



Instructions

Mileage Reimbursement for Ground Transportation

It's easy to schedule a ride to your medical appointment and get a refund. Have a friend, neighbor or relative drive you to your appointment and the driver will get 50 cents for each mile they drive you.

Before Your Appointment

- Download the forms online at transdevhealthsolutions.com/ohp/memberresources/ or call Transdev at 1-866-790-8858. Ask them to fax or mail the:
 - Mileage Reimbursement Form
 - Internal Revenue Service (IRS) W-9 Form
- 2. Call Transdev Health Solutions at **1-866-790-8858** to schedule your trip.
- 3. When scheduling your trip, Transdev Health Solutions will give you the round trip distance in miles and your trip number. Write these two numbers on your Mileage Reimbursement Form.
- 4. Transdev Health Solutions will ask for the documents listed below when you schedule your trip. Your driver will need to provide these documents.
 - · Copy of driver's license
 - Copy of vehicle registration
 - Copy of proof of vehicle insurance
- 5. Complete one Mileage Reimbursement Form per driver. You can put up to six trips on one form.

Day of Your Appointment

- 1. Take the Mileage Reimbursement Form with you to your appointment.
- 2. Ask your provider's office to complete their name, phone number and sign the form.
- 3. Have the driver complete the IRS W-9 Form. Each driver must complete this form. You can download a copy of this form from our website at **TransdevHealthSolutions.com/OHP** on the Member Resources tab.

MQD AC21-005 Page 1 of 4





After Your Appointment

1. Complete the entire Mileage Reimbursement Form. Incomplete forms will not be accepted.

2. Sign your form.

3. Mail or email your Mileage Reimbursement and W-9 forms to the address below within 45 days of your trip day. Transdev Health Solutions recommends that you submit your forms at the end of each week. **Forms received after 45 days will not be paid.**

Mail: Transdev Health Solutions

Claims Department

PO Box 4128

Omaha, NE 68104

Email: <u>us.ths.hiclaims@transdev.com</u>

Reimbursement Time Frame

Upon receiving your request, Transdev Health Solutions reviews and verifies your paperwork according to Plan guidance. Allow up to 60 days to receive payment. Payments are issued on the $1^{\rm st}$ and $15^{\rm th}$ of each month.

Questions?

Have questions? Please call Transdev Health Solutions at **1-866-790-8858.** Or call 'Ohana Health Plan Customer Service at **1-888-846-4262 (TTY 711).** We are here for you Monday–Friday from 7:45 a.m. to 4:30 p.m. Hawai'i Standard Time.

MQD AC21-005 Page 2 of 4





Other information

'Ohana Health Plan complies with applicable Federal civil rights laws and does not discriminate, exclude people, or treat people differently because of race, color, national origin, age, disability or sex.

'Ohana Health Plan provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

'Ohana Health Plan provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, contact 1-888-846-4262 (TTY 711).

If you believe that 'Ohana Health Plan has failed to provide these services or discriminated in another way, you can file a grievance with:

'Ohana Health Plan Attn: Grievance Department 949 Kamokila Boulevard Suite 350 Kapolei, HI 96707 Toll-free: 1-888-846-4262

TDD/TTY: **711**

Fax: 1-813-865-6861

You can file a grievance in person or by mail or fax. If you need help filing a grievance we are available to help you. Call Customer Service toll-free at 1-888-846-4262 (TTY: 711).

You can also file a grievance with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

MQD AC21-005 Page 3 of 4





(English) Do you need help in another language? We will get you a free interpreter. Call 1-888-846-4262 (TTY: 711).

(Cantonese) 您需要其它語言嗎?如有需要,請致電 **1-888-846-4262**,我們會提供免費翻譯服務 (TTY: **711**)。

(Chuukese) En mi niit alilis lon pwal eu kapas? Sipwe angei emon chon chiaku ngonuk ese kamo. Kori 1-888-846-4262 (TTY: 711).

(French) Avez-vous besoin d'aide dans une autre langue? Nous pouvons vous fournir gratuitement des services d'un interprète. Appelez le 1-888-846-4262 (TTY: 711).

(German) Brauchen Sie Hilfe in einer andereren Sprache? Wir koennen Ihnen gern einen kostenlosen Dolmetscher besorgen. Bitte rufen Sie uns an unter 1-888-846-4262 (TTY: 711).

(Hawaiian) Makemake `oe i kokua i pili kekahi `olelo o na `aina `e? Makemake la maua i ki`i `oe mea unuhi manuahi. E kelepona i**ā 1-888-846-4262** `oe ia la kaua a e ha`ina `oe ia la maua mea `olelo o na `aina `e. (TTY: **711**).

(Ilocano) Masapulyo kadi ti tulong iti sabali a pagsasao? Ikkandakayo iti libre nga paraipatarus. Awagan ti **1-888-846-4262** (TTY: **711**).

(Japanese) 貴方は、他の言語に、助けを必要としていますか?私たちは、貴方のために、無料で通訳を用意できます。1-888-846-4262 (TTY: 711) まで、お電話にてご連絡ください。

(Korean) 다른언어로 도움이 필요하십니까? 저희가 무료로 통역을 제공니다. **1-888-846-4262** (TTY: **711**) 번으로 전화해 주십시오.

(Mandarin) 您需要其它语言吗?如有需要,请致电 1-888-846-4262,我们会提供免费翻译服务 (TTY: 711)。

(Marshallese) Kwoj aikuij ke jiban kin juon bar kajin? Kim naj lewaj juon am dri ukok eo ejjelok wonen. Kaalok **1-888-846-4262** (TTY: **711**).

(Samoan) E te mana'o mia se fesosoani i se isi gagana? Matou te fesosoani e ave atu fua se faaliliu upu mo oe. Telefoni mai: 1-888-846-4262 (TTY: 711).

(Spanish) ¿Necesita ayuda en otro idioma? Nosotros le ayudaremos a conseguir un intérprete gratuito. Llame al 1-888-846-4262 (TTY: 711).

(Tagalog) Kailangan ba ninyo ng tulong sa ibang lengguwahe? Ikukuha namin kayo ng libreng tagasalin. Tumawag sa 1-888-846-4262 (TTY: 711).

(Tongan) 'Oku ke fiema'u tokoni 'iha lea makehe? Te mau malava 'o 'oatu ha fakatonulea ta'etotongi. Telefoni mai 1-888-846-4262 (TTY: 711).

(Vietnamese) Bạn có cần giúp đỡ bằng ngôn ngữ khác không? Chúng tôi se yêu cầu một người thông dịch viên miễn phí cho bạn. Gọi số 1-888-846-4262 (TTY: 711).

(Visayan) Gakinahanglan ka ba ug tabang sa imong pinulongan? Amo kang mahatagan ug libre nga maghuhubad. Tawag sa 1-888-846-4262 (TTY: 711).

MQD AC21-005 Page 4 of 4