

COUNTY OF



ALLEGHENY

RICH FITZGERALD  
COUNTY EXECUTIVE

Dear Applicant:

CLIENT ID

Print first and last name

(For MATP use only)

Welcome! Thank you for your interest in using the Medical Assistance Transportation Program (MATP).

The MATP application process is simple. You complete and sign the forms listed below and send them to us within 30 days of the "date of application." We review your application and determine if you are eligible to participate.

Please complete all blanks on these forms, unless noted "for MATP use only":

\_\_\_\_\_ **MATP Application/Eligibility** – helps us determine if you are eligible for service

\_\_\_\_\_ **Client Authorization for Release of Information** – gives MATP permission to receive / release information from medical facilities, physicians, dentists, hospitals, clinics, and ACCESS Transportation Inc. regarding your need for and / or receipt of MA-covered medical services.

\_\_\_\_\_ **This Welcome Letter** – your signature indicates that you kept the MATP Instruction & Information booklet and the MATP Holiday Schedule (enclosed).

Optional forms:

\_\_\_\_\_ **DHS voluntary survey** – completing this form is completely voluntary. What you answer will in no way affect your transportation service. Information you provide helps DHS plan better services.

**Transportation services are available during the 30 days you have to return the completed/ signed required forms listed above. Services will be suspended if the required forms, with your signature, are not returned within 30 days of the "date of application" on the application form.**

**MATP is required to provide the least expensive, most appropriate transportation service that meets your need.** Transportation options include:

- Reimbursement of mileage/parking/tolls for use of a private vehicle
- Port Authority bus/T/incline tickets
- Shared-ride paratransit / Ride-hailing service for those who we determine unable to use public transportation

We will discuss your transportation service with you as part of the application/ eligibility process.

You may return your completed, signed forms: by mail or hand-delivery: MATP, One Smithfield Street, 1<sup>st</sup> Floor, Pittsburgh, PA 15222-2221, **OR** by FAX: (412) 350-2729 **OR** by scan and email to: [MATP@alleghenycounty.us](mailto:MATP@alleghenycounty.us) .

Please call MATP at 1-888-547-6287 with any questions. Phones answer Monday through Friday, 8:00 a.m. to 4:30 p.m. If you must call at other times, leave a message and we will return your call on the next business day.

Regards,

*James R. Farwell*

MATP Administrator

I have retained a copy of the MATP Instruction & Information Sheet and MATP Holiday Schedule:

X

Applicant signature

Date

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MARC CHERNA, DIRECTOR  
**DEPARTMENT OF HUMAN SERVICES**  
OFFICE OF BEHAVIORAL HEALTH  
MEDICAL ASSISTANCE TRANSPORTATION PROGRAM (MATP)  
HUMAN SERVICES BUILDING • ONE SMITHFIELD STREET • FIRST FLOOR • PITTSBURGH, PA 15222  
PHONE (412) 350-4476 • FAX (412) 350-2729 • E-MAIL MATP@ALLEGHENYCOUNTY.US



**Medical Assistance Transportation Program (MATP)  
Adult (18 years and older) Application / Eligibility Form  
1-888-547-6287**

**(PLEASE TYPE OR PRINT CLEARLY)**

**SECTION I – CLIENT IDENTIFYING INFORMATION**

Prefix	Last name	First name	Middle name	Suffix	Client ID (for MATP use only)
Cell phone number (including area code)		Home phone number (including area code)		Social Security number	Date of birth (m-d-yyyy)

**Pick-up Address**

House number	Street name (include St., Ave., Rd.)	Apartment number		
City / Township / Borough		County	State	ZIP
		Allegheny	PA	

**Mailing Address (if different from pick-up address)**

House number, street name, apartment number or P.O. Box	City	State	ZIP

**Emergency Contact**

Emergency contact name	Emergency contact phone number
Name of parent / guardian	Parent/guardian phone number

**For MATP use only**

**SECTION II – MEDICAL ASSISTANCE ELIGIBILITY VERIFICATION / REVERIFICATION**

Group I	Group II (D-00, B-00, PD-00, PD-21, PD-22, PD-29, TD-00, TB-00)
Category of assistance	Program status code
Plan name	Proof of age

