

FISCAL YEARS 2023/24, 2024/25, AND 2025/26.

# Measure X Senior & Disabled Transportation Program

Program Application

## Required Contents

Applications are due via email to Aaron Hernandez, program coordinator,  
([aaron@tamcmonterey.org](mailto:aaron@tamcmonterey.org)) on **Thursday, December 1, 2022 at 12:00 P.M. PST.**

The application must be submitted in the format noted below and include:

- Proposal Signature Page (PDF format)
- Program Application (Word Document)
- Project Budget (Excel Spreadsheet)
- Project Timeline (Word Document)



## Proposal Signature Page

If selected for funding, the information contained in this application will become the foundation of the **Funding Agreement** with TAMC. To the best of my knowledge, all information contained in this application is true and correct.

**Signed:**

**Print Name:**

Jennifer L. Ramirez

**Title:**

Executive Director

**Date:**

November 30, 2022

## Applicant Information

**Implementing Organization's Name:**

Partnership for Children

**Grant Amount Request:**

\$459,520

**Contact (name and title):**

Jennifer L. Ramirez, Executive Director

**Contact Email:**

jennifer@partnerforkids.org

**Contact Phone Number:**

831-422-3002

If the applicant is not a 501(c)(3) organization, then the applicant must partner with an organization that is and can serve as a fiscal sponsor. The applicant must complete the following information about the fiscal sponsor.

**Name of Fiscal Sponsor:**

\_\_\_\_\_

**Contact (name and title):**

\_\_\_\_\_

**Contact Email:**

\_\_\_\_\_

**Contact Phone Number:**

\_\_\_\_\_

**Tax ID #:**

\_\_\_\_\_



## Program Application

### Project Title

*Provide a brief project title.*

Transportation Services for Children Living with Serious Illness

### Organization’s History

*Provide a brief description of your organization’s history providing services to seniors and/or people with disabilities in Monterey County.*

Partnership for Children’s mission is to increase access to medical care for children living with serious illness and to support their families. Partnership for Children (PFC) began in 2007 as a program of Children’s Hospice and Palliative Care Coalition. For fifteen years, PFC has been providing transportation and family support services to children living with serious, life-threatening illnesses, increasing access to medical care and supporting families during times of crisis. In April 2016, Executive Director Jennifer Ramirez established PFC as a standalone organization. For the past fifteen years, PFC has been effectively advocating on behalf of children with life-threatening conditions and working to address gaps in services at the local level. Early on, PFC recognized that inadequate transportation and lack of family support were two key barriers to care for children living with life-threatening conditions such as cancer, cystic fibrosis, autoimmune disorders, and genetic conditions. The organization quickly set about seeking to develop programs to overcome these obstacles to care. PFC’s programs have contributed significantly to reduced emergency room visits and hospitalizations for children receiving services, as well as reduced stress on families in caring for their child. PFC has more than tripled the number of children and families served, and has increased access to medical care significantly.

### Project Summary and Need (1,000 words max.)

*Describe the project to be funded, including the main services provided and any expected project deliverables. Explain the transportation need that the project is addressing.*

Partnership for Children began in 2007 in response to the non-existence of transportation to medical care services and a lack of family support services available for children living with all types of serious, life-threatening illnesses in our local communities, which was identified through a series of community assessments. Children and youth living with a serious, life-

threatening diagnosis require consistent care and monitoring from hospital-based pediatric specialty physicians. Ensuring that children have access to this care is critical in maintaining the highest level of health status possible for the child, as well as reducing emergency room visits and hospitalizations.<sup>i</sup> Unfortunately, for children living in Monterey County, the closest children's hospitals are hours away at LPCH at Stanford in Palo Alto and UCSF Benioff Children's Hospital in San Francisco. For many families, transportation is a pervasive barrier to accessing medical care for several reasons: the family does not own a vehicle, the family vehicle is used by the working parent, or the family does not have the means to pay for gas. Lack of transportation as a barrier to healthcare access leads to rescheduled or missed appointments and delayed care. Approximately 950,000 children nationwide miss or delay medical care due to transportation issues.<sup>ii</sup> The consequences are poor management of chronic illness and declining health outcomes. Coordination and provision of safe, reliable, and free transportation to medical appointments is critical to the health and well-being of children living with a serious illness. Partnership for Children's transportation services address these challenges by providing safe, reliable, free transit to medical appointments, as well as gas card subsidies to mitigate financial barriers.

