

**INLAND EMPIRE HIV PLANNING COUNCIL STANDARDS OF CARE  
RIVERSIDE / SAN BERNARDINO TRANSITIONAL GRANT AREA  
RYAN WHITE HIV/AIDS PROGRAM**

**MEDICAL TRANSPORTATION SERVICES**

*This document offers a limited set of focused standards addressing key aspects specific to this service category. Other relevant standards, including the Common Standards, as well as other policies, recommendations and guidelines should be referenced in conjunction with this standard.*

**Purpose of Standards**

These service and care standards are prescribed by the Inland Empire HIV Planning Council (IEHPC). The purpose of these standards is to establish a minimum set of quality expectations to ensure uniformity of service funded by the Health Resources and Services Administration (HRSA) under the Ryan White HIV/AIDS Program legislation across the Riverside/San Bernardino Transitional Grant Area (R/SB TGA).

These standards are to be monitored and enforced by means of incorporation into service provision contracts managed by the Ryan White Program (RWP) Office on behalf of the IEHPC, as provided by the Ryan White HIV/AIDS Program legislation and HRSA policies, guidance, and other requirements.

**Definition of Services (HRSA)**

***Medical Transportation Services** include conveyance services provided, directly or through voucher, to a client so that he or she may access health care services.*

**I. Care and Treatment Goal(s)**

To enable access to health care or support services as deemed necessary by clinician and/or medical case manager to maintain/improve health outcomes.

**II. Service Goal**

To provide transportation services to necessary health care or support services for eligible individuals that also take into account the traveler's health-care needs. Transportation services may be provided routinely or on an emergency basis.

**A. Service Objectives**

1. To provide various modes of transportation to health care or support service appointments.
2. To provide a service that is safe, of high quality, and prompt.
3. To provide cost-effective transportation to health care or support service appointments.

**B. Description of Services**

*Service Components*

1. When appropriate, service provision plans must be made available for development of the client's Care Plan.
2. If a Care Plan is in place the Care Plan should be reviewed and incorporated into the delivery of Medical Transportation. If a client receiving Medical Transportation presents with additional service needs, these needs should be incorporated into the clients Care Plan, if they are ever in need of Medical Case management.
3. Provide the most economical means of transportation whenever possible.
4. Allowable modes of transportation service include:
  - a) Bus passes
  - b) Gasoline vouchers
  - c) Van trip
  - d) Urgent taxi trip (only when no other option is available)
5. Documentation must be maintained for all modes to verify that transportation funds were received by the client and were used to access necessary health care and support service appointments. For instance, the provision of gasoline vouchers requires a log with client signature and date indicating that the client received the gasoline voucher as well as a consumer travel record showing dates, location of service appointments and mileage. Travel records must be signed by a staff member at the destination-agency (medical or support service staff) to verify that the individual made it to the intended appointment.
6. No-cost, non-profit or volunteer transportation services should be used as often as possible. Agency representatives must identify such resources with clients prior to provision of other options.
7. Taxi services may be used, but should be considered last resort.

**C. Limitations**

1. Funds may not be used for client automobile maintenance or repairs or for tires.
2. Funds may not be used for ambulance service.
3. Funds may not be used to transport individuals outside the TGA except when needed services are unavailable within the TGA. Trips outside the TGA must be recommended by a physician, clinician, and a medical case manager, and authorized by the Ryan White Program Staff.
4. Funds may not be used to assist with participation in clinical trials.
5. Funds may not be used to transport individuals to Inland Empire HIV Planning Council meetings or other meetings not directly associated with maintaining/improving the individual's health care.
6. Maximum of up to \$40 per month, per client, upon proof of eligibility and supporting documentation.

**III. Service-Specific Staff Qualifications**

If staff is used to provide van transport, they must have a California Driver's License and the minimum required amount of Automobile Insurance as required by the law to transport clients. *Please refer to the Common Standards of Care for additional general staff qualification requirements.*

**IV. Exceptions and Urgent Need**

*Please refer to the Common Standards of Care for guidance concerning exceptions and Urgent Need.*

**V. Reportable Units of Service and Financial Eligibility**

*Please refer to the current service contract for a description of the unit of service and financial eligibility thresholds for each service category.*