



OREGON COORDINATED CARE ORGANIZATIONS

Non-Emergency Medical Transportation

PROVIDER MANUAL



Table of Contents

Table of Contents 2

Note 3

Introduction 4

Member Eligibility 4

Transportation Providers 4

Purpose of this Manual 4

The Provider Service Agreement 4

Policies 5

Confidentiality 5

Legal Compliance 5

Insurance 6

Drivers 6

Vehicles 9

Inspections 12

Records 14

Procedures 14

Procedure 1: Become A Transportation Provider 14

Procedure 2: Accept Member Rides 15

Procedure 3: Receive Transportation Orders via OBSS 16

Procedure 4: Contact the Member 16

Procedure 5: Transport the Member 16

Procedure 6: Submit the Transportation Order for Payment via IOBSS 17

Ongoing Transportation 17

Accidents/Incidents 17

Fraud and Abuse 19

Requests After Hours 20

Appendices 21

Appendix A: Transdev's Contact Information 21

Appendix B: Vehicle Inspection Report 22

Appendix C: Accident/Incident Report 23

Note

Transdev North America, Inc. acquired the stock of First Transit, Inc. and the closing took place on March 6, 2023. First Transit, Inc. will continue to operate as its own, stand-alone legal entity as a wholly-owned subsidiary of Transdev North America, Inc. There is no change in the legal status of either company. As such, while the Transdev brand will be more visible going forward, no contractual assignments are required for any existing Transdev contracts.

This document has been updated to reflect the Transdev name and brand. Physical and web addresses, as well as contact names and details have also been updated where necessary.

Rest assured, Transdev's rebranding efforts will have no impact on and in no way effect how First Transit currently operates, the legal status First Transit, Inc., or the contractual relationships between First Transit, Inc. and our clients with whom they contract.

Introduction

Transdev has been contracted with Coordinated Care Organizations (CCOs) to provide Non-Emergency* Medical Transportation (NEMT) services to the Medicaid population enrolled in various Oregon counties.

Member Eligibility

To be eligible for NEMT services, a member must a) be eligible under the plan, b) be traveling to and from a covered medical service, and c) have arranged and been approved for the transportation prior to the taking place.

**Emergency vs. Urgent Care Emergencies merit a call to 911; they are situations*

Transportation Providers

To properly service the needs of our members and as part of our contractual responsibility, Transdev has established a network of qualified, licensed and insured subcontracted transportation providers offering several types or levels of transportation.

To maintain this network, Transdev continually seeks to increase the participation of companies in the network and to ensure that contracted providers maintain the high standards of quality on their vehicles and drivers as outlined by our credentialing criteria.

Purpose of this Manual

This Policies and Procedures Manual has been developed to assist our current and new transportation providers in the network – you, to understand the role in the Plan as well as to identify and meet subcontracted obligations.

The Provider Service Agreement

This manual is meant to complement, not replace, the Provider Service Agreement that transportation providers sign prior to transporting members. It is the responsibility of each Provider to read, understand and comply with all provisions of the agreement, which has been created in accordance with the guidelines set forth by the CCO's.

Please contact a Transdev manager for any questions relating to this manual of any section of the Provider Service Agreement.

Transdev's Contact Information can be found on Appendix A.

Policies

Following are some of the policies and procedures that govern the NEMT program as they pertain to confidentiality, legal compliance, insurance, vehicle standards and inspections, driver requirements and records-keeping. These policies and procedures, however, are not all-inclusive and may be subject to change at the discretion of Transdev.

Confidentiality

During the contract, the Transportation Provider may receive personal and medical information relating to the members receiving NEMT services. Per the Health Insurance Portability and Accountability Act (HIPAA), this Protected Health Information (PHI) can only be shared between the member, their medical provider, HFS (and contracted providers such as the Transportation Provider and Transdev), and individuals authorized by the member, and only for purposes directly connected with the care of the member or as required by a court of law.

For that reason, upon signing the Provider Service Agreement, all the owners of the Transportation Provider business are required to sign the Provider Agreement to Safeguard Client Information. By signing this agreement, they agree to safeguard the use and disclosure of member PHI in accordance with HIPAA and any other applicable federal and state statutes and regulations. They also agree to employ appropriate security in transmitting member information whether verbal or written and/or via magnetic media, email, fax, phone, etc., as well as to refrain from releasing any information without the prior consent of Transdev.

Additionally, any employee of the company who is or will be exposed to member PHI must sign the Employee Agreement to Safeguard Client Information. Employees include, but are not limited to, drivers, dispatchers, billing clerks, etc.

Failure to safeguard member information can result in termination of the Provider Service Agreement.

