

Ending the Epidemic Task Force Recommendation Form

#177



COMPLETE

Collector: Web Link (Web Link)

Started: Thursday, November 20, 2014 6:50:50 AM

Last Modified: Thursday, November 20, 2014 10:08:43 AM

Time Spent: 03:17:53

IP Address: 24.97.220.14

PAGE 1

Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)

First Name	Michelle
Last Name	McElroy
Affiliation	Southern Tier AIDS Program
Email Address	mmcelroy@stapinc.org

Q2: Title of your recommendation Medicaid Transportation by Approved Community Members

Q3: Please provide a description of your proposed recommendation

Facilitate a network of Medicaid-approved drivers in rural communities to transport eligible members to provider appts. Allow these drivers to be reimbursed mileage for providing this service, rather than paying MUCH higher rates for Medicaid cabs or other medical transport.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply) Linking and retaining persons diagnosed with HIV to health care and getting them on anti-HIV therapy to maximize HIV virus suppression so they remain healthy and prevent further transmission

Ending the Epidemic Task Force Recommendation Form

Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)

Care Committee: Develop recommendations to support access to care and treatment in order to maximize the rate of HIV viral suppression. The Committee will promote linkages and retention in care to achieve viral suppression and promote the highest quality of life while significantly decreasing the risks of HIV transmission. Recommendations will also ensure a person centered approach is taken and that access to culturally and linguistically appropriate prevention and health care services is available.

Housing and Supportive Services Committee: Develop recommendations that strengthen proven interventions enabling optimal engagement and linkage and retention in care for those most in need. This Committee will recommend interventions that effectively address complex and intersecting health and social conditions and reduce health disparities, particularly among New York's low-income and most vulnerable and marginalized residents. These interventions will diminish barriers to care and enhance access to care and treatment leaving no subpopulation behind.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

Change to existing program

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Unknown

Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Within the next year

Q9: What are the perceived benefits of implementing this recommendation?

Save cost, due to less use of Medicaid cab. Better transport, as many Medicaid cab companies are unreliable, run late, miss scheduled (and confirmed appts), and do not treat clients well. Better confidentiality protections, as the individuals could recruit people they know to provide reimbursable transport, rather than getting into a cab with an unknown driver every time.

Q10: Are there any concerns with implementing this recommendation that should be considered?

Transport people would have to go through confidentiality training and complete attestation. They would likely also have to provide proof of active license and insurance policy.

Ending the Epidemic Task Force Recommendation Form

Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

Less cost than current transport with Medicaid cab/medical transport. Not sure of actual cost estimate, but it seems the savings could be calculated by comparing the cost of a Medicaid cab transport to the cost of the federal mileage reimbursement rate

Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

See above #11.

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

PLWHA who are eligible for Medicaid transport, primarily in micropolitan and rural communities.

Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

Respondent skipped this question

Q15: This recommendation was submitted by one of the following

Advocate