Partnership for Children's transportation services address the issue of children's access to specialty medical care for children with life-threatening conditions in Monterey County by providing safe, reliable, and free transit to medical appointments primarily at LPCH at Stanford and UCSF Benioff Children's Hospital, as well as throughout the local area and Northern California. A two-tiered transport system offers direct-ride services and gas subsidy services to qualified families

Upon referral, PFC assesses whether the family has access to a reliable, safe vehicle and if a gas card subsidy calculated to cover the cost of the trip would be sufficient to meet their transportation needs. For many families this has proven to be adequate means of support. PFC assigns the family a reloadable gas card to facilitate a streamlined reload process. For each verified medical appointment, PFC reloads the gas card with the appropriate funds to cover the cost of the trip. In the past year, there has been both an increase in the demand for gas subsidy services and the cost of providing those services due to an increase in fuel prices.

Many families do not have direct access to a vehicle for transportation for various reasons such as no vehicle is owned, no parent has a valid driver's license, the working parent uses the vehicle for work, the child needs constant supervision while travelling, or a variety of other reasons. For these families, we arrange for door-to-door direct transports. Utilizing agency vehicles, Partnership for Children contracts with professional drivers to pick the child and family up from their home, drive them to the medical appointment, and drive them back

home. Agency-owned vehicles are driven approximately 50,000 miles per year, resulting in an average usability time period of three years for each vehicle.

The Program Services Coordinators (PSC) will provide case management services for each family, performing an intake and assessment and determining which services are needed. The PSCs will maintain consistent contact with each family, with a minimum of monthly contact. Direct rides will be provided, which includes planning and coordination with the families, referral sources, medical staff, and the professional driving service. The PSCs will also process all gas card subsidies and serve as direct liaison with the gas card company.

Expected project deliverables include case management, and the coordination and provision of transportation services to a minimum of 125 children and youth living with life-threatening conditions throughout Monterey County. PFC will provide a minimum of 1,725 transports to medical care in the form of direct rides (approximately 375) and gas card subsidies (approximately 1,350) with the goal of increasing access to medical care, resulting in significant health benefits. The gas card subsidies deliverable has increased by 50% over the Cycle 2 contract deliverable (900).

*How many part-time, full-time staff and/or volunteers will be involved in implementing the proposal?*

Implementing the proposal will be three full-time staff, the Executive Director and two Program Services Coordinators.

## **Project Questions**

Applicants must answer the following questions, **as applicable**. If a question does not apply to the project, indicate “not applicable” **with a brief explanation**. Do not leave blank fields. *Answers are limited to 500 words for each question.*

## Program Purpose & Goals – 25 points

1. Explain how your organization currently supports the transportation needs of seniors and/or people with disabilities. (500 words max.)

*“Partnership for Children is an organization that is very near and dear to our hearts. Our family first learned about them when our daughter Olivia was diagnosed with brain cancer in 2015. Their support during this time is something we will forever be grateful for. It was not uncommon for us to put in 200 miles a day, up to 1,000 miles a week between my wife and I. Living on the road and in the hospital gets expensive and exhausting to say the least. With COVID still spreading, gas prices rising, safety is crucial to an immune-compromised child’s survival. Taking public transportation, Uber, or taxi rides isn’t an option for many families. The fact that you can call somebody in your area code and have someone answer and know your child’s name makes all the difference in the world. We’ve seen and felt this firsthand.” – Franz Ingram, Dad to Olivia*

The purpose of our Transportation Program is to ensure that children like Olivia have access to the medical care they need to live as fully as possible, and that families feel supported and empowered. PFC’s programs and services are family-centered. We listen to families as they share their unique situations related to family structure, their child’s specific diagnosis and treatment plan, economic situation, supports and resources being utilized and those unmet, and many other factors that help determine the wrap-around services they will be provided to meet their unique needs. Families know and trust Partnership for Children, and that is what makes the transportation supports provided unique.

Partnership for Children is the only fully-dedicated provider of transportation services to and from medical appointments and treatments for children living with all types of life-threatening conditions/disabilities in Monterey County. PFC’s direct door-to-door transports and gas card subsidies remove barriers to accessing medical care for children in the form of appointments, treatments, surgeries, hospital discharges, family visits during hospitalizations, and more.