Legal Compliance

Transportation providers must at all times be compliant of all applicable local, state and federal laws and regulations and hold in good standing any and all required licenses and certifications.

Furthermore, providers must remain compliant with:

- all applicable local, state, and federal transportation safety standards Transdev policies and procedures
- all applicable industry and accreditation standards relating to the maintenance of vehicles and equipment, passenger and wheelchair accessibility, availability, functioning of seat belts, etc.
- the license-for-hire standards established by the State Department of Transportation (DOT) as well as any city or county in which the provider operates.
- OAR 410-136 rules for OREGON HEALTH AUTHORITY, DIVISION OF MEDICAL ASSISTANCE PROGRAMS Medial Transportation Services – Found at:
http://arcweb.sos.state.or.us/pages/rules/oars_400/oar_410/410_136.html

Transportation providers are prohibited from subletting or entering into lower tier subcontracts for the provision of any services under this agreement.

Transdev has an administrative agreement with the CCOs and oversees payment to the transportation providers. Direct any questions or issues regarding compensation to Transdev. Under no circumstances may the providers seek any type of compensation, remuneration or reimbursement or have any recourse against a member, CCOs or other parties other than Transdev for their transportation services to members.

Insurance

Transportation providers are required to obtain and maintain, at their sole expense, auto liability and general commercial liability insurance for amounts no less than:

- 500,000 for bodily injury and property damage to one person for any one accident
- 1,000,000 for bodily injury and property damage to two or more persons for any one accident

This insurance must cover all owned, hired, or non-owned vehicles used to transport members under the contract and must list Transdev and the Coordinated Care Organizations (CCOs) as additional insured.

Certificates for insurance must be supplied to Transdev prior to providing transportation services and at any time upon request during the term of the agreement or any extension thereof; this includes certificates of renewal or surcharge, cancellation notices, and/or verification of coverage. A 15-day advance, written notice must be provided to Transdev in the event of a cancellation, renewal, restriction, or non-renewal of any insurance coverage.

Drivers

Transportation providers must adhere to Transdev's criteria and procedures for the selection, qualification and training of drivers participating in the program, which include but are not limited to, the following items.

Background and Drug Checks

Potential drivers must submit to a criminal background check and drug-and-alcohol test. Drivers must be verified as not having been convicted of any crimes against other people or of any drug or alcohol-related offenses. Any exceptions to this rule can only be made with explicit consent from Transdev.

I: At a minimum, a passing criminal background check an individual means the following:

- 1) All drivers must be at least 21 years of age
- 2) All drivers must have a current valid driver's license with any required endorsements to operate the transportation vehicle to which they are assigned, and must have at least two (2) years of continuous driving experience within the United States. Any out-of-state driver's license holders need to provide a copy of their driving record, and applicants who haven't been residents of Oregon for the past ten (10) years must submit a copy of their out-of-state driving record for the years they were not Oregon residents
- 3) Drivers may not have any felony conviction involving physical harm or attempted physical harm to a person
- 4) Within the past ten (10) years, drivers may not have:
 - a. a felony conviction of any type
 - b. any suspension or revocation of driver's license that is driving-related, in any jurisdiction
- 5) Within the past five (5) years, drivers may not have:
 - a. a conviction for any criminal offense involving theft, robbery, burglary, assault, sex crimes, drugs, prostitution, or weapons;
 - b. a conviction for any traffic crime (may include, but not limited to: driving under the influence, reckless driving, attempt to elude a police officer, leaving the scene of an accident)
 - c. greater than ten (10) traffic infractions

- d. greater than five (5) serious traffic infractions
 - e. greater than five (5) motor vehicle accidents
 - f. any combination of serious traffic infractions and accidents (ie. two (2) accidents and three (3) moving violations)
- 6) Within the past twelve (12) months, drivers may not have:
- a. more than two (2) traffic infractions of any kind
 - b. more than four (4) infractions of any kind
- 7) Drivers must not have been convicted of any felony crimes and/or misdemeanors related to health care fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct; elder abuse; member abuse in connection with the delivery of a health care item or service; unlawful manufacture, distribution, prescription, or dispensing of a controlled substance; and any felony or misdemeanor conviction for child abuse, elderly abuse, domestic violence, criminal sexual conduct, drugs or weapons.

II: Verification that driver is not, and has never been, subject to exclusion or restriction from participation in the Medicaid or Medicaid programs or any other federal or state funded health program.

Providers must additionally establish a drug-free workplace policy statement and a substance abuse management and testing program. This testing must be performed prior to hire, randomly, after an accident or whenever reasonable suspicion is found.

Providers will also ensure that drivers have passed an OIG records check (<http://exclusions.oig.hhs.gov>) and are not listed on the Excluded Parties List System (www.SAM.gov).

