

Adult Day Health Care Transportation (age 18 and over)

Definition: The Adult Day Health Care Transportation service is prior-authorized for participants receiving the Adult Day Health Care (ADHC) service, who reside within fifteen (15) miles of the ADHC center. Transportation will be provided using the most direct route, door-to-door, from the center to the participant's place of residence or other location, as agreed to by the provider and as indicated on the service authorization.

Please see: Medicaid Home and Community Based Waiver Scope of Services for Adult Day Health Care Transportation. Found at: <http://www.scdhhs.gov/internet/pdf/adhc%20transportation.pdf>

Service Limits: This service is limited to participants who reside within fifteen (15) miles of the ADHC center.

Participants who receive Residential Habilitation paid at a daily rate cannot receive this service because the Residential Habilitation provider is responsible for transporting to and from the ADHC center.

Providers: Adult Day Health Care Transportation is provided by centers/agencies contracted with SCDHHS to provide Adult Day Health Care Services.

Arranging for and Authorizing Services: Once it is determined that the participant lives within fifteen (15) miles of the Adult Day Health Care center and is in need of transportation, the Waiver Case Manager will request approval from the SCDDSN Waiver Administration Division. To initiate the service following approval by the Waiver Administration Division, an electronic authorization must be completed and submitted to the chosen provider. The service must be Direct-billed to SCDHHS. This must be indicated on the authorization. Services must be authorized annually at the time of the Support Plan, and as changes are made to the service throughout the plan year.

Note: One unit of ADHC Transportation is equal to a one-way trip to the facility. A round trip transport to/from the ADHC Center requires 2 authorized units of ADHC Transportation for each day: one unit for pickup and one unit for the return trip.

The provider must report any changes in the participant's status that affect eligibility for the Adult Day Health Care Transportation service (e.g. the participant moves and no longer resides within fifteen (15) miles of the center; family member transports; etc.).

Monitoring Services: The Service Coordinator must monitor the service for effectiveness, usefulness and the participant/legal guardian's satisfaction. Monitoring may be completed with the participant, representative, service providers, or other relevant entities. Information gathered during monitoring may lead to a change in the service, such as an increase/decrease in units authorized, change of provider, change to a more appropriate service, etc. DDSN recommends that the Waiver Case Manager monitors this service when it begins and as changes are made.

Monitoring must be conducted as frequently as necessary in order to ensure:

- the health, safety and well-being of the participant;
- the service adequately addresses the needs of the participant;
- the service is being furnished by the chosen provider in accordance with the authorization, relevant policies and quality expectations;
- the participant/representative is satisfied with their chosen provider/s.

Some questions to consider during monitoring include:

- ❖ Is the participant satisfied with the Adult Day Health Care Transportation?
- ❖ What type of vehicle is used to transport the participant (i.e. enclosed vehicle with adequate ventilation, heat, air conditioning and provision for wheelchair-bound participants)?
- ❖ Is the Adult Day Health Care Transportation meeting the participant needs?
- ❖ How often does the participant receive Adult Day Health Care Transportation?

Reduction, Suspension or Termination of Services: If services are to be reduced, suspended or terminated, a written notice must be sent to the participant/legal guardian including the details regarding the change(s) in service, the written reconsideration/appeals notice, and a ten (10) calendar day waiting period (from the date that the reduction/suspension/termination form is completed and sent to the participant/legal guardian) before the reduction, suspension or termination of the waiver service(s) takes effect. See *Chapter 9* for specific details and procedures regarding written notification and the appeals process.