Currently, we serve over 125 children living with serious illness and over 500 family members each year in Monterey County, mitigating transportation barriers to medical care for over 1,600 medical appointments and treatments per year.

2. Does your organization provide transportation or purchase transportation from others? Explain. (500 words max.)

When Partnership for Children began in 2007, the program utilized volunteer drivers to provide rides. This worked well in the beginning, as the program was serving no more than 50 children with a small amount of transports at any given time for the first four years. Over time, as the program grew and more children were being served, utilizing volunteer drivers no longer met the demands of the program. Volunteers were burned out, and children began missing medical appointments due to poor volunteer availability and reliability. The majority of the transports are to hospitals in the bay area, with an average of 160 miles round trip per transport, and many children and families travelling up to 300 miles round trip for medical care. In 2011, PFC began contracting with a professional driving service to provide rides, and over the next three years, the number of children served and the number of rides provided tripled. The driving service utilizes PFC owned, registered, and maintained vehicles and picks up the child and family from the home, drives to the appointment, waits, and drives the child and family home. Rides are also provided for hospital discharges, as well as for parents to visit a child who is hospitalized. PFC also pays for the gas expense incurred to provide the rides. Contracting with a professional driving service significantly increases safety, availability, and reliability of services.

PFC provides gas subsidies to families in the form of reloadable gas cards and coordinates all services. PFC has a purchase agreement with Shell gasoline company with a negotiated 2% discount. Families are assigned a reloadable Partnership for Children and Shell branded gas card and the card is reloaded via an online system for verified medical appointments.

3. Explain how the project coordinates with, and avoids duplication of, other efforts in the county to increase (provide new or alternate) transportation services to seniors and/or people with disabilities. (500 words max.)

Partnership for Children's Executive Director serves on the Mobility Advisory Committee for MST to stay informed on efforts to increase transportation services to people with disabilities in Monterey County and to coordinate with other providers when appropriate.

Partnership for Children attends resource fairs and community-based events for outreach purposes, as well as to stay informed as to the efforts of other community organizations. Outreach presentations are also provided to various groups in the community such as the Community Action Committee, local Rotary clubs, local Girl Scouts and Boy Scouts, volunteer service organizations, and many others.

Partnership for Children is the only fully-dedicated provider of transportation services to medical care, in the form of rides and gas subsidies, for children living with serious illness in Monterey County. PFC has a strong partnership with Lucille Packard Children’s Hospital at Stanford, and is the first point of referral for all children qualifying for PFC services in Monterey County. UCSF Benioff Children’s Hospital also refers directly to PFC for transportation services. Locally, PFC has a strategic partnership with Coastal Kids Home Care, the only pediatric in-home palliative and nursing care services for children living in Monterey County; all referrals for transportation services are sent to PFC.

Central Coast Alliance for Health (CAAH) provides limited ride services to individuals with Medi-Cal insurance; however, there is a mutual agreement between PFC and CAAH that the services provided by CAAH do not meet the complex needs and service demands of the families that PFC serves and that these children and families are best served by PFC’s fifteen years of experience and program development for this specific population. PFC is recognized by CAAH as the transportation to medical care provider for this specific population.

There are no organizations within the community that provide gas subsidy assistance for the population served.

## Program Benefits – 30 points

4. Explain how the Measure X grant funding will increase (provide new or alternate) transportation services to:

a. Give seniors more transportation options. (500 words max.)

Not applicable. PFC’s services are provided to children and youth ages birth through 21 years of age.

b. Support independent travel by people with disabilities. (500 words max.)

Measure X Cycle 3 grant funding will maintain the increased level of rides services established with Measure X Cycle 2 funding. Cycle 2 funding increased transportation services for children living with serious illness in Monterey County, supporting independent travel to medical care by children with disabilities. Provision of services to a child with a disability is different from services to adults and seniors as the parents or guardians must also be served in order to facilitate independence on behalf of the child. Parents and guardians of the children being

served can independently access PFC transportation services without dependence on outside help, allowing for families to independently manage the health and well-being of their child. Without proper specialty medical care, children living with serious illness experience worsening of their medical condition and overall health, leading to emergency room visits and hospitalizations. Ambulance rides and hospital stays are not conducive to independent living and travel for the child.