Driver's License

A driver who receives a notice of license suspension, cancellation or revocation must inform his or her employer of the contents of the notice immediately or no later than the end of the business day after receiving the notice.

This verification must consist of a 3-year personal driving record check and a 3-year commercial or business driving record check or a 5-year combined check.

Training

Drivers must complete the following courses within 6 months of the date of hire:

- defensive driving course or equivalent
- passenger assistance and securement
- first aid, cardiopulmonary resuscitation, and blood spill procedures

Before allowing them to drive unsupervised, transportation providers must train and test their drivers to demonstrate and ensure adequate skills and capabilities to safely operate each type of vehicle or vehicle combination.

Transportation providers must provide drivers with explicit instructional and procedural training and testing in the following areas:

- briefing about the program, reporting forms, and the geographic area in which they will be providing service

- operational vehicle and equipment inspections
- familiarization with vehicle equipment
- basic operations and maneuvering
- boarding and alighting passengers
- operation of wheelchair lift and other special equipment and driving conditions
- defensive driving
- passenger assistance and securement
- awareness and handling of emergency and security threats
- epi pen use

Transportation providers must also provide their drivers with written operational and safety procedures addressing the following:

- communication and handling of unsafe conditions, security threats and emergencies
- familiarization and operation with safety and emergency equipment, wheelchair lift equipment and restraining devices
- application and compliance with applicable federal and state rules and regulations

Hours of Employment

From time to time, Transdev may request each vehicle driver's status, including the total days worked, on-duty hours and the time of reporting on-and-off duty each day. These reports should reflect adherence to the following guidelines:

- A driver's work period starts when they report to the Provider for duty or when they begin traveling from home to their first member pick up.
- Drivers must not drive more than 12 hours or drive after been on-duty for 16-hours in a 24-hour period.
- Drivers must be off-duty a minimum of 8 consecutive hours. Up to one (1) additional hour of work is allowed if it is necessary to reach a regularly established relief or dispatch point.
- Drivers must not be on duty for more than 72 hours in 7 consecutive days. If they reach that maximum, they must have a minimum of 24 consecutive hours off-duty before returning to work.
- A driver can only be permitted to drive for more than the regulated hours due to conditions such as adverse weather, disaster, security threat, a road or traffic condition, medical emergency or accident.
- Drivers must not be allowed to drive if they are impaired by fatigue, illness or other causes that make beginning or continuing driving unsafe.

While Transporting Members

- Drivers must always identify themselves by name and company unless the driver transports the member on a recurring basis.
- Drivers must provide members with dignified boarding assistance to the seating portion of the vehicle.

This includes opening the vehicle door, fastening the seat belt or using the wheelchair securement devices, storing mobility devices and closing the vehicle door. They may not assist wheelchair passengers up or down more than one step unless it can be performed safely as determined by the member, guardian and driver.

- Smoking, eating and drinking are prohibited unless the member requires fluids or sustenance during transport as a medical necessity.
- Drivers must not place calls or texts at any time during transport.

Daily Vehicle Inspections and Trip Logs

Drivers must submit a daily vehicle inspection report to the Provider for any vehicle that is to be used to transport members in the program. See below and on page 7 for more details on these daily inspections.

Other Driver Requirements

- Drivers must speak English.
- Drivers must have visible, easily readable proper identification while on duty which includes their name, the name of their company, and the company's phone number.
- Drivers must never use alcohol, narcotics, illegal drugs, or drugs that impair their ability to perform while on duty.

Transdev reserves the right to submit requests for information to various State Department of Motor Vehicles (DMV) on certain or all drivers used in the network.

Vehicles

Vehicles must meet State, Federal, local and manufacturer's safety and mechanical operating and maintenance standards for the vehicle. In addition, all vehicles must pass an ASE certified mechanic inspection.

Transportation providers must ensure the comfort and safety of the members being transported by properly maintaining their vehicles to the following standards (not all-inclusive):

Interior of the Vehicle

- The interior must be clean and well-maintained. It must be free of dirt, grime, oil, trash, torn upholstery, damaged or broken seats, protruding metal or other objects or materials which would soil items placed in the vehicle or provide discomfort to the member.
- The following must be posted and clearly visible:
 - "No Smoking" signs
 - the name and phone number of the Transportation Provider
 - the vehicle number (if applicable)
 - the Transdev phone number for complaints
 - photo identification of the driver
- The driver must allow free transportation of the following items for the member, provided they can be carried by the passenger and/or driver and can be stowed safely on the vehicle:

- wheelchairs
- secured oxygen
- personal assistive devices
- intravenous devices