**Please read each item below. Then sign to say you agree to the items.**

**SECTION III – AFFIRMATION OF INFORMATION**

I hereby certify that to the best of my knowledge, the information contained herein is true, correct and complete. I agree to report any changes in circumstances immediately to this Service Provider.		
I understand that documentation of all eligibility factors may be required to determine eligibility correctly or for auditing purposes, and that giving knowingly false statements is a criminal offense.		
I understand that I have a right to request a PA Department of Human Services (formerly DPW) fair hearing.		
This affirmation statement covers all attachments required for the determination of eligibility.		
Signature of applicant X	Signature of interviewer	Date of application m-d-yy



# Medical Assistance Transportation Program (MATP) Client Authorization for Release of Information

I, \_\_\_\_\_, client ID \_\_\_\_\_,  
(Please print or type your name.)

give my permission to the Allegheny County Department of Human Services, Medical Assistance Transportation Program (MATP), to request information, only as needed to provide MATP services, from any medical facility, physician, dentist, hospital, clinic, pharmacy or purveyor of medical equipment regarding my need for and / or receipt of medical treatment, medical evaluation or purchase of prescription drugs or medical equipment.

**AND**

give my permission to any medical facility, physician, dentist, hospital, clinic, pharmacy or purveyor of medical equipment to provide such information to the Allegheny County Department of Human Services, Medical Assistance Transportation Program (MATP).

Client signature <b>X</b>	Cell phone number	Home phone number
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Pick-up address				
House number	Street name	Apartment	City, Township or Borough	ZIP

Mailing address: house number, street name, apt. number or P.O. Box	City	State	ZIP
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**To be valid, MATP clients must sign and return the three documents listed below within 30 days of the "Date of application" as provided in the block in the bottom-right hand corner of the MATP Application /Eligibility form.**

- Medical Assistance Transportation Program (MATP) welcome/cover letter
- MATP Application / Eligibility form
- MATP Client Authorization for Release of Information form

# **Medical Assistance Transportation Program (MATP)**

**Your Instructions and  
Information Booklet to  
help you make the most  
of MATP services**



# Important Numbers and Addresses

## **MATP**

Allegheny County Department of Human Services  
One Smithfield Street, First Floor  
Pittsburgh, PA 15222  
1-888-547-6287

## **Travelers Aid**

343 Blvd of the Allies  
Pittsburgh, PA 15222  
412-281-5474

## **Director's Action Line (DAL)**

One Smithfield Street, First Floor  
Pittsburgh, PA 15222  
1-800-862-6783

## **MATP ACCESS Carriers**

Each carrier listed below provides service to specific areas of Allegheny County. You will be informed which carrier will provide your transportation if you are approved for ACCESS shared-ride transportation. If you qualify, circle your ACCESS provider for easy reference.

### **AirStar**

412-381-7230

### **CommTrans**

412-331-0800

### **First Transit Bethel**

412-833-8200

### **First Transit Monroeville**

412-793-6200

### **NAMS**

412-781-6774

### **PRN**

1-800-634-8773

### **S&S**

412-829-7627

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# Introduction

This booklet contains all the information you need to successfully use MATP services. Please keep it handy and refer to it when you have questions. If you still have questions about MATP, please call us at 1-888-547-MATP (6287). *We will be happy to help.*

## How to Apply to Use MATP

Individuals of all ages may qualify for the Medical Assistance Transportation Program (MATP) if they

- are a resident of Allegheny County and
- have a valid Pennsylvania Medical Assistance (MA/Medicaid) card

You just need to complete the application process and have your eligibility verified by MATP to use the service.

The application process for adults, 18 years of age and older, is provided on the Welcome Letter in the "MATP Application Packet for Adults."

The application process for children, under 18 years of age, is provided on the Welcome Letter in the "MATP Application Packet for Minors."