Measure X Cycle 3 grant funding will support existing transportation services expansions, which were supported with Measure X Cycle 2 funding. These expansions included increasing direct program staffing from one 0.5 FTE Coordinator position to two 1.0 FTE Coordinator positions in order to meet growing demand for services and to continue to provide quality effective services. Expansions also included increasing the maximum number of rides provided per day from four to five and allowing for no maximum number of rides per child over any given timeframe. Other expansions included the removal of a four appointment per month per child gas card subsidy maximum, which was expanded to allow for a child and family to receive gas subsidy assistance for all appointments to meet the full need. Over the past three years under Measure X Cycle 2 funding, gas card subsidy services have increased 40-50% overall (with the exception of the time periods during children's hospital closures during the covid pandemic).

This Measure X grant funding request also includes the purchase of a vehicle to use for rides to medical appointments. PFC vehicles are driven an average of 50,000 miles per year, resulting in approximately three years usage. The purchase of this vehicle will allow PFC to continue to provide up to five rides per day as it will replace a vehicle that was taken out of service in September 2022. PFC purchases Toyota Prius vehicles to decrease overall gas cost. PFC has access to a wheelchair-accessible van through its partnership with LPCH at Stanford when needed.

- c. Provide safer and more reliable senior transportation services. (500 words max.)

Not applicable. PFC's services are provided to children and youth ages birth through 21 years of age.

## Feasibility – 15 points

5. Are there any actions required by other organizations to implement the proposed project? (500 words max.)

There are no actions required by other organizations to implement the proposed project, other than the children's specialty hospitals and community organizations sending referrals of new children and families who qualify for PFC services.

6. What will happen to the proposed project if Measure X grant funding is not awarded (e.g. loss of matching funds, impacts on overall project vision, project momentum, timing difficulties, etc.)? (500 words max.)

If Measure X grant funding is not awarded, program services will continue to be provided at reduced levels. Previously existing limits such as four appointments per month per child for gas subsidies will be put back in place and additional program limits may be instituted for rides in response to budgetary restrictions. Without the purchase of the vehicle under this funding request, the maximum number of rides to be provided on any given day will reduce from five to four, resulting in ride requests being declined on days where more than four rides are requested.

### **Geographic Equity – 15 points**

7. Identify which sub-area of Monterey County (North Monterey County, Greater Salinas Area, Monterey Peninsula, South Monterey County, Big Sur Coast) this project will benefit. (500 words max.)

Partnership for Children's services are provided throughout all areas of Monterey County, including the Greater Salinas Area, South Monterey County, North Monterey County, and the Monterey Peninsula.

Approximately 25% of children served are residents of South Monterey County. The need for transportation services in this area and the cost of service provision is amplified due to the geographic location. For example, a child living in King City and receiving medical care at UCSF Benioff Children's Hospital in San Francisco experiences a minimum of nine hours round-trip travel time for an appointment, and that does not include the time of the actual appointment. Children living in King City, and their families, can endure up to a 16-hour day for an appointment.

8. Identify which sub-areas (North Monterey County, Greater Salinas Area, Monterey Peninsula, South Monterey County, Big Sur Coast) the proposed project will provide trips. (500 words max.)

Partnership for Children will provide trips for children living with serious illness throughout all areas of Monterey County, including the Greater Salinas Area, South Monterey County, North Monterey County, and the Monterey Peninsula. Trips will be provided to any location in which the child receives medical care which includes Lucille Packard Children’s Hospital at Stanford (with locations throughout the Northern California Bay Area), UCSF Benioff Children’s Hospital, Oakland Children’s Hospital, children’s specialty clinics in Sacramento, and locally within Monterey County.

9. Describe partnerships with other entities and their corresponding roles (if any) in the proposed project. (500 words max.)

Partnership for Children receives referrals directly from the children’s specialty hospitals, as well as local community organizations. PFC has a strong partnership with LPCH at Stanford, and is the first point of referral for all children qualifying for PFC services in Monterey County. UCSF Benioff Children’s Hospital also refers directly to PFC for transportation services. Locally, PFC has a strategic partnership with Coastal Kids Home Care, the only pediatric in-home palliative and nursing care services for children living in Monterey County; all referrals for transportation services are sent to PFC. Referrals are also received from Monterey County Office of Education, San Andreas Regional Center, and other local agencies.

### **Cost Effectiveness – 15 points**

10. Explain how your organization’s services are provided:

- a. Number of trips and average cost per trip. (500 words max.)

