

Vehicle Modifications

Service Definition

A. Vehicle Modifications are adaptations or alterations to a vehicle that is the participant's primary means of transportation. Vehicle Modifications are designed to accommodate the needs of the participant and enable the participant to integrate more fully into the community and to ensure the health, welfare and safety and integration by removing barriers to transportation.

B. Vehicle Modifications may include:

1. Assessment services to (a) help determine specific needs of the participant as a driver or passenger, (b) review modification options, and (c) develop a prescription for required modifications of a vehicle;
2. Assistance with modifications to be purchased and installed in a vehicle owned by or a new vehicle purchased by the participant, or legally responsible parent of a minor or other caretaker as approved by the DDA;
3. Non-warranty vehicle modification repairs; and
4. Training on use of the modification.

C. Vehicle Modifications do not include the purchase of new or used vehicles, general vehicle maintenance or repair, State inspections, insurance, gasoline, **charging electric vehicles**, fines, tickets, or the purchase of warranties.

SERVICE REQUIREMENTS:

A. A vehicle modification assessment and/or a driving assessment will be required when not conducted within the last year by **a** ~~the~~ Division of Rehabilitation Services **approved vendor**.

B. A prescription for Vehicle Modifications must be completed by a driver rehabilitation specialist or certified driver rehabilitation specialist. The prescription for Vehicle Modifications applies only to the year/make/model of the vehicle specified on the Vehicle Equipment and Adaptation Prescription Agreement (VEAPA).

C. The vehicle owner is responsible for:

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1. The maintenance and upkeep of the vehicle; and
 2. Obtaining and maintaining insurance that covers the Vehicle Modifications.
- D. The program will not correct or replace Vehicle Modifications provided under the program that have been damaged or destroyed in an accident.
- E. Vehicle Modifications are only authorized to vehicles meeting safety standards once modified.
- F. Upon delivery to the participant (including installation), the Vehicle Modification must be in good operating condition and repair in accordance with applicable specifications.
- G. The Program cannot provide assistance with modifications on vehicles not registered under the participant or legally responsible parent of a minor or other primary caretaker. This includes leased vehicles.
- H. Vehicle modification funds cannot be used to purchase vehicles for participants, their families, or legal guardians; however, this service can be used to fund the portion of a new or used vehicle purchase that relates to the cost of accessibility adaptations. In order to fund these types of adaptations, a clear breakdown of purchase price versus adaptation is required.
- I. Vehicle Modifications may not be provided in day or employment services provider owned vehicles.
- J. Prior to accessing DDA funding for this service, all other available and appropriate funding sources **which may include, as applicable, private insurance, including those** services offered by Maryland Medicaid State Plan, Maryland State Department of Education (MSDE), Division of Rehabilitation Services (DORS), **and** Department of Human Services (DHS), **and or** any other federal or State government funding program, must be explored and exhausted to the extent applicable.
1. These efforts must be documented in the participant's file.
 2. If these services are deemed by the participant's person-centered planning team to be inappropriate to meet the specific needs of the participant, the exploration efforts and reasons that these services do not meet the participant's needs shall be documented in the participant's **filePCP**.

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3. The DDA has authority to determine if further efforts must be made, and documented, prior to authorization of funding for the service under the ~~Medicaid w~~Waiver program.

K. To the extent that any listed services are covered under the State plan, the services under the waiver would be limited to additional services not otherwise covered under the State plan, but consistent with waiver objectives of ~~receiving community based services and~~ avoiding institutionalization.

L. A legally responsible person, relative, or legal guardian of the participant cannot be paid by the ~~Medicaid w~~Waiver program, either directly or indirectly, to provide this ~~Medicaid w~~Waiver program service.

M. ~~Anyone paid to provide a Medicaid waiver service, including participant's employees, are considered a Medicaid Provider, subject to all laws and regulations associated with a Medicaid Provider.~~

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

Vehicle Modifications payment rates for services must be customary and reasonable according to current market values, and may not exceed a total of \$15,000 within ~~10 calendar years a ten-year period~~.