Both packets are available on the DHS MATP webpage:  
[www.alleghenycounty.us/dhs/matp](http://www.alleghenycounty.us/dhs/matp)

**If someone helped you complete the forms** and they are sent to you by mail, you must sign and return your required forms within 30 days of the "date of application," as provided in the bottom, right-hand corner of the application, for your MATP transportation services to continue.

NOTE: Transportation is available during the 30 days processing time but will be suspended if the required documents with your signature are not received within those 30 days.

The application process is complete when the MATP office receives your completed and signed MATP documents and lets you know you qualify.

The MATP representative will discuss the specifics of your available services when she or he calls you.



# General Information about MATP

## **MATP can provide**

- Free public transportation (bus, subway and incline) ahead-of-time tickets
- Reimbursement for your use of public transportation or a private car
- Free door-to-door service, when medically necessary, via shared-ride or ride-hailing service

MATP is required by law to provide the least costly, most appropriate transportation service available that fits a rider's needs.

## **If you qualify, MATP can take you (and your escort, if necessary) to and from these MA-billable appointments for free.**

- Non-emergency medical trips related to your physical health
  - Doctor appointments
  - Dental appointments
  - Pharmacy visits to get prescription medication (not available with ride-hailing)
- Non-emergency medical trips related to your mental health counseling
- Non-emergency medical trips related to counseling and treatment for drug and alcohol dependency
- Urgent-care trips (next day or same day) if determined to be eligible after a case-specific review

## **MATP does not provide transportation for these non-MA-billable reasons**

- Emergency ambulance service
- Trips of distances less than one-quarter of a mile unless you are unable to walk the distance
- Transportation to or from
  - Veterans Administration (VA) medical centers
  - Mental health social rehabilitation programs
  - Hospital visits
  - Day care programs
  - Sheltered workshops
  - WIC programs
  - Nutrition programs

## **Rules for riders on all MATP vehicles**

### ***Young riders***

- Qualified children under 18 years of age may ride MATP if their parent or legal guardian signs and returns all required documents in the MATP Application Packet for Minors.
- Children under four years of age must ride in an approved car seat provided by the parent or legal guardian. The parent or legal guardian must ride with the child.
- Children between four and eight years of age must ride in an approved booster seat provided by the parent or legal guardian. The parent or legal guardian must ride with the child.
- Children 13 to 17 years of age must have a signed "Permission for a Minor to Ride MATP Alone" form on file whether or not the child is permitted to ride alone.

### ***Escorts***

- MATP does not provide escorts. It is your responsibility to arrange for an escort, if needed.
- Escorts must be 18 years of age or older.
- Reasons to have an escort:
  - You are unable to safely ride alone
  - The effect of your pending medical treatment will result in you being unable to safely ride alone
  - You need help to speak with, understand or remember what your medical professional said
- Travel arrangements for escorts and registered service animals must be made when you schedule your trip.
- All escorts ride for free.

### ***Changes to your personal information***

You must let MATP know right away if any of your personal information changes from what was reported on your MATP application. Call 1-888-547-MATP (6287) if:

- You move from the address on your application form
- Your telephone number changes
- Your Medical Assistance (Medicaid) eligibility changes or is terminated

### ***Reasons your use of MATP service may be stopped***

The reasons that your MATP services may be temporarily or permanently stopped include but are not limited to:

- If applying by mail, you do not sign and return the required forms from the MATP Application Packet within 30 days of the date of application.

- You move outside Allegheny County
- You are longer eligible for Medical Assistance
- You are abusive or uncooperative toward MATP staff or to the driver or other passengers when using MATP transportation services
- You use the service for reasons that are not permitted or acceptable

If your service is denied, reduced or ended, you will be sent written notice about your right to request a fair hearing from the PA Department of Human Services. If you have questions about this, please call the MATP administrator at 1-888-547-MATP (6287) or Neighborhood Legal Services at 412-255-6700.

***MATP is closed on weekends and county-observed holidays***

Even though the MATP office is closed on weekends and the holidays listed below, you can still use MATP services 365 days a year. You just need to take these closed days into account when scheduling your service.