Partnership for Children expects to provide a minimum of 375 direct transports to medical appointments for children and youth living with serious illness throughout Monterey County. Most appointments are at LPCH at Stanford in Palo Alto and UCSF Benioff Children’s Hospital in San Francisco. PFC contracts with professional drivers at a below market cost rate. The average cost per trip is \$195, which includes the cost of the driver and gas with the average round-trip mileage per

appointment at 160 miles and up to 300 miles per trip (excluding Sacramento appointments).

- b. Number of non-trip mobility services provided and average cost per non-trip mobility service provided. (500 words max.)

Partnership for Children expects to provide a minimum of 1,350 non-trip mobility services in the form of gas subsidies to cover the round-trip cost of medical appointments for children and youth living with serious illness throughout Monterey County. Most appointments are at LPCH at Stanford in Palo Alto and UCSF Benioff Children's Hospital in San Francisco. The average cost per non-trip gas subsidy provided is \$37 with the average round-trip mileage per appointment at 160 miles and up to 300 miles per trip (excluding Sacramento appointments).

#### 11. Submit a completed Project Budget.

*The project budget provides a cost estimate reflecting all costs associated with the project by fiscal year. Identify costs to be funded by the Measure X grant and costs covered by other funding sources (see **Appendix A** of the Program Guidelines for a sample Project Budget template).*

---

<sup>i</sup> Wallace, R., Hughes-Cromwick, P., Mull, H., Bologna, J. Cost Benefit Analysis of Providing Non-Emergency Medical Transportation. Transportation Research Board: Washington, D.C. October 2005.

<sup>ii</sup> Ibid.

Project Budget

Partnership for Children: Transportation Services for Children Living with Serious Illness

	TOTAL Measure X Budget	FY 23/24	FY 24/25	FY 25/26	TOTAL Matching Funds	TOTAL Project Cost
<b>EXPENSES</b>						
<b>Personel Expenses</b>						
Executive Director	\$ 12,750.00	\$ 4,250.00	\$ 4,250.00	\$ 4,250.00	\$ 103,275.00	\$ 116,025.00
Program Services Coordinators (2)	\$ 130,650.00	\$ 43,550.00	\$ 43,550.00	\$ 43,550.00	\$ -	\$ 130,650.00
Taxes and Benefits	\$ 43,020.00	\$ 14,340.00	\$ 14,340.00	\$ 14,340.00	\$ 30,980.00	\$ 74,000.00
<b>Total Personel Expenses</b>	<b>\$ 186,420.00</b>	<b>\$ 62,140.00</b>	<b>\$ 62,140.00</b>	<b>\$ 62,140.00</b>	<b>\$ 134,255.00</b>	<b>\$ 320,675.00</b>
<b>Other Expenses</b>						
Rides - Professional Drivers	\$ -	\$ -	\$ -	\$ -	\$ 176,400.00	\$ 176,400.00
Gas for Rides	\$ 43,200.00	\$ 14,400.00	\$ 14,400.00	\$ 14,400.00	\$ -	\$ 43,200.00
Gas Card Subsidies	\$ 151,200.00	\$ 50,400.00	\$ 50,400.00	\$ 50,400.00	\$ -	\$ 151,200.00
Vehicle Purchase	\$ 28,000.00	\$ 28,000.00	\$ -	\$ -	\$ 28,000.00	\$ 56,000.00
Vehicle Maintenance	\$ 8,400.00	\$ 2,800.00	\$ 2,800.00	\$ 2,800.00	\$ 8,400.00	\$ 16,800.00
Rent and Utilities	\$ 42,300.00	\$ 14,100.00	\$ 14,100.00	\$ 14,100.00	\$ 67,500.00	\$ 109,800.00
<b>Total Other Expenses</b>	<b>\$ 273,100.00</b>	<b>\$ 109,700.00</b>	<b>\$ 81,700.00</b>	<b>\$ 81,700.00</b>	<b>\$ 280,300.00</b>	<b>\$ 553,400.00</b>
<b>TOTAL GRANT REQUEST</b>	<b>\$ 459,520.00</b>	<b>\$ 171,840.00</b>	<b>\$ 143,840.00</b>	<b>\$ 143,840.00</b>	<b>\$ 414,555.00</b>	<b>\$ 874,075.00</b>



FISCAL YEARS 2020/21, 2021/22, AND 2022/23.