Equipment

- The following items must always be in functioning condition:
 - seat belts
 - side and rear-view mirrors
 - horn
 - speedometer and odometer
 - two-way communication system to link all vehicles to the Transportation Provider's place of business
 - turn signals
 - headlights
 - taillights
 - windshield wipers
 - heating and air conditioning systems
- The following safety equipment must be present and operable in the vehicle:
 - first aid kit
 - UL approved fire extinguisher
 - accident report Forms
 - roadside reflective or warning devices
 - flashlight
 - chains or other traction devices (when appropriate)
 - disposable gloves
- Other equipment may need to be present and functioning depending on the type of vehicle. See the Provider Service Agreement, for details on load capability, structural integrity, exterior rear vision mirrors, electrical wiring, storage batteries, brake interlock systems, flooring, steps and thresholds, power activated doors, emergency exit doors, properly inflated tires, suspension system, steering system, driver's restraining belt, fire extinguisher, standee markings, and grab rails.

Individuals with Disabilities

Vehicles used for the purpose of transporting individuals with disabilities must meet the requirements set forth in the Americans with Disabilities Act (ADA) detailed in the Provider Service Agreement.

Maintenance

Transportation providers must abide by the following maintenance guidelines:

- Providers must establish and maintain a preventive maintenance policy and procedures and schedule that includes at a minimum, the scheduled recommended by the vehicle's manufacturer.
- Providers must ensure that all vehicles, their parts and accessories which may affect the safety of vehicle operation are regularly and systematically inspected, maintained and lubricated in accordance with the standards developed and established according to the vehicle manufacturer's recommendations and requirements.
- Providers must establish a recording and tracking system for the inspections, maintenance, and lubrication intervals, including the date or mileage when these services are due. Required maintenance inspections shall be more comprehensive than daily inspections performed by the driver.
- Providers must maintain written documentation of preventive maintenance, regular maintenance, inspections, lubrication and repairs performed for each vehicle. These records must be kept for five (5) years and include, at a minimum:
 - identification of the vehicle, including make, model and license number or other means of positive identification and ownership
 - date, mileage, type of inspection, maintenance, lubrication or repair performed, and a description of each
 - if not owned by Provider, the name of any person or lessor furnishing any vehicle;
 - the name and address of any entity or contractor performing an inspection, maintenance, lubrication or repair

While Transporting the Member

- Drivers must ensure adequate seating space for the member and attendant(s). The vehicle must not transport more passengers than the registered seating.
- Drivers must not operate a vehicle with passenger doors in the open position or a vehicle with inoperable passenger doors, when members are on board. The doors must not be opened until the vehicle comes to a complete stop.
- Drivers and members must wear seat belts at all times.
- Members must not be allowed to stand on vehicles not designed for that purpose.
- The driver must not refuel vehicles in a closed building or when members are onboard.
- The driver must be properly secured to a seat with a restraining belt when the vehicle is in motion.
- The driver must not leave vehicles unattended with members on board in an unsafe condition or for longer than 5 minutes. If the vehicle is left unattended, the parking or holding brake must be used.
- All livery and wheelchair services must be door-to-door.

Inspections

Throughout the contract period and at intervals determined by Transdev, each vehicle reported by the Provider for use in transporting members will be inspected. These inspections include those performed by drivers, those performed by individuals certified by the state and those performed by Transdev upon initiation of the Provider's participation in the program and at other times as deemed necessary by Transdev.

Daily Pre-trip Inspections

Drivers are required to perform daily pre-trip inspections of the vehicles used to transport members to ensure that the following are in safe condition and good working order:

- service brakes
- parking brakes
- tires and wheels
- steering
- horn
- lighting devices
- windshield wipers
- rear vision mirrors
- passenger doors and seats
- exhaust system
- equipment for transporting wheelchairs
- safety, security and emergency equipment

Providers must provide their drivers with either their own reporting form or the Vehicle Inspection Checklist on Appendix B, to document their daily inspections and submit them to the Provider for daily review. These inspection forms must be released to Transdev upon request.

Drivers must report any defects or deficiencies that could affect safe operations or cause mechanical malfunctions to the Transportation Provider who will take and document any applicable corrective actions. Records of all inspections and documentation for these corrective actions must be recorded and retained for 5 years.

Transdev Inspections

Prior to commencement of transportation services, and at other times deemed necessary by Transdev, a qualified Transdev employee will check vehicles for compliance with the required safety devices and equipment, such as:

- horn
- windshield wipers
- mirrors
- wiring and battery(ies)

- service and parking brakes
- warning devices
- directional signals
- hazard warning signals
- lighting systems and signaling devices
- handrails and stanchions
- standee line and warning (where applicable)
- doors and interlock devices
- stepwells and flooring
- emergency exits (where applicable)
- tires and wheels
- suspension system
- steering system
- exhaust system
- seat belts
- safety equipment
- equipment for transporting
- wheelchairs

Transdev's inspection reports will include:

- identification of the Provider
- date of inspection
- identification of the vehicle inspected
- identification of the equipment and devices inspected and what was found deficient or defective
- identification of the corrective actions for the deficient or defective items and the date of completion of those actions

Spot inspections will take place at times and locations determined by Transdev, taking into consideration the Transportation Provider's workload whenever possible.

