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Owner: Dana James:
 21011004-Quality
 Assurance Coordinator
Policy Area: Wraparound (REACH,
 O'YEAH)- Vendor

References:

#029- Transportation Services

POLICY

It is the policy of Wraparound Milwaukee/Family Intervention Support Services (FISS) that an adult be present when children under the age of 12 are being transported. Escorts are adults age 18 or older who may include a parent, family member, foster parent, caregiver, legal guardian or other individual as authorized by the child and family team; paid Providers may not be used as escorts. The escort is to remain with the child from the child's pick-up location and stay with the child through arriving at the drop-off location.

NOTE: This policy utilizes the term "Care Coordinator", which applies to Wraparound and REACH Care Coordinators, FISS Case Managers and O-YEAH Transition Coordinators. The term "Youth" is used in this policy and applies to the enrollee in the program, whether a child, adolescent, or young adult.

PROCEDURE

A. Types of Transportation Arrangements that can be made

The Care Coordinator can access transportation services for enrollees/families through one or more of the four ways listed below. **Transportation Service reimbursement should be sought through the means identified in #1, #2, & #3 prior to seeking Transportation Services through #4.**

1. Care Coordination / Case Management Agency – Bus Tickets

The Care Coordinator can assist the enrollee/family with meeting the transportation needs of the enrollee/family by arranging for access to bus tickets and in some cases, bus passes.

2. Medicaid – Billable Transportation

When the enrollee's transportation needs can be covered under Medicaid, the Care Coordinator should contact Medical Transportation Management Inc. (MTM) to determine eligibility. If eligible, authorization **for these transportation services should not be entered on a Service Authorization Request (SAR)**. MTM website is www.mtm-inc.net/wisconsin/.

Transportation needs covered under Medicaid are limited to medical-related appointments, doctor appointments, dental/vision appointments, therapy appointments, transportation to Medicaid Day Treatment Programs and any other justifiable medical service.

A Medicaid billable transportation service can also be used for siblings/parents who have a physical disability or Medicaid diagnosis of SED. The Care Coordinator should contact MTM to determine eligibility.

When an enrollee is able to safely use an automobile, bus or taxi, and is not eligible for Medicaid Transportation through MTM, the Care Coordinator may authorize one of the options identified below.

3. **School Mandated Transportation**

A youth who is identified as having special education needs and in need of transportation to school or a Medicaid Day Treatment Program should have this identified and supported in their Individualized Educational Plan (IEP) and the Wraparound Plan of Care (POC)/Future's Plan. If it is supported in the youth's IEP, **the youth's school district is responsible** for the cost of transportation. If it is not on an IEP and the youth will be attending a Medicaid Day Treatment program, transportation should be arranged through MTM.

4. **Network Provider Transportation**

Transportation and Taxi services are also available through the Wraparound Milwaukee Provider Network. Additional information regarding the use of Wraparound Milwaukee Provider Network transportation services is below.

B. **Network Provider Transportation - Care Coordinator / Case Manager Responsibilities**

1. **Referrals**

It is the responsibility of the Care Coordinator to complete and fax a copy of the appropriate Transportation Referral Form to the Transportation Provider prior to the provision of services.

a. **Referral Forms and SAR Entry - Transportation Providers**

The "REFERRAL FOR TRANSPORTATION" form (*see Attachment 1*) available on the "FORMS" tab in Synthesis (*Wraparound Milwaukee's Information Management System*) is completed for enrollees/family members referred for services from Wraparound Milwaukee Provider Network Transportation Providers. The service recipient(s) is identified as the "Name of the Person to be Transported" on the referral form. The Care Coordinator must fax the completed form to the Provider Network Transportation service provider prior to the provision of service.

The Care Coordinator must also enter a Service Authorization Request (SAR) in Synthesis prior to the service being provided.

b. **Referral Forms and SAR Entry – American United Taxi**

The "REFERRAL FOR TRANSPORTATION-AMERICAB" (*see Attachment 2*) available on the "Forms" tab in Synthesis is completed for enrollees/family members referred for Taxi services. The Care Coordinator must fax the referral form to American United Taxi prior to the provision of services. The referral form also serves as the authorization for payment for American United Taxi. There is **NO NEED TO ENTER A SAR for services provided by American United Taxicab** as service costs vary for each ride and all Taxi service related data entry is completed by Wraparound Milwaukee Finance Staff.

2. **Service Cancellations**

If a transportation request needs to be canceled for any reason, **it is the responsibility of the Care Coordinator or designated Child & Family Team member** to notify the Transportation Provider regarding the cancellation. The call should be made as soon as the need to cancel becomes evident. This includes cancellation of "one time" and "repeat" rides. When canceling repeat taxi rides, the Care Coordinator must fax to American Taxi the original Referral form with "cancel all rides" written on the form.

