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Owner Dana James

Policy Area Wraparound (Wrap, REACH, youth CCS)-Vendor

#029- Transportation Services

I. POLICY

It is the policy of Children's Community Mental Health Services and Wraparound Milwaukee (hereby referenced to as Wraparound Milwaukee) 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, REACH, CCS, and Youth Connect Care Coordinators and FISS Case Managers. The term "Youth" is used in this policy and applies to the enrollee in the program, whether a child, adolescent, or young adult.

II. PROCEDURE

A. Types of Transportation Arrangements that can be made:

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

1. Care Coordination Agency

The Care Coordinator can assist the youth/family with meeting the transportation needs by providing transportation with the Care Coordinator.

2. Medicaid – Billable Transportation

When the youth's transportation needs can be covered under Medicaid, the Care Coordinator can contact Veyo to determine eligibility. If eligible, authorization **for**

these transportation services cannot be authorized on a Service Authorization Request (SAR). Veyo's website is <https://wi.ridewithveyo.com/>

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 can contact Veyo to determine eligibility.

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 Plan of Care (POC). If it is supported in the youth's IEP, **the youth's school district (Local Education Agency-LEA) is responsible** for the cost of transportation. If it is not in an IEP and the youth will be attending a Medicaid Day Treatment program, transportation must be arranged through Veyo.

4. Network Provider Transportation (not applicable to CCS and Youth Connect)

Transportation is also available through the Wraparound Milwaukee Provider Network. Additional information regarding the use of Wraparound Milwaukee Provider Network transportation services is below. All options above must be exhausted **prior** to utilizing a Network Provider.

B. Network Provider Transportation - Care Coordinator Responsibilities (not applicable to CCS and Youth Connect)

1. Referrals and Service Authorization Request (SAR)

- a. It is the responsibility of the Care Coordinator to complete and send a copy of the "REFERRAL FOR TRANSPORTATION" Form to the Transportation Provider prior to the provision of services.
- b. The "REFERRAL FOR TRANSPORTATION" form (*see Attachment 1*) available on the "FORMS" tab in Synthesis (*Wraparound Milwaukee's Information Management System*) is completed for youth/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 send the completed form to the Provider Network Transportation service provider prior to the provision of service.
- c. The Care Coordinator must also enter a Service Authorization Request (SAR) in Synthesis prior to the service being provided.

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.

3. Changes in Youth/Service Recipient Contact Information

The Care Coordinator is responsible for immediately notifying the Transportation Provider of changes in the youth'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 youth/service recipient is being transported for services. The Care Coordinator is also responsible for sharing Transportation 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 youth/family member's reception by the Transportation service provider, including seeing the youth 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 a Wraparound Milwaukee Provider Network Manager in advance of travel. Care Coordinators must submit the following information:

- Youth's name
- Name(s) of the individual(s) to be transported and their relationship to the youth
- 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 Veyo

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 maintained by the agency and made available upon request. As vehicles are added to the fleet, an Inspection Report must be obtained prior to using the vehicle in transporting youth/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 youth 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 youth. 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 (see *Policy #081- Billing Policy for further information*) 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. Transportation 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 youth 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 2*) 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
- Youth 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 or Youth Signature (12 years old and older)
- Relationship of Signature to Youth

9. **Transportation Log / Documentation Maintenance**

- a. The Transportation Provider must keep ONE (1) Log per youth/per month.
- b. The Transportation Provider can determine how they prefer to file their Logs at their Agency (*i.e., per month/year, per youth, etc.*) for active youth. If the Log is not being kept in the youth file during the time services are being actively provided, the Logs must be filed in the youth's file after the last date of service.
- c. Referral Forms and other relevant youth related documentation must be kept in an organized manner and be easily accessible. Each youth must have his or her own file. All youth related information is confidential and all youth files **must** be kept in a safe and secure cabinet or room.

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

- a. **Pick-Up and Drop-Off**
All youth (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 youth 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 youth/contact person.

The driver/dispatcher should inform the youth/contact person of the

situation and indicate the time that the driver will arrive. If this arrival time is acceptable to the youth/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 youth/contact person has not received a call from the Transportation Provider's driver indicating that they are running late, the youth/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 youth/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 youth/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 youth, 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 a youth (*exception to the above applies when the youth 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 youth and their families outside of their role as a Transportation Provider. If a youth, 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 Provider Network Manager.

References

1. [Forward Health Non-emergency Medical Transportation Manager Information: https://www.dhs.wisconsin.gov/nemt/manager.htm](https://www.dhs.wisconsin.gov/nemt/manager.htm)
2. Veyo Member Resources: Parental Consent Form - <https://wi.ridewithveyo.com/member-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: [Signature Log](#)

Approval Signatures

Step Description	Approver	Date
	Michael Lappen: BHD Administrator	8/23/2022
	Brian McBride: ExDir2 – Program Administrator	8/23/2022
	Dana James: Integrated Services Manager- Quality Assurance	8/17/2022
	Dana James: Integrated Services Manager- Quality Assurance	8/17/2022



TRANSPORTATION REFERRAL FORM

Enrollee Name:

Initial Referral Date:

DOB:

Age:

Gender:

Referred by:

ID Number::

Phone Number(s):

Email:

Current Referral Date

Transportation Vendor Requested

Phone number for driver to call

Name of person(s) to be transported

Relationship to youth

Reason for transportation request

If 'Other' selected as Reason - describe

Pick Up Date

Pick Up Time

Pickup Location

Drop Off Time

Dropoff Location

How often will trips occur

If this is a recurring trip, specify details

Trip Type

If a round-trip ride, second pick-up time

Emergency Contact Name

Emergency Contact Phone

Medical Concerns, if any

Safety Concerns / Special Accommodations

Wheelchair Needed?

SMV Form Status

Name of escort

Other Notes, if any

