Developmental Disabilities Resource Board Employment Transportation Stipend

Policy Origination: June 19, 2003 **Revision Effective: July 1, 2018**Revision Approved: November 16, 2017

Policy Reviewed: November 16, 2017

Scope of Employment Transportation Stipend

The DDRB Employment Transportation Stipend is intended to temporarily support the transportation needs of individuals competitively employed in community who are underemployed or in jeopardy of losing employment due to the lack of transportation. This stipend is not intended to cover total transportation costs, but to enhance options and opportunities while individuals explore long-term transportation solutions.

Eligibility:

Individuals accessing the Employment Transportation Stipend who meet the following criteria are eligible for a lifetime maximum amount of up to \$3,000.

- Individual has been determined eligible for DMH/DD services and have a DMH/DD I.D.
- Individual resides in St. Charles County
 Individual is competitively employed in the community

If the maximum amount allowable is not fully utilized the individual's balance remains available for use at a later time.

Qualifying Expenses That Can Be Reimbursed With Valid Receipts:

- 1. **Public Transportation** provided by a public transit entity (cab, Uber, ITN, etc.).
- 2. **Private Transportation** provided by an individual (coworker, friend, neighbor, etc.). The individual cannot reside with the eligible individual.
- 3. **Driver education** or related training provided by reputable business. This does not include driver skill or competency assessments.
- 4. **Motor vehicle purchase**: the eligible individual must be listed as an owner on the title of the vehicle purchased.
- 5. **Motor vehicle sales tax**: the eligible individual must be listed as an owner on the title of the vehicle.
- 6. **Initial motor vehicle licensing**: the eligible individual must be listed as an owner on the title of the vehicle.
- 7. **Vehicle repairs, not including**: oil change, fluids, filters, and tune-up: the eligible individual must be listed as an owner on the title of the repaired vehicle.

How to Access Funding:

Individuals accessing the stipend who receive Supported Employment Services from a Division of Vocational Rehabilitation (DVR) vendor, must access the Employment Transportation Stipend through their employment agency.

Individuals accessing the stipend who have secured employment on their own, and do not receive employment supports, must access the Employment Transportation Stipend through their case manager/service coordinator.

Individuals accessing the stipend who have secured employment on their own, and do not receive employment supports or have an active case manager/services coordinator will need to submit for reimbursement directly to the DDRB.

Role of Employment Agency OR Case Manager/Service Coordinator:

- 1. Educate the eligible individual about the Transportation Stipend program, including its requirements, as outlined on the Transportation Stipend checklist.
- 2. Assist the individual with exploring available transportation options.
- 3. Assist the individual to be responsible for obtaining valid receipts and submitting them to their employment agency or case manager/service coordinator for reimbursement within 60 days from the date the expense was incurred. Individuals should explore all options (Social Security work incentives, ride shares, etc.)

Submitting a Request for Reimbursement:

- 1. Submit billing to the DDRB within 90 days from the date the expense was incurred.
 - a. Employment agencies will submit billings via DDRB Portal. The employment agency maintains the check list and supporting documentation for all reimbursed transactions, for their agency onsite review by the DDRB.
 - b. Case manager/service coordinator will submit the request for reimbursement to the DDRB. The request must include the Transportation Stipend Invoice form (available on DDRB website), Transportation Stipend Checklist (available on DDRB website) and all supporting documentation to the DDRB.
 - c. Individual will submit the request for reimbursement to the DDRB. The request must include the Transportation Stipend Invoice form (available on DDRB website), Transportation Stipend Checklist (available on DDRB website) and all supporting documentation to the DDRB.

General Information

DDRB payments are made to the employment agency or eligible individual (if individual does not receive employment services) within the current DDRB invoicing and payment cycle.



Transportation Stipend Reimbursement Request Form

Below are the qualifying expenses that can be reimbursed with valid documentation.

A. Individual Informatior First & Last Name:	(PRINT clearly):	DMH ID)•	
Street address:		City:	State:	Zip:
Phone No.	Case Manager (if applicable):		 -
. How are you qualified	? (SELECT one):			
☐ Employed in the community	□ Enrolled/attending posi	t-secondary school and	l/or Pre-Employment Pro	ogram
	(most recent paycheck stub) ecent class schedule or acce			this request for
C. Qualified Expense(s): each section lists the docume expense occurred.	nts that must be submitte	d with this reques	st form within 90 day	s of the date the
Proof of valid driver's liProof of ownership (title	NCE (Individual must be listed on the)	hicle purchased)	
•	of receipt required only if requesting	reimbursement)		
 Initial licensing fees (co 	opy of receipt required only if reques	sting reimbursement)	REIMBURSEMENT REC	NIECTED: #
M. I. W.L. I. B L. c.	dividual must be listed as an owner			<i>(</i> 0L31LD.
 Proof of ownership (title Proof of valid driver's li Proof of current insura Paid receipt(s) for reparation 	icense nce (Individual must be listed on ti	ne policy)	DETAIN DESCRIPTION OF THE PROPERTY DESCRIPTION OF THE PROP	NUESTED A
			REIMBURSEMENT REC	QUESTED: \$
 Driver Education/Driver Driver's Permit Driver's Assessment Re 	esults			
Receipt(s) for Driver Ed	ducation/Driver Training		REIMBURSEMENT REC	QUESTED: \$
Transportation by a Pub Paid Receipt(s) (include	Dlic Transit name of business, address, contact	information, date of servi	ice and amount) REIMBURSEMENT REC	QUESTED: \$
Transportation by a Priv — Paid Receipt(s) (include	/ate Transit name, address, contact information	, date of service and amo	ount) REIMBURSEMENT REC	QUESTED: \$
). Send/submit this com	pleted form with require	d documentation v		·
expense occurred. Mai	-	or Club Rd.	Email to: transportation@de	
	ate Approved:		nt Remaining: \$	