3. **Changes in Enrollee/Service Recipient Contact Information**

The Care Coordinator is responsible for immediately notifying the Transportation/Taxi Provider of changes in the enrollee's status, address, and any changes related to the information on the Transportation Referral Form (such as contact persons names and numbers, etc.) including the names of contact persons at the clinics / facilities where the enrollee/service recipient is being transported for services. The Care Coordinator is also responsible for sharing Transportation/Taxi contact and ride schedule information with family members/custodians and service providers that will be required to interface with the Transportation Provider(s). This is important, as these contact persons will be responsible for monitoring the enrollee/family member's reception by the Transportation/Taxi service provider, including seeing the enrollees off, signing Transportation Provider trip verification logs and following up with Transportation Providers if they are running late.

4. **Pre-Authorization of Transportation Services - Extended Trips**

Transportation service authorizations for trips that extend beyond 25 miles from the pick-up location to the destination or where the pick-up location is more than 25 miles from outside the City of Milwaukee require pre-authorization by Wraparound Milwaukee Finance or Quality Assurance Department in advance of travel. Care Coordinators must submit the following information:

- Enrollee name
- Name(s) of the individual(s) to be transported and their relationship to the enrollee
- Explanation of need
- Total number of trips for the month
- Expected duration for the service to include start and end dates
- Pick-up address
- Destination address
- Transportation Provider name
- Approximate total travel distance
- Is individual eligible for transportation through Medicaid MTM

The Care Coordinator will be notified via email with the authorization decision. Authorization is for current month and through the next month. Trips beyond this time period must be resubmitted for an extension.

C. **Transportation Provider Responsibilities**

1. **Criminal History / Criminal Background Check**

All Transportation Providers must comply with the Background Check requirements outlined in the Wraparound Milwaukee Fee-for-Service Agreement and Caregiver Background Check Policy DHHS-001. This includes submitting driver background checks to the Wraparound Milwaukee Provider Network for review if the Department of Justice report shows any findings other than "no record found".

2. **Valid Drivers License and Driver's Abstract**

Transportation Providers must maintain copies of current valid Wisconsin driver's licenses for all drivers. A Driver's Abstract must be conducted on each potential driver to assure a clean driving record (*see reference for Vehicle/Driver Record Information Request*). The Transportation Provider should forward reports with significant adverse activity to the Wraparound Milwaukee Provider Network for review.

Drivers of vehicles that are designed to serve 16 or more passengers, including the driver, must have a Commercial Driver's License – Minimum Class C.

3. Insurance Coverage

Transportation Providers must comply with all insurance requirements identified in the Wraparound Milwaukee Fee-for-Service Agreement.

4. Vehicle Safety/Maintenance

A copy of a Vehicle Inspection Report for each transportation vehicle used by a Transportation Provider is to be submitted during the application process. As vehicles are added to the fleet, an Inspection Report must be obtained prior to using the vehicle in transporting enrollees/families. All vehicles inspected must have a sticker with the current year verifying the inspection. Vehicle inspection reports are to be made available to Wraparound Milwaukee upon request.

All vehicles used to provide services through the Wraparound Milwaukee Provider Network must be in good repair and equipped with functional seat belts for all passengers, a basic first aid kit and properly maintained fire extinguisher. The driver and all passengers must wear seat belts that are properly secured at all times during transport.

5. Dispatch/Communication

The Transportation Provider must have an agency staff person available to receive or make calls until the last enrollee of the day has been dropped off and received by a responsible caregiver.

All vehicle drivers must have some means of communication with the Provider Agency (i.e., cell phone, dispatch radio, etc.) while transporting enrollees. These communication devices must be in good working order and turned on at all times during transport.

6. Referrals and Provider Emergency Plan

- a. Providers must ensure that they receive a referral form that has been completed by the Care Coordinator prior to the provision of service.
- b. Providers are required to maintain up-to-date emergency contact information for all Wraparound Milwaukee/FISS service recipients. The Transportation Provider must also have a written Agency "Emergency Plan" (policy and procedure) for the driver to follow if an accident should occur, if a child becomes ill during transport or if any other "emergency" situation should arise.

7. Transportation Provider Billing

- a. Transportation Providers are paid on a "per trip" basis. The "per trip" rate (established in the Fee-for-Service Agreement) is based on one passenger for a trip of up to 5.9 miles.
- b. Transportation Provider can be paid for up to four (4) additional passengers per trip (rate established in the Wraparound Milwaukee Fee-for-Service Agreement) if authorized by the Care Coordinator on the "REFERRAL FORM FOR TRANSPORTATION." Providers report additional passengers on the daily Trip Logs entered in Synthesis.
- c. Escorts traveling with children under the age of 12 may be claimed as an additional passenger and may be billed accordingly. Providers may only invoice for one escort per trip. The names of all escorts must be listed on the Transportation Signature Log sheet under "*Person being Transported,*" and in the "*Relationship to Enrollee*" column the word "**escort**" must be written.
- d. Transportation Providers are paid a mileage adjustment for trips of 6.0 miles or more. This

mileage adjustment is processed automatically by Finance Staff based on Trip Logs entered in Synthesis and payment is based on the rate established in the Wraparound Milwaukee Fee-for-Service Agreement.