Reports from clients, medical facilities, medical personnel, state agencies, etc., of problems with the Provider vehicles used in the program may prompt a request for inspection as soon as possible. Non-compliance of the request will result in reduction or removal of trips to the Provider until a satisfactory inspection has been completed.

Inspection Results:

- 1) Pass - continue to use the vehicle
- 2) Re-inspect - fix the minor infraction and continue to use the vehicle and have the vehicle re inspected on or before the date indicated on the inspection form
- 3) Fail - vehicle must remain out of service until the infraction is fixed

Unfavorable inspection results as noted by Transdev may be satisfied by submitting a current inspection document issued by the governing agency (i.e. Department of Transportation or Office of Emergency Management Services), appropriate for the particular vehicle. If no documents are available, the Provider may fix the issues and schedule a follow-up inspection with Transdev.

During the Inspection, providers may be required to provide written documentation of each vehicle's preventive maintenance, regular maintenance, inspections, lubrication and repairs.

Records

Transportation providers must maintain the following records for at least 5 years:

- Records of driver background checks and qualifications
- Detailed descriptions of training administered and completed by each driver
- A record of each vehicle driver's duty status, which includes total days worked, on duty hours, driving hours and time or reporting on and off duty each day
- Any documents required to be prepared by the contract

Procedures

Following are the procedures that transportation companies must follow in order to become a contracted Transportation Provider, transport members for Transdev and finally submit and receive payment for their services. Failure to abide by these guidelines may result in termination of their contract with Transdev.

Please note:

- Post-approval is NOT allowed for this program. All transportation requests MUST be processed and approved by Transdev prior to the transportation services. Providers who receive requests from the members instead of Transdev and provide these non- approved services may not be reimbursed for such services. This policy applies even to transportation that takes place after hours.*
- Members must book their transportation requests through Transdev and resolve any issues or make any changes directly with Transdev. Transportation providers must only transport the member to and from the addresses listed on the Transportation Order. If the doctor's office requests the member to go see a second doctor's office, the Provider must contact Transdev for approval and to update the Transportation Order. Transdev will not cover unauthorized trips to the store, pharmacy, or any other personal location. Transdev will cover trips to the pharmacy after a scheduled appointment providing the prescription is ready for pickup.

* Transdev has an after hours answering service that will forward certain requests to a Transdev manager on

Procedure 1: Become A Transportation Provider

There are several steps that must be followed by a Transportation Provider in order to become a contracted Provider for Transdev:

- 1) Complete and submit all necessary documentation to Transdev:
 - Provider Service Agreement, including the Certification Regarding Lobbying and all applicable provider and employee Agreement[s] to Safeguard Client Information

- HIPAA Business Associate Agreement
 - Vendor Maintenance Form, page 1
 - Federal W-9 Form
 - Direct Deposit form
- 2) Contact Transdev to arrange for an initial vehicle inspection visit. On this visit, a Transdev employee will request licensing and insurance certificates and the following basic information:
- name of the Provider
 - name of the contact person
 - phone number
 - fax number

Transdev will require the following information regarding the vehicle(s):

- vehicle number
- vehicle identification number (VIN) assigned by the manufacturer
- plate number assigned by DOT or other agency
- type of plate – livery, L plate, taxi, ambulance, etc.
- make
- model
- odometer
- year of manufacture
- type of vehicle – sedan wheelchair, ambulance
- livery capacity
- wheelchair capacity
- the day and time available

*To add or delete a vehicle

***Transdev will contact the provider for instructions on receiving this information electronically**

Procedure 2: Accept Member Rides

Once the Transportation Provider has been enrolled and inspected, it will begin to receive offers for member transportation.

1. The member will contact Transdev and book their transportation request.
2. Up to four days before trips are to be performed, the transportation provider will utilize the iOBSS system to receive assigned trips.
3. The provider may reject the trip assignment by contacting Transdev dispatch to return the ride. Transdev will contact other Providers until a provider has been found or we have exhausted our options.

If a Provider accepts a ride but fails to complete it, with no prior notice to Transdev and a valid reason, the Provider will not only lose payment on the ride but may also be terminated from the program.

Because of this, it is vital that providers maintain immediate communication with Transdev for any issues that may arise, such as their inability to follow through on a ride. Some valid reasons are: the member is not at home, will not enter the vehicle, is being abusive, the order was cancelled or the driver encountered unexpected vehicle malfunctions.