- New Year’s Day (Jan. 1)
- Martin Luther King Jr. Day (third Monday of January)
- President’s Day (third Monday in February)
- PA Primary Election Day (varies)
- Memorial Day (last Monday in May)
- Independence Day (July 4)
- Labor Day (first Monday in September)
- Columbus Day (second Monday in October)
- Veterans’ Day (November 11)
- Thanksgiving (fourth Thursday in November)
- Christmas Day (December 25)

## **If You Have a Question or Complaint**

### **Contact MATP**

- By Phone Weekdays, 8:00 am to 4:30 pm  
1-888-547-MATP (6287)
- Walk-ins Weekdays, 8:30 am to 3:30 pm  
The Human Services Building  
One Smithfield Street, First Floor  
Pittsburgh, PA 15222
- Email [MATP@alleghenycounty.us](mailto:MATP@alleghenycounty.us)

## Contact the Director's Action Line (DAL)

- By Phone Weekdays, 8:00 am to 5:00 pm  
1-800-862-6783
- Walk-ins Weekdays, 8:30 am to 4:30 pm  
The Human Services Building  
One Smithfield Street, First Floor  
Pittsburgh, PA 15222
- Email DAL@alleghenycounty.us
- Text "Action" to 412-324-3388

## Using Public Transportation for Your MATP Trip

### Public transportation ahead-of-time tickets

#### *For first-time riders or people whose facility is not in the Travelers Aid network*

1. At least one week before your scheduled medical appointment, call Travelers Aid at 412-281-5474.

**NOTE:**

- There is no guarantee that you will get your tickets on time if your request is placed less than one week ahead of time.
  - If you don't get your tickets in time, and you pay out of pocket for your public transportation tickets, you have 10 days from date-of-service to submit acceptable documentation of your visit to: Travelers Aid, 343 Blvd of the Allies, Pittsburgh, PA 15222:
    - Acceptable documentation means the staff at the facility must write on facility/physician letterhead, prescription pad or after-visit summary that you were there for an appointment.
    - Reimbursements cannot be made if documentation is received more than 10 days after the date-of-service.
    - Reimbursement will be paid in bus tickets.
2. Travelers Aid will send the tickets through the mail to your home address in time for your appointment.
  3. The envelope will also have a Verification of Billable Services form to be signed by a facility staff member after your appointment is complete.

4. You must send the Verification of Billable Services form, signed by the facility staff, back to: Travelers Aid, 343 Blvd of the Allies, Pittsburgh, PA 15222, within 10 days of your appointment to get tickets for future appointments. If you break this rule three times, you will no longer be able to get tickets ahead of time. You will need to ask to be paid back.

### ***For persons whose facility is in the Travelers Aid network***

Because the medical facility that you visit is in the Travelers Aid network, staff there will provide you with that day's return ticket and a bus ticket to get to your next visit.

You are still required to send the signed Verification of Billable Services form to Travelers Aid, 343 Blvd of the Allies, Pittsburgh, PA 15222, within 10 days of your appointment.

### **Public transportation: Requesting your after-your-appointment payback**

Only documented transportation expenses to MA-eligible medical appointments will be reimbursed.

Within 15 days of your appointment, send to:  
MATP Office, One Smithfield Street, First Floor, Pittsburgh, PA 15222:

#### ***1. Proof of visit***

- To be reimbursed for travel to/from a medical office visit: Proof of your completed medical visit on the office's official letterhead, prescription pad or after-visit summary that includes the address of the appointment location

***OR***

- To be reimbursed for travel to/from a pharmacy prescription pick-up visit: The prescription receipt with your name and the cash register receipt that has the day you picked up your prescription

#### ***2. Proof of costs for your travel***

- You don't need to send anything for proof of cost, your home address and the address of your medical appointment or pharmacy will determine actual travel cost based on published public transportation fares

You will receive a reimbursement check after your information is verified.

## Using a Private Vehicle for Your MATP Trip

If you have access to a private vehicle, you may use it for any MA-eligible appointments and receive mileage reimbursement as well as parking and tolls when receipts are provided.

