



## **TRANSPORTATION GUIDELINES**

### **ADMISSION TRANSPORTATION**

Waypoint Recovery Center will assist with providing transportation to our facility at the time of admission if a family member or friend is unable to transport.

Due to the number of transports where the Waypoint driver arrives and the individual has decided not to come, Waypoint will require a credit card on file prior to the admission's transport. If you fail to be present or unwilling to go once our driver arrives, your credit card will be charged a \$200.00 fee to cover the cost of our driver and expenses.

However, if you do admit, transportation to the facility is free within a 150- mile radius.

### **DISCHARGE TRANSPORTATION:**

Waypoint Recovery Center does not provide transportation for patients at the time of discharge with the following exceptions:

1. Only patients who have successfully completed a full length of stay are eligible for transportation at discharge within a 75- mile radius.
2. Waypoint will provide admission and discharge transportation to all veterans referred through the VA CCN network.
3. If the patient is stepping down to a sober living home or a step-down residential program within SC, Waypoint will transport to the new program.
4. If a patient needs transportation outside of a 150- mile radius, Waypoint will purchase a bus ticket for the patient (only patients who have completed full treatment).
5. Waypoint will not provide any discharge transportation to patients who are here for detox only or shorter than a 30- day length of stay even if Waypoint provided transportation to the facility at admission.
6. Waypoint may arrange transportation home by a third- party driver, but the cost has to be paid prior to discharge.
7. If a patient needs transportation to or from an airport, Waypoint will provide transportation to and from the airports in Charleston, Columbia, and Charlotte.
8. Waypoint does not provide or arrange for any transportation for patients who leave "against staff advice."

I have read and understand the Waypoint policy on transportation for admission and discharge.

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Waypoint Staff: \_\_\_\_\_ Date: \_\_\_\_\_