

Waiver of Liability: Personal Choice Driver (Driver)

Member Name _____ Medicaid ID# _____ DOB _____

Transportation **Providers** help people on Medicaid and Dr. Dynasaur get rides to doctor appointments and to pick up prescriptions. At times the Department of Vermont Health Access (DVHA) may allow clients to choose their own driver and vehicle. If this happens, the Vermont Public Transportation Association (VPTA) will pay the driver chosen by **the Member**.

I understand that the member above has chosen me to drive him/her to one or more doctor appointments or to pick up prescriptions.

If I choose to drive the Member named above, I agree to the following:

I am not an employee or agent of the VPTA. The VPTA has not chosen me as a driver for this person, nor do they have any control over how I operate the vehicle used to transport the Member. I understand that the only responsibility of the VPTA is to pay me, as the driver, at a rate set by DVHA. I assume full responsibility for all injury or damage which may arise out of my driving the Member and I waive any claims against and agree to hold harmless the VPTA and its employees and directors from any and all claims arising from injury, damage, expense, or loss which may occur in my driving the Member to and from medically necessary appointments or to pick up prescriptions. I also understand that it is my sole responsibility to follow all laws governing vehicles and drivers. This waiver is binding on me, my family and my heirs, assigns, executors and administrators.

- I understand that I may consult an attorney regarding this waiver.
- By signing below, I agree that I have carefully read this document, or had it read to me, and understand and agree with its terms.
- I am 18 or older and can sign legal documents, including this Waiver of Liability.

Signature of Driver

Date

Signature of Witness

Date

Waiver of Liability: Personal Choice Driver (Member)

Member Name _____ Medicaid ID# _____ DOB _____

Transportation Providers help people on Medicaid and Dr. Dynasaur get rides to doctor appointments and to pick up prescriptions. Typically, the Vermont Public Transportation Association (VPTA) will set up the rides and provide the drivers. However, I have been allowed by the Department of Vermont Health Access (DVHA) to pick my own driver.

If I have been allowed to have my own driver I understand and agree to the following:

I understand that the only responsibility of **the VPTA** is to pay the driver at rates set by DVHA. I waive any and all claims against **the VPTA** and its employees and directors arising from injury, damage, expense, or loss which may arise out of my being driven to my doctor appointments or to pick up prescriptions. I also understand that it is my sole responsibility to make sure my driver follows all laws governing vehicles and drivers. This waiver is binding on me, my family and my heirs, assigns, executors and administrators and applies to all Medicaid rides where I have chosen my own driver.

- I understand that I may consult an attorney regarding this waiver.
- By signing below, I agree that I have carefully read this document, or had it read to me, and understand and agree with its terms.
- I understand this waiver will not apply in the future if I have the VPTA provide rides for me.

Signature of Member or parent/legal guardian if minor

Date

Signature of Witness

Date