### Requesting your after-your-appointment payback

Within 15 days of your appointment, send to:  
MATP Office, One Smithfield Street, First Floor,  
Pittsburgh, PA 15222:

#### **1. Proof of visit**

- To be reimbursed for travel to/from a medical office visit: Proof of your completed medical visit on the office's official letterhead, prescription pad or after-visit summary that includes the address of the appointment location

**OR**

- To be reimbursed for travel to/from a pharmacy prescription pick-up visit: The prescription receipt with your name and the cash register receipt that has the day you picked up your prescription

#### **2. Proof of costs for your travel**

- Send receipts (original and unchanged) for parking and tolls with your trip verification
- Your home address and the address of your medical appointment will determine actual travel cost based on a per-mile rate

You will receive a reimbursement check after your information is verified.

## Using ACCESS (Shared-ride Transportation) for Your MATP Trip

### Additional information for ACCESS riders

- ACCESS vehicles operate seven days a week, 6:00 am to 10:00 pm, year-round, including holidays.
- ACCESS may automatically cancel your trip when Pittsburgh Public Schools are closed due to bad weather unless you receive life-sustaining medical treatment. Scheduled pick-up times may be delayed or travel restricted for safety concerns.
- You need to make sure the pathway between your door and the ACCESS vehicle is clear of all obstructions. The ACCESS driver will not shovel snow or chip ice.
- ACCESS drivers may help you up or down no more than four steps.

- Scheduling and cancellation of ACCESS trips must be done according to the process below.
- Only clients and escorts authorized by MATP are permitted on ACCESS vehicles.
- Please be ready at least 15 minutes ahead of your scheduled pick-up time.
- ACCESS vehicles are permitted to be between 10 minutes early and 20 minutes late for their scheduled pick-up time.
- ACCESS vehicles will only wait five minutes at a pick-up site.
- No smoking is permitted on ACCESS vehicles.
- The vehicle that arrives for you may be a van, a wheelchair-lift-equipped vehicle or a sedan. No matter what form it takes, all ACCESS vehicles are marked with the carrier's logo.
- A list of ACCESS carriers and their phone numbers is provided on page 2.

## To schedule an ACCESS MATP round-trip

Remember, the MATP office is closed on weekends and all county-observed holidays. Please see the list of county-observed holidays on page 7.

- Contact MATP up to two weeks before but at least two weekdays before your appointment, as shown in the chart below. Standing orders and up to two same-day trips may be scheduled.
  - by phone toll-free 1-888-547-MATP (6287); 8:00 am to 4:00 pm
  - by walk-in MATP Office, Human Services Building, First Floor, One Smithfield Street, Pittsburgh, PA 15222; 8:30 am to 4:00 pm

Day of your appointment	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
Deadline to call MATP to schedule a ride.	By 4:00 pm on the previous Thursday	By 4:00 pm on the previous Friday	By 4:00 pm on the previous Monday	By 4:00 pm on the previous Tuesday	By 4:00 pm on the previous Wednesday	By 4:00 pm on the previous Thursday	By 4:00 pm on the previous Thursday

- Next-day trips are considered on a case-by-case basis. If calling for a next-day trip, you must contact MATP before 3:00 pm the previous weekday.
- Be ready to tell the MATP interviewer:
  - The address, including street name, number and zip code of your medical appointment

- The purpose of your medical appointment
- The name of the physician you will be seeing or facility you will be going to and their office phone number
- The time of your appointment

### **To request your “will-call” return MATP trip on ACCESS**

- Call your assigned ACCESS carrier for your return trip home unless you are told otherwise. Phone numbers for all the ACCESS carriers are listed on page 2.
  - If your appointment is scheduled to begin before 2:30 pm, you can use a will-call return trip. ALL calls for will-call return trips must be made to the carrier before 5:00 pm.
  - If your appointment is scheduled after 2:30 pm, you must tell the carrier a return time in advance.
- Drivers may arrive within five minutes or up to 45 minutes after your call for pick-up.
- Call the carrier if you have waited 45 minutes and your driver has not arrived.

