks, social security checks, pension checks, etc. from the past 30 days
   - Zero income attestation form and/or a letter from a supporting friend or family member stating how they support the applicant
B INTAKE

To establish a care relationship, the customer intake must include the collection of the following demographic information:

1. Date of intake
2. Name and signature of person completing intake
3. Customer name, address and phone number
4. Referral source, if appropriate
5. Language(s) spoken and/or preferred language of communication
6. Literacy level (customer self-report)
7. Emergency contact information
8. Communication method to be used for follow-up
9. Demographics (sex at birth/current gender/date of birth/race/ethnic origin)
10. Veteran status
11. Any other data required for the CareWare system
12. Any other service-specific data
13. Documented explanation about the services available within the provider agency and within the Ryan White Program

C. MAINTENANCE OF ELIGIBILITY

To maintain eligibility for Ryan White services, providers must conduct annual eligibility confirmations to assess if the customer’s income and/or residency status has changed. RWHAP providers are permitted to accept a customer’s self-attestation of “no change” when confirming eligibility, however, self-attestation could be used every other annual confirmation and not be used in two consecutive years.

III. KEY SERVICE COMPONENTS & ACTIVITIES

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<tr>
<th>TRANSPORTATION ASSESSMENT</th>
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<td><strong>Standard</strong></td>
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<td>Subrecipient shall conduct an initial transportation assessment for all persons receiving transportation services, except those receiving one-time urgent van transportation, prior to the initiation of services. This may be conducted as part of any Ryan White medical and/or support service assessment.</td>
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<td>Subrecipient shall determine whether the customer has known upcoming health care appointments for which there is no other source of transportation.</td>
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<td>Subrecipient shall obtain the necessary information to determine the mode of transportation that best meets the customer’s needs including:</td>
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<td>a. Customer’s access to other transportation resources, including but not limited to, transportation provided by friends and family, skilled nursing facility, insurance, medical provider, residential treatment program</td>
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<td>b. Customer’s ability to afford gas</td>
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<td>c. Customer’s ability to operate a vehicle</td>
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<td>d. Customer’s ability to navigate public transportation system</td>
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<td>e. Accessibility of health care appointments by public transportation system</td>
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SERVICE STANDARDS FOR MEDICAL TRANSPORTATION, HAHSTA/DC HEALTH
| f. Customer’s ability to utilize State/County/Jurisdictional specialized access services. |
| g. Customer eligibility for reduced fare transportation services, including Senior/Disabled bus/train passes and other fare coupons. |

**TRANSPORTATION MANAGEMENT**

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<th>Standard</th>
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<td>Once customer intake and assessment has been conducted, the subrecipient may provide medical transportation services to the customer. Service management shall be consistent with the following principles: a. Medical transportation services must be provided in conjunction with a known upcoming health care appointment. b. Medical transportation shall be provided to customers who have cars, if needed.</td>
<td>Documentation of transportation service in customer’s record signed and dated by customer and agency staff CW data entry reflecting provision of medical transportation service</td>
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<td>Subrecipient shall ensure that agency-operated vehicles are maintained in accordance with the vehicle owner’s manual and conduct a weekly pre-trip inspection of vehicle</td>
<td>Documentation of vehicle maintenance and inspections on file</td>
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<td>Subrecipient shall ensure safe transportation by: a. Verifying that all drivers, including employees, contractor contractor’s employees and volunteers, meet the minimum age requirements of the jurisdiction where they are licensed. b. Verifying that all drivers, including employees, contractor, contractor’s employees and volunteers, are licensed to operate the specific vehicle used in transporting clients in accordance licensing jurisdiction’s requirements. c. Ensuring that all vehicles used to transport customers have valid State registrations and State inspections d. Ensuring that all vehicles used to transport customers have at least the minimum level of liability insurance appropriate for the type of vehicle, as defined the state in which they are operated e. Maintaining (and updating as necessary) agency policies and procedures regarding emergencies, vehicle crashes involving customers and notification to appropriate authorities</td>
<td>Copies of vehicle operator licenses on file Copies of jurisdictional vehicle registrations and inspections Copies of vehicle insurance policies on file Agency accident policy on file</td>
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<td>NOTE: The above (a. – e.) do not apply to RideShare services.</td>
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<td>Subrecipient shall ensure that services are provided through one of the following methods: a. A contract or some other local procurement mechanism with a provider of transportation services b. A voucher or token system that allows for tracking the distribution of the vouchers or tokens c. A system of mileage reimbursement that does not exceed the federal per-mile reimbursement rates d. A system of volunteer drivers, where insurance and other liability issues are addressed</td>
<td>Agency medical transportation policy on file Agency milage/voucher/token logs Leasing contract and/or receipt(s) for vehicle purchase on file Agency rideshare account on file</td>
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SERVICE STANDARDS FOR MEDICAL TRANSPORTATION, HAHSTA/DC HEALTH
e. Purchase or lease of organizational vehicles for customer transportation, with prior approval from HRSA/HAB for the purchase
f. Rideshare service

IV. PERSONNEL QUALIFICATIONS

Each agency is responsible for establishing comprehensive job descriptions that outline the duties and responsibilities for each of the positions proposed in their program. All staff must be given and will sign a written job description with specific minimum requirements for their position. Agencies are responsible for providing staff with supervision and training to develop capacities needed for effective job performance. Agencies are also responsible for maintaining documentation of the appropriate education, qualifications, training, and experience in personnel files.

Staff conducting medical transportation assessments shall have training and experience with general HIV/AIDS related issues and concerns. At a minimum, such staff shall have completed an initial educational session in any of the following areas. Education can include round table discussion, training, one-on-one educational session, in-service, or literature review. Topics may include the following:

1. HIV/AIDS transmission
2. Psychosocial issues related to HIV/AIDS
3. Cultural issues related to communities affected by HIV/AIDS

DRIVER REQUIREMENTS (Agency employees only)

Licensure: All medical transportation drivers must hold necessary State licenses for the functions they perform. Drivers operating commercial vehicles that are designed, used, or maintained for carrying more than ten (10) passengers, including the driver, shall hold a valid commercial State driver’s license with a passenger endorsement, as required.

Annual proof from Department of Motor Vehicles of a safe driving record, which shall include history of tickets, DUI/DWI, or other traffic violations. More than three (3) moving violations within the past year will disqualify the driver; any conviction of DUI/DWI or reckless driving will disqualify the driver.

Training: Drivers shall attend quarterly safety reviews at minimum and any additional trainings as required by applicable federal and state regulations. Topics may include the following:

1. Emergency equipment
2. Defensive driving
3. Cardiopulmonary Resuscitation (CPR) and first aid
4. Pre-trip inspections
5. Ongoing education/training in HIV-related subject
6. Agency training on confidentiality, customer rights, and the agency’s grievance procedure
7. Annual in-services on emergency procedures (e.g., collision, vehicle breakdown, customer becoming unconscious, etc.)
IV. CLINICAL QUALITY MANAGEMENT

A continuous Clinical Quality Management Program for HIV patient care. Please refer to Policy Clarification Notice (PCN) #15-02 (updated 09/01/2020).

V. APPROVAL & SIGNATURES

This service standard has been reviewed and approved on March 24, 2021. The next annual review is March 24, 2022.

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