Service Delivery Method (check each that applies):

☒ Participant-directed as specified in Appendix E

☒ Provider managed

~~(Don't Check)~~ Remote/via Telehealth

Specify whether the service may be provided by (check each that applies):

NONE CHECKED

☐ Legally Responsible Person

☐ Relative

☐ Legal Guardian

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Provider Category(s) (check one or both):
X Individual. List types:
Vehicle Modification Vendor
X Agency. List the types of agencies:
Organized Health Care Delivery System Provider
Provider Type:
Vehicle Modification Vendor
License (specify)
Certificate (specify)
Other Standard (specify)
<p>Individual must complete the MDH DDA provider application and be certified-approved based on compliance with meeting the following standards:</p> <ol style="list-style-type: none"> 1. Be at least 18 years old; 2. Be a Division of Rehabilitation Services approved Vehicle Modification service vendor; 3. Satisfactorily completeComplete required orientation and training designated by the DDA;

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4. For driving assessments, **satisfactorily** complete person specific pre/in-service training to be aware of the **participant's** ~~participants~~ communication preferences, sensitivities, and health or behavior strategies so they can adapt training as needed.
5. Have 3 professional references which attest to the provider's ability to deliver the support/service in compliance with the Department's **policy values** in Annotated Code of Maryland, Health General, Title 7;
6. Demonstrate financial integrity through Internal Revenue Services, **Maryland** Department **of Health**, and Medicaid Exclusion List checks;
7. **Complete and sign any agreements required by the Maryland Department of Health (MDH) or DDA** ~~Have a signed DDA Provider Agreement for Conditions for Participation;~~ and
- 8 Have a signed Medicaid Provider Agreement.

The Adapted Driving Assessment specialist who wrote the Adapted Driving Assessment report and the Vehicle Equipment and Adaptation Prescription Agreement shall ensure the vehicle modification fits the consumer and the consumer is able to safely drive the vehicle with the new adaptations/equipment by conducting an on-site assessment and providing a statement **as to whether it meets** the individual's needs.

Provider Type:

Organized Health Care Delivery System Provider

License (specify)

Certificate (specify)

Other Standard (specify)

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Agencies must meet the following standards:

1. Be ~~approved~~ ~~certified or licensed~~ by the DDA to provide at least one Medicaid waiver service; and
2. Complete the ~~MDH DDA~~ provider application to be an Organized Health Care Delivery System provider.

Organized Health Care Delivery System providers shall verify the licenses, credentials, and experience of all professionals with whom they contract or employ~~s~~ and have a copy of the same available upon request.

The Organized Health Care Delivery System must ensure the individual or entity performing the service meets the qualifications including:

1. Be a Division of Rehabilitation Services approved vendor or DDA certified vendor;
2. The Vehicle Equipment and Adaptation Prescription Agreement must be completed by a driver rehabilitation specialist or certified driver rehabilitation specialist; and
3. The adaptive driving assessment specialist who wrote the Adapted Driving Assessment report and the Vehicle Equipment and Adaptation Prescription Agreement shall ensure the vehicle modification fits the consumer and the consumer is able to safely drive the vehicle with the new adaptations/equipment by conducting an on-site assessment and provide a statement ~~as to whether~~ ~~it meets~~ the individual's needs.

Verification of Provider Qualifications

Provider Type:

Vehicle Modification Vendor

Entity Responsible for Verification:

1. ~~MDH DDA~~ for approval of the Organized Health Care Delivery System.
2. Organized Health Care Delivery System providers for ~~verification of~~ entities and individuals they contract or employ.

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Frequency of Verification
<ol style="list-style-type: none"> 1. MDH DDA— Initially and at least every 3 years. 2. Organized Health Care Delivery System providers – Prior to service delivery and continuing thereafter.
Provider Type:
Organized Health Care Delivery System Provider
Entity Responsible for Verification:
<ol style="list-style-type: none"> 1. MDH DDA for approval of certified Vehicle Modification Vendor. 2. Financial Management and Counseling Services provider, as described in Appendix E, for participants self-directing services.
Frequency of Verification
<ol style="list-style-type: none"> 1. MDH DDA— Initially and at least every 3 years. 2. Financial Management and Counseling Services - Prior to service delivery and continuing thereafter.