# Measure X Senior & Disabled Transportation Program

Project Timeline

## Required Contents

The project timeline must outline the main tasks needed to implement the project and include a timeline to complete each task. Sample project tasks are provided below.

# Partnership for Children: Transportation Services for Children Living with Serious Illness

---

## Project Tasks

### 1. Project Initiation

#### Task 1.1 Project Kick-Off Meeting

- **Brief Task Description:** *Partnership for Children will hold a kick-off meeting with TAMC and other project partners to discuss grant procedures and project expectations including involving, quarterly reporting, and all other relevant project information.*
- **Project Deliverable:** *Meeting Notes and Signed Grant Funding Agreement*
- **Expected Completion Date:** *June/July 2023*

#### Task 1.2 Project Monitoring

- **Brief Task Description:** *Ongoing project monitoring of projected outcomes and finances.*
- **Project Deliverable:** *Quarterly project reports and invoicing.*
- **Expected Completion Date:** *Ongoing*

### 2. Fiscal Management

#### Task 2.1 Financial Review and Audit

- **Brief Task Description:** *Review all financial reports and ensure budgetary controls*
- **Project Deliverable:** *Quarterly financial reports; Annual tax filings and financial audit*
- **Expected Completion Date:** *Monthly & Annual throughout 2026*

#### Task 2.2 Quarterly invoicing & progress reports

- **Brief Task Description:** *Staff will compile expense documents and provide progress stats*
- **Project Deliverable:** *Quarterly invoices and progress reports*
- **Expected Completion Date:** *Quarterly throughout 2026*

#### Task 5.3 Annual reports



- **Brief Task Description:** *Reporting on progress of the year's achievements or barriers to meeting expected goals.*
- **Project Deliverable:** *Annual Report*
- **Expected Completion Date:** *Annually throughout 2026*

### **3. Public Outreach**

#### Task 3.1 Media Releases

- **Brief Task Description:** *Media releases on project funded through local news outlets, social media accounts, and agency website.*
- **Project Deliverable:** *Media releases, news articles, social media posts, and agency website update.*
- **Expected Completion Date:** *August 2023*

#### Task 3.2 Community Presentations & Resource Events

- **Brief Task Description:** *Coordinate community presentations with interested groups and participate in community resource fairs to spread awareness of programs and services.*
- **Project Deliverable:** *Increased community awareness of transportation programs and services.*
- **Expected Completion Date:** *Ongoing through 2026*

#### Task 3.3 Community Representation

- **Brief Task Description:** *Participate in bi-monthly meetings of MST's Mobility Advisory Committee.*
- **Project Deliverable:** *Community partnerships; meeting notes; increased awareness internally of community transportation services and issues, and externally of agency transportation programs and services.*
- **Expected Completion Date:** *Ongoing through 2026*

### **4. Transportation Services**

#### Task 4.1 Purchase Vehicle

- **Brief Task Description:** *Purchase new Toyota Prius vehicle to replace older vehicle in fleet.*



- **Project Deliverable:** *Purchased vehicle*
- **Expected Completion Date:** *July 2023*

#### Task 4.2 Maintain FTE of Program Services Coordinators

- **Brief Task Description:** *Maintain two Program Services Coordinator positions at 1.0 FTE.*
- **Project Deliverable:** *2 full-time Program Services Coordinator positions*
- **Expected Completion Date:** *Ongoing through 2026*

#### Task 4.3 Maintain Expanded Rides Services

- **Brief Task Description:** *Scheduling and delivery of door-to-door rides to medical care for children living with serious illness. Maintain the number of rides available per day at five, with no implementation of maximum service limits.*
- **Project Deliverable:** *Quarterly and annual rides reports*
- **Expected Completion Date:** *Ongoing through 2026*

#### Task 4.4 Maintain Expanded Gas Subsidy Services

- **Brief Task Description:** *Coordination and provision of gas subsidies to cover the cost of gas for transportation to and from medical care for children living with serious illness. Maintain removal of maximum service limit of four medical appointment gas card subsidies per month per child and continue to provide gas card subsidies for unlimited appointments to fully meet needs.*
- **Project Deliverable:** *Quarterly and annual reports on number of medical appointments covered by gas card subsidies*
- **Expected Completion Date:** *Ongoing through 2026*