Medical Transportation Policy

Policy Number: 100.02

Effective: March 15, 2015

I. Introduction

The Ryan White HIV/AIDS Treatment Extension Act of 2009 (the Act) provides direct financial assistance to eligible program areas, including the Cleveland Transitional Grant Area (TGA), to assist in developing and enhancing access to a comprehensive continuum of high-quality, community-based care for low-income, un/underinsured individuals living with HIV/AIDS (PLWHA). A comprehensive continuum of care includes 13 essential, direct medical services specified in law.

Ryan White funds may also be used to provide support services, such as Medical Transportation Services, which are needed by PLWHA in order to achieve optimal HIV medical outcomes. Agencies funded for medical transportation services must document an explicit connection between services and a client's HIV-related clinical status. Program funds must support only the HIV-related needs of clients.

II. Service Definition

Medical Transportation services are conveyance services provided directly or through a voucher or token system to an eligible Ryan White client so that he or she may access health care services.

III. Client Eligibility

Medical transportation services may be accessed after client eligibility is verified and documented as outlined in the Cleveland TGA eligibility requirements. To be eligible for medical transportation services, client income must be at or below 300% of the federal poverty level.

Ryan White is the payer of last resort and should only be used when a client in need of transportation assistance is not eligible for this service through any other funding source.

IV. Allowable Purpose

Funds may be used to provide transportation services for an eligible individual to access HIV-related health services, including services needed to maintain the client in HIV/AIDS medical care.

V. Methods of Service Delivery

Medical transportation must be provided in the most cost-effective manner that addresses the client's medical condition and timeliness concerns.

a. Public Transportation

Agencies may distribute bus passes to clients to access documented appointments for health care services. Daily and weekly bus passes must be issued in the most cost-effective manner. Public transportation assistance will be administered in one of the following ways: Agencies may be reimbursed for bus passes purchased by the agency and issued to clients; or The grantee may choose to purchase and transfer Greater Cleveland Regional Transit Authority (GCRTA) bus passes to Cuyahoga County agencies. Bus passes transferred from the grantee to an agency become the responsibility of the agency for tracking, reporting, distribution and value of inventory.

Agencies must assist disabled clients (GCRTA definition) living in Cuyahoga County with the preparation and submission of an application to the GCRTA disability fare program. To ensure cost is not a barrier for

clients, Ryan White ID Vouchers issued by the grantee to agencies should be distributed to clients for submission with their application.

b. Fuel Cards/Mileage Reimbursement

Agencies may reimburse clients for documented mileage driven in order to access appointments for health care services. Mileage reimbursement rates may not exceed the standard mileage rate established annually by the Internal Revenue Service. Billed mileage may not exceed documented mileage.

Mileage reimbursement assistance will be administered in one of the following ways: Agencies may be reimbursed for fuel cards purchased by the agency and issued to clients; or The grantee may choose to purchase and transfer fuel cards to agencies. Fuel cards transferred from the grantee to an agency become the responsibility of the agency for tracking, reporting, distribution and value of inventory.

c. Parking

Agencies may issue parking passes to clients with appointments to access health care services on site.

d. Cab or Taxi

When no other means of transportation is available or appropriate, agencies may provide cab or taxi vouchers to clients in order to access documented appointments for health care services.

VI. Agency Documentation

Agencies must maintain organized client files that contain:

- a. *Medical Transportation Forms* for each service date, addressing the following documentation requirements:
 - 1. Transportation method used;
 - 2. Trip documentation, including mileage and addresses to and from named destination points for mileage reimbursement;
 - 3. Mileage reimbursement rates do not exceed the standard mileage rate established annually by the Internal Revenue Service; and
 - 4. The type of service accessed to help enable the client to remain in medical care.
- b. Verification and documentation of client eligibility, including screening for the availability of other sources of funding for medical transportation services;
- c. Assessment of client need, including how the most appropriate method of transportation assistance was determined; and
- d. Documentation that medical transportation services do not involve cash payments to clients.

VII. Agency Policies and Procedures

Agencies must develop written policies and procedures to ensure compliance with program requirements, including the administration of medical transportation services in a manner that assures that bus passes, ID vouchers and fuel cards cannot be used for anything other than allowable services, and that systems are in place to account for the distribution of bus passes, ID vouchers, and fuel cards.