- e. Transportation Providers are required to use Synthesis to submit monthly billing and enter trip log. Provider training on the Wraparound Milwaukee online billing system is available through the Wraparound Milwaukee Finance Department. Providers bill for the number of trips provided. Wraparound Milwaukee Finance Department staff use information entered on each Trip Log to determine adjustments due to the Provider for additional passengers and/or mileage.
- f. Transportations Providers should work with the service recipient's Care Coordinator to minimize appointment "NO SHOWS". Transportation Providers are reimbursed for up to 2 "NO SHOWS" per client per month. Payment for "NO SHOWS" is calculated by Wraparound Milwaukee Finance staff and is based on the Provider entering "zero" as the number of passengers on the trip log. Transportation Providers CANNOT bill a "no show" when they arrive late for a pick-up and other arrangements have already been made to transport the passenger.

8. Documentation / Signature Logs

Transportation Providers must maintain a "SIGNATURE LOG" for **ALL** rides billed to Wraparound Milwaukee and FISS. A "SIGNATURE LOG" (see *Attachment 3*) is available from Wraparound Milwaukee in Synthesis, which the Transportation Provider can use to satisfy this requirement.

The Signature Logs must contain the following:

- Transportation Provider Name
- Enrollee Name
- Month of Service and Year
- Type of Trip
- Date of Transport – date must include month/day/year
- Service Recipient
- Start Time
- End Time
- Trip Number (if using Synthesis generated Signature Log)
- Location
- Number of riders
- Driver Initials
- Responsible Adult Signature
- Relationship of Signature to Enrollee

9. Transportation Log / Documentation Maintenance

- a. The Transportation Provider must keep ONE (1) Log per enrollee/per month.
- b. The Transportation Provider can determine how they prefer to file their Logs at their Agency (*i.e., per month/year, per enrollee, etc.*) for active enrollees. If the Log is not being kept in the enrollee file during the time services are being actively provided, the Logs must be filed in the enrollee's file after the last date of service.

- c. Referral Forms and other relevant enrollee related documentation must be kept in an organized manner and be easily accessible. Each enrollee must have his or her own file. All enrollee related information is confidential and all enrollee files **must** be kept in a safe and secure cabinet or room. Enrollee files of minors must be maintained at the agency until the youth turns 19 or 7 years past the last date of service, whichever is longer. Enrollee files of adults (i.e., FISS enrollees) must be maintained for 7 years after the last date of service.

10. **Pick-Ups, Drop-Offs and Running Late**

a. **Pick-Up and Drop-Off**

All enrollees (minors) **must** be received by an identified / responsible adult caregiver when being dropped off at an agency, home, appointment, etc.

b. **Running Late**

If a Transportation Provider's driver anticipates that they are going to be **more than 15 minutes late** for a pick-up, they **must** notify the service recipient that they will be picking up or the identified contact person (i.e., *the Therapist, if the youth is at a counseling session*) responsible for the enrollee at that pick-up location of the anticipated late arrival time. It is also permissible for the Transportation Provider Dispatcher to make the call to the enrollee/contact person.

The driver/dispatcher should inform the enrollee/contact person of the situation and indicate the time that the driver will arrive. If this arrival time is acceptable to the enrollee/contact person, then no further arrangements need to be made. In the case of a late transport for a minor, the contact person should then notify the identified caregiver of the situation and **remain with the youth to provide supervision.**

In a situation in which 15 minutes have lapsed and the enrollee/contact person has not received a call from the Transportation Provider's driver indicating that they are running late, the enrollee/contact person should initiate a call to the Transportation Provider to inquire about the arrival time. If the Transportation Provider cannot be reached, then the enrollee /contact person will need to decide if they want use an alternate means of transportation.

If returning from an appointment, the contact person of the agency waiting for the Transportation services should refer to the service recipient's Referral Form for caregiver phone numbers, emergency contacts and Care Coordinator phone numbers to assist them in coordinating an alternate means of transportation.

If an alternate means of transportation is sought and arranged, and the Transportation Provider's driver arrives in the meantime, the enrollee/contact person (*with permission from the guardian/caregiver in the case of a minor*) should inform the individual with whom arrangements have been made and they should collaboratively determine if the Transportation Provider's driver should still do the transport. If it is determined that the Transportation Provider's driver should **not** transport the enrollee, then the Transportation Provider **cannot** bill for that transport or for the contact as a NO SHOW.