### **To cancel an ACCESS MATP trip**

Call your carrier directly at least one hour before your scheduled pick-up time to cancel your trip. Phone numbers for all the ACCESS carriers are listed on page 2.

### **What happens if you do not cancel or use your scheduled ACCESS ride?**

- Your record will be marked with a “no-show” if you call to cancel less than one hour ahead or if you do not arrive at the ACCESS vehicle within five minutes of it arriving at your location.
- If your record shows that you were a no-show for two consecutive pick-ups, your service may be discontinued. MATP will attempt to contact you after the second no-show to give you a chance to explain. If you cannot be reached the assumption will be that you do not need the service and your next trip will be canceled by MATP.

# Using the MATP Ride-hailing Service

## General information about MATP ride-hailing

MATP determines eligibility for all transportation options, including MATP ride-hailing, based on the most appropriate, cost-effective mode of transportation. Clients cannot sign themselves up for ride-hailing. Those interested in being signed up should call MATP at 1-888-547-MATP (6287).

**NOTE:** Only those who are already registered with MATP AND determined to be eligible AND referred to Travelers Aid by MATP AND approved by Travelers Aid may utilize this service.

## Additional rules for MATP ride-hailing

- MATP ride-hailing rides use Uber, Lyft, and zTrip vehicles.
- Pick-up times for “to” rides using MATP ride-hailing services are available Monday through Friday starting at 8:45 am.
- Arrangements for after-appointment pick-ups must be made by 4:00 pm.
- Since rides are scheduled by Travelers Aid and Travelers Aid is closed on weekends and holidays, (see below) any travel needed during these blackout periods must be arranged using a different MATP service.
- Travelers Aid will call to alert you of the driver’s arrival time, the make and model of the car, the company of the car (Uber, Lyft or zTrip) and the name of the driver.
- The driver will already know your name and destination when s/he arrives.
- You must be ready when the driver arrives for pick-up to or from your appointment.
- No assistance is provided to the rider by the Uber, Lyft or zTrip driver.
- MATP ride-hailing does not provide transportation to pharmacies for prescription pick-up.

## Travelers aid is closed on weekends and some holidays

Travelers Aid is closed on weekends and on the following holidays, so you cannot use MATP ride-hailing on weekends or the holidays listed below.

- New Year’s Day (Jan. 1)
- President’s Day (third Monday in February)
- Good Friday (Friday before Easter)
- Memorial Day (last Monday in May)
- Independence Day (July 4)
- Labor Day (first Monday in September)
- Veterans’ Day (November 11)
- Thanksgiving Day (fourth Thursday in November)
- Day after Thanksgiving (fourth Friday in November)
- Christmas Day (December 25)

## **Scheduling an MATP ride-hailing “to” trip**

- If you have been referred by MATP to Travelers Aid to utilize ride-hailing service and have registered for this service, you may contact Travelers Aid at 412-436-9621 so they can schedule your ride.
- You must call Travelers Aid to schedule your trip between 8:30 am and 3:00 pm, Monday through Friday up to one week ahead but at least the day before your appointment.
- You must schedule Monday pick-ups no later than 3:00 pm the previous Friday.

## **Requesting an MATP ride-hailing “return” trip**

All calls to request a return trip using ride-hailing service must be made to Travelers Aid at 412-436-9621 by 4:00 pm.

## **Making your own ride-hailing arrangements**

Customers who meet certain criteria may be able to book trips on their own using a smartphone. Contact Travelers Aid at 412-436-9621 Monday through Friday between 8:30 am to 3:00 pm for more details.

**Allegheny County**  
**Department of Human Services**  
One Smithfield Street  
Pittsburgh, Pennsylvania 15222  
[www.alleghenycounty.us/dhs](http://www.alleghenycounty.us/dhs)

*Current as of August 2018*

## **Proof of Age Documents**

Clients 65 years of age and older who we determine need shared ride service, but who are not currently registered with ACCESS, will be required to provide us with acceptable proof of age.