We understand that Transdev may not be the only source of business for the Provider. At the same time, Transdev is not obligated nor committed to purchase any specific number of services from a Transportation Provider. Rides are assigned to Providers as deemed appropriate, at our discretion, to promote the goals of Transdev and the interest of our members. If the Provider would like to be considered for a higher volume of rides or if they will have a temporary period of increased availability, by contacting with Transdev daily, they can greatly enhance the ride distribution process.

Procedure 3: Receive Transportation Orders via OBSS

Transportation Providers will utilize the iOBSS transportation provider system. Please refer to your iOBSS manual or call Transdev for any questions.

Procedure 4: Contact the Member

Prior to transporting the member on the date of service, the Provider must attempt to contact the member at the number listed on the Transportation Order and inform them at what time they are to be ready for the pickup. The Provider must also instruct the member to contact Transdev for any changes or issues so that we can either fix the issue with the Provider or search for an alternative solution. It is vital that Providers contact Transdev with any issues that may arise while picking up or transporting the member.

Procedure 5: Transport the Member

Step 1: Perform a Daily Inspection

On the date of the appointment, the driver must perform a daily inspection on the vehicle to be driven as detailed on the inspections on page 10.

Step 2: Arrive on Time

Transportation providers must be on time for all trips as stipulated by Transdev or incur in monetary sanctions and/or termination of their Provider Service Agreement. See the Provider Service Agreement for details on these sanctions.

Some contractual timeliness requirements are:

- A member's waiting time for a pickup at home must not exceed 15 minutes.
- A timed return means that the driver shall return for the member at that time, and not to exceed 30 minutes after.
- Providers are not required to wait more than 10 minutes after the scheduled pickup time for a member, provided that reasonable attempts have been made to contact the member, that is, through Transdev. Transdev may ask the driver to wait longer if possible. If the Provider is not able to wait for more than the necessary 10 minutes, Transdev will direct the Provider to leave and possibly return at a later time if available.
- On all will call return trips, members must be picked up within 45 minutes after requesting the Provider for return transportation.

Step 3: Request Proof of Identity

Drivers shall always ask members for their name to verify identity. Additionally, drivers should clarify at facilities that they are transporting the correct member by verifying their name with facility staff.

Step 4: Transport the Member

Procedure 6: Submit the Transportation Order for Payment via IOBSS

Transportation Providers will utilize the iOBSS transportation provider system for billing. Please refer to your iOBSS manual or call Transdev for any questions.

Billing is processed weekly and transportation providers will likely receive weekly payments, however, Transdev's policy only requires once per month payments.

Ongoing Transportation

Some types of recurring transportation can be booked 90 days at a time.

Accidents/Incidents

Transportation providers must inform Transdev within 2 hours of any motor vehicle accident occurring with Transdev members on board. Notifications must be made by phone and followed by a completed Transdev Accident/Incident Report (see Appendix C).

Below are some procedures for drivers to follow in case of an accident, injury, death, disaster, or other unexpected events.

Unconscious Passengers/Medical Condition

- The Provider must contact emergency services for assistance
- Check the person for medical alert information
- Administer first aid if your provider policy allows and you have proper training
- Call the dispatcher for medical assistance
- Make the member comfortable
- The Provider must complete an accident/incident report fax it to Transdev as soon as possible.

Mechanical Breakdown

- Stop the vehicle in a safe location
- Activate the flashers and position the emergency triangles
- Check for danger

- Check for possible causes
- Call the dispatcher to request appropriate action
- Keep the member informed of the situation
- Move the vehicle when it is safe and you are directed to do so

Tire Blowout

- Do not apply brakes quickly
- Concentrate on steering
- Lift your foot from the accelerator
- Brake softly as your speed diminishes
- Pull completely off the pavement when it is safe to do so

Accident Resulting in Injury or Death

- Don't panic
- The Provider must contact emergency services for assistance
- Administer first aid if your provider policy allows you and you have proper training
- Stay in the vehicle and do not leave unless requested to do so by police or paramedics
- Check with the members to see if they are OK
- Contact dispatch
- The Provider must complete an accident/incident report and fax it to Transdev as soon as possible.

Investigations

The Transportation Provider must immediately report to Transdev any event involving a vehicle or taking place on a provider-controlled property resulting in a fatality, injury or property damage.

Transdev may also conduct their own investigation in incidents resulting in the following:

- A fatality where an individual is confirmed deceased within three days of a transportation services-related event, excluding suicides and deaths from illnesses
- Injuries requiring immediate medical attention away from the scene
- Property damage to provider vehicles, property or facilities or other property, totaling more than \$1,000 dollars
- Evacuation of a vehicle where there is imminent danger to passengers on the vehicle if not due to vehicle operation issues

Each investigation will be documented in a final report that will include a description of the investigation activities, the identified causal factors and a corrective action plan.