11. **Physical Contact (Touching) / Harassment**

Under no circumstances should a Transportation Provider's driver have physical contact with an enrollee (*exception to the above applies when the enrollee needs assistance entering or disembarking from the van due to a disability*). Drivers may not have personal or other contact with service recipients outside the provision of the authorized service (i.e., outside the work environment).

12. Scope of Service

Transportation Providers/Drivers are not authorized to provide services to enrollees and their families outside of their role as a Transportation Provider. If an enrollee, parent/guardian, family member, service provider or team member requests that the provider perform non-related transportation services, the provider is instructed to contact the Care Coordinator immediately to inform them of the situation. If unresolved or otherwise necessary, providers should call the Care Coordinator's supervisor or Wraparound Milwaukee Administration.

References

1. [Forward Health Non-emergency Medical Transportation Manager Information: https://www.forwardhealth.wi.gov/kw/pdf/2013-32.pdf](https://www.forwardhealth.wi.gov/kw/pdf/2013-32.pdf)
2. [MTM Resources and Links to Parental Consent Forms: http://www.mtm-inc.net/wisconsin/members/resources/](http://www.mtm-inc.net/wisconsin/members/resources/)
3. [Wisconsin DMV Vehicle/Driver Record Information Request: http://wisconsin.gov/Documents/formdocs/mv2896.pdf](http://wisconsin.gov/Documents/formdocs/mv2896.pdf)

Attachments:

- 1: Referral for Transportation
- 2: Referral for Transportation-AMERICAB
- 3: Signature Log

Approval Signatures

Step Description	Approver	Date
	Michael Lappen: 11008000-BHD Administrator	12/20/2017
	MaryJo Meyers: 11003003-Director Wraparound Program	12/20/2017
	Pamela Erdman: 12008005-Placement Resources Manager	12/19/2017
	Dana James: 21011004-Quality Assurance Coordinator	12/18/2017



TRANSPORTATION REFERRAL FORM

Enrollee Name: .Enrollee, James

Initial Referral Date: 11/25/14

DOB: 1/1/99 Age: 19.0 Gender: Female

Referred by:

ID Number:: 50032

Phone Number(s):

Email:

Current Referral Date	11/25/2014
Transportation Vendor Requested	LS Transportation, Inc.
Phone number for driver to call	(414) 555-1234
Name of person(s) to be transported	James Enrollee
Relationship to youth	Self
Reason for transportation request	Non-therapy Appt
If 'Other' selected as Reason - describe	
Pick Up Date	11/28/2014
Pick Up Time	12:30:00 PM
Pickup Location	Home 1234 Hope Drive, Milwaukee, WI 53201
Drop Off Time	1:15:00 PM
Dropoff Location	Owen's Place: 4610 West Fond du Lac, Milwaukee, WI 53216
How often will trips occur	Weekly
If this is a recurring trip, specify details	Every Friday at 12:30PM beginning 11/28/2014 and ending 2/6/2015
Trip Type	Round Trip
If a round-trip ride, second pick-up time	2:00:00 PM

American Taxi DOES NOT ACCEPT ADVANCE REQUESTS for the Round Trip Return Ride. The passenger needs to call 220-5000 for a Taxi when ready for a return ride.

Emergency Contact Name	Jane Enrollee (mother)
Emergency Contact Phone	(414) 555-4567
Medical Concerns, if any	None
Safety Concerns / Special Accommodations	None
Wheelchair Needed?	No
SMV Form Status	None
Name of escort	Jane Enrollee
Other Notes, if any	None



Transportation Request from Wraparound Milwaukee

Enrollee Name: .Enrollee, James

DOB: 1/1/99

Referred by:

Name/Phone:

Email

American United Taxicab

Fax to 414-220-5017

Acct. No. WM 15

ID Number: 50032

Phone number for driver to call	(414)555-1234
Name of person(s) to be transported	James Enrollee
Relationship to youth	Self
Reason for transportation request	Home Pass
If 'Other' selected as Reason - describe	
Pickup Date	11/29/2014
Pickup Location	True Living Group Home 7890 N 35th Street, Milwaukee, WI 53218
Time of Appointment	1:00:00 PM
Time of Pick-up	12:30:00 PM
Dropoff Location	Home 1234 Hope Avenue, Milwaukee, WI
How often will trips occur?	Single Ride
If Multiple Days Per Week Selected, list days of the week	
Trip Type	One-Way
Emergency Contact Name	Jane Enrollee
Emergency Contact Phone	(414) 555-4567
Medical Concerns, if any	N/A

Care Coordinators Note: American United Taxicab requires that a **Transportation Request form be faxed to them FOR ALL NEW RIDES AND RIDES WHERE THE PICK-UP TIME VARIES.**