The following documents are acceptable:

- ✓ BIRTH CERTIFICATE
- ✓ DRIVER'S LICENSE
- ✓ PA PHOTO IDENTIFICATION CARD (PENNDOT NON-DRIVER'S LICENSE)
- ✓ PASSPORT
- ✓ PACE CARD
- ✓ VERIFICATION STATEMENT FROM SOCIAL SECURITY ADMINISTRATION  
(CALL 1-800-772-1213 TO REQUEST A LETTER)
- ✓ MILITARY DISCHARGE PAPERS
- ✓ RESIDENT ALIEN CARD

The copy must be clear and legible.

Revised 4-24-18

# ALLEGHENY COUNTY HOLIDAYS 2019

Medical Assistance Transportation Program  
MATP Office is closed on the following dates:

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<u>HOLIDAYS</u>	<u>FALLS ON</u>	<u>OBSERVED</u>
New Year's Day	Tues. January 1, 2019	Tues. January 1, 2019
Martin Luther King Day	Mon. January 21, 2019	Mon. January 21, 2019
President's Day	Mon. February 18, 2019	Mon. February 18, 2019
Primary Election Day	Tues. May 21, 2019	Tues. May 21, 2019
Memorial Day	Mon. May 27, 2019	Mon. May 27, 2019
Independence Day	Thurs. July 4, 2019	Thurs. July 4, 2019
Labor Day	Mon. September 2, 2019	Mon. September 2, 2019
Columbus Day	Mon. October 14, 2019	Mon. October 14, 2019
Veteran's Day	Mon. November 11, 2019	Mon. November 11, 2019
Thanksgiving Day	Thurs. November 28, 2019	Thurs. November 28, 2019
Christmas Day	Wed. December 25, 2019	Wed. December 25, 2019
New Year's Day	Wed. January 1, 2020	Wed. January 1, 2020

When the Pittsburgh Public Schools close because of bad weather, ACCESS carriers will automatically cancel your trips unless you receive life sustaining renal dialysis, chemotherapy, and radiation therapy. Extreme weather conditions may delay or restrict your ACCESS transportation service if road conditions are unsafe.

**Allegheny County Department of Human Services**  
**Voluntary Survey**

**Please check the description that most closely identifies your current marital status:**

Divorced	Never Married
Widowed	Married
Separated	

**Please check the description that most closely identifies the educational level you last completed:**

Pre-school (0-3 years old)	Alternative School
Pre-school (4 years old - Kindergarten)	GED
Kindergarten – 4 <sup>th</sup> Grade	1-3 Years of College/Business/ Technical School
5 <sup>th</sup> – 7 <sup>th</sup> Grade	4 Years of College/Business/ Technical School
Special School 1-3 years	Graduate or Professional School 1 or more years
Special School 4-6 years	None
1-3 years of High School/ Vocational/ Technical School	Unknown
4 years of High School/Vocational/ Technical School	

**Please check the description that most closely identifies your current state of employment:**

Affirm. Industry employ (20 hours or less per week)	Part time employment and in school
Affirm. Industry employ (21 hours or more per week)	Part time
After school/summer employment	Prevocational training
Attending college (6 or less credits)	Retired
Attending vocational school/training	Seeking employment
Basic academic preparation	Sheltered employment
Disabled	Sheltered Workshop
Full time employment	Supported employment (20 hours or less per week)
Full time Special Day Treatment	Supported/transitional employment
Full time in regular class	Transitional employment (20 hours or less per week)
Full time student	Transitional employment (21 or more hours per week)
Home bound Instruction	Unemployed
Homemaker	Work Study
Leave of Absence	

**Please check the description that most closely identifies your ethnicity:**

Hispanic

Non-Hispanic

**Please check the description that most closely identifies your current living arrangement:**

Correctional facility  
CYF residential system  
DA residential system  
Hospital  
ID residential system  
MH residential system  
Nursing home

Personal care/other privately  
purchased housing  
State system  
Homeless or Shelter/Mission  
Independent (alone or with  
family/friends)  
Independent with supports  
Independent with no supports

**Please check the description that most closely identifies your race:**

Asian  
Black  
Native American/Alaskan Native  
Pacific Islander  
White  
Other  
Unknown