Fraud and Abuse

Transdev is committed to preventing fraud, waste and abuse within transportation services.

Transportation providers are prohibited from engaging in fraudulent or abusive practices including, but not limited to:

Transportation of Ineligible Riders

To ensure that a member is eligible, Transdev confirms their eligibility in the plan prior to booking their transportation. Transdev will not pay for transportation of ineligible members who were not screened and approved by Transdev.

Trips to Non-Covered Medical Services

Upon booking the member's transportation, Transdev requests the medical reason and ensures that it is for a covered service. Trips with transportation orders by Transdev are for covered services.

Providers can only transport the member from and to the addresses on the order. If changes are made, they must be approved by Transdev.

Transportation in an Ambulance or Wheelchair-Accessible Vehicle When the Member's Medical Needs Do Not Warrant Such Level of Transportation

Transdev will pay for the category of service or level of transportation listed on the Transportation Order. Transdev will not pay for higher level of services that were not preapproved, even if the Provider chose to use a higher level for any reason.

For Trips That Never Occurred

As a measure to prevent fraud, Transdev performs random validations on trips. If the Provider is found to have falsified a trip or requests payment for trips that did not take place, they will be removed from the program indefinitely. If at the time of pickup the member cancels the trip, the Provider must contact Transdev immediately.

Gratuities or Other Types of Inducements to Members or Others Acting on Behalf of Clients for Any Purpose

Under no circumstances can a Provider seek any type of compensation, remuneration or reimbursement from a member or their representative. If the member requires additional services beyond the scope of services provided by the Provider under their agreement with Transdev, please contact Transdev.

Providers must inform Transdev of cases where the member engages or requests the Transportation Provider to engage in any fraudulent or abusive practices.

Remember, second-guessing an action often equates to an incorrect course of action. Please contact a Transdev manager for any questions or clarifications on Fraud and Abuse.

Requests After Hours

Transdev's normal hours of operations are 7 a.m. – 6 p.m. Pacific Time Monday through Friday. During this time members may call to request transportation for same day or future dates. To accommodate our members during non-business hours, Transdev has an after-hours call center ready to assist hospital discharges.

At the end of each day (M-F) if you still have members who need a ride after 6 p.m. and you CANNOT provide the transportation home, it is required that you notify Transdev Dispatch so that we can reassign the return trip.

After Hours Discharges

Our dispatcher will contact the provider to ask about availability for the transport.

The transportation orders for any after-hours requests pre-approved by Dispatch will be entered into OBSS within 72 hours so that Providers may bill for the transport.

Appendices

Appendix A: Transdev’s Contact Information

Mailing Address	Transdev 16253 SE 130th Ave Clackamas, Oregon 97015
Fax No:	(971) 254-2749
Main Transportation Number	(866) 336-2906

Appendix B: Vehicle Inspection Report

VEHICLE INSPECTION CHECKLIST



799 W. Roosevelt Road,
Building 4, Suite 200
Glen Ellyn, Illinois 60137
Phone: (000) 000-0000
Fax: (000) 000-0000

Date: __/__/__ Time: __: __ am / pm
Inspection Performed by: _____

PROVIDER INFORMATION

Name: _____ Telephone Number: (____) ____ - ____

VEHICLE INFORMATION: Initial Inspection Re-inspection

Plate No: _____ VIN: _____
Mileage: _____ Vehicle #: _____
Type: Sedan Van (<8 Pax.) Van (>8 Pax.) W/C Van
Make: _____ Model: _____ Year: _____

INSPECTION CHECKLIST:

SAFETY ITEMS (Mandatory)

SAFETY ITEMS (Mandatory)				WHEELCHAIR			
M1	P	F	Mirrors (side, rearview)	W1	P	F	Wheelchair lift normal/Manual Operation
M2	P	F	Windshield (free of obstruction)/ wipers	W2	P	F	Lift platform (30" x 48")
M3	P	F	Tires (treads, lugs, inflation)	W3	P	F	Platform barriers (1 1/2")
M4	P	F	Lights (headlights, brake, turn signal, hazards)	W4	P	F	Lift hand rail(s)
M5	P	F	Seat belts for each passenger/2 extensions	W5	P	F	Lift platform loading barrier
M6	P	F	A/C – Heating	W6	P	F	Lift door height (<22' = 56"/ >22' = 68")
M7	P	F	Operational radio/phone	W7	P	F	4 point tie down
M8	P	F	Horn	W8	P	F	Reflective tape on lift
M9	P	F	Vehicle registration x Date:	W9	P	F	Convex mirror
M10	P	F	Insurance card x Date:	W10	P	F	Door weatherstripping
M11	P	F	State sticker on plate x Date	W11	P	F	Other

GENERAL (condition of vehicle and materials)

G1	P	F	Exterior	G7	P	F	Sings: no smoking or eating/wear seat belts
G2	P	F	General cleanliness	G8	P	F	Emergency triangles/flares
G3	P	F	Floor space	G9	P	F	First aid kit
G4	P	F	Walls and Windows	G10	P	F	Provider name and phone number (card/slip)
G5	P	F	Upholstery	G11	P	F	Maps/incident/accident/complaint form
G6	P	F	Overhead and interior lighting	G12	P	F	Other

INSPECTION RESULTS: PASS RE-INSPECT/DATE: _____ FAIL (OUT OF SERVICE)

CORRECTIVE ACTION/NOTES: (Any failed safety item results in vehicle off the road until corrected.)

SIGNATURE OF PROVIDER REPRESENTATIVE: _____ Date: __/__/__

SIGNATURE OF FIRST TRANSIT INSPECTOR: _____ Date: __/__/__

Vehicle Inspection Checklist – FT Confidential - PI (02-16-2015)

Appendix C: Accident/Incident Report

Front:



Accident / Incident Report

*** Please print all information ***

REPORT NUMBER: _____

GENERAL INFORMATION
DATE OF OCCURRENCE:
DAY OF THE WEEK: <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F <input type="checkbox"/> S <input type="checkbox"/> SU
TIME OF OCCURRENCE: : <input type="checkbox"/> AM <input type="checkbox"/> PM
DIRECTION OF TRAVEL:
STREET WHERE INCIDENT OCCURRED:
CITY:
COUNTY:
AT INTERSECTION WITH:
IF NOT AT INTERSECTION: _____ FEET _____ MILES
<input type="checkbox"/> NORTH <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input type="checkbox"/> WEST OF: _____
(NEAREST HIGHWAY, STREET, OR LANDMARK)

MAIN VEHICLE (VEHICLE NO. 1)
VEHICLE NUMBER:
DIVISION/PROJECT/SERVICE:
ROUTE NO.
RUN NO.
NO. OF PASSENGERS:
DESCRIBE DAMAGE TO VEHICLE:

DRIVER NO. 1
NAME:
SOCIAL SECURITY NO.
DRIVERS LICENSE NO.
DRIVERS LICENSE EXPIRATION DATE:
ADDRESS
CITY:
STATE: ZIP CODE:
HOME PHONE NO.
ADDITIONAL PHONE NO.
BADGE NO.
NATURE OF INJURIES, IF ANY:
IF INJURED, TAKEN TO:

PASSENGER/PEDESTRIAN:
NAME:
ADDRESS
CITY:
STATE: ZIP CODE:
SEX: DATE OF BIRTH:
HOME PHONE NO.
WORK PHONE NO.
NATURE OF INJURIES, IF ANY:
IF INJURED, TAKEN TO:


VEHICLE NO. 2
DIRECTION OF TRAVEL:
NO. OF PASSENGERS:
TYPE OF VEHICLE:
MAKE:
MODEL:
YEAR:
LICENSE PLATE NO./STATE & YEAR:
INSURANCE COMPANY:
FIXED OBJECT:
DAMAGE TO VEHICLE, IF ANY:
OWNER'S NAME:
STREET ADDRESS:
CITY AND STATE:
HOME PHONE NO.

DRIVER NO. 2
NAME:
ADDRESS
CITY:
STATE: ZIP CODE:
DRIVERS LICENSE NO.
DRIVERS LICENSE EXPIRATION DATE:
HOME PHONE NO.
WORK PHONE NO.
NATURE OF INJURIES, IF ANY:
IF INJURED, TAKEN TO:

PASSENGER/PEDESTRIAN:
NAME:
ADDRESS
CITY:
STATE: ZIP CODE:
SEX: DATE OF BIRTH:
HOME PHONE NO.
WORK PHONE NO.
NATURE OF INJURIES, IF ANY:
IF INJURED, TAKEN TO:

PASSENGER/PEDESTRIAN:
NAME:
ADDRESS
CITY:
STATE: ZIP CODE:
SEX: DATE OF BIRTH:
HOME PHONE NO.
WORK PHONE NO.
NATURE OF INJURIES, IF ANY:
IF INJURED, TAKEN TO:

Back:

OCCURRENCE	INVOLVING	PASSENGER ACTION	TYPE OF TRIP	VEHICLE ACTION	PEDESTRIAN ACTION																								
<input type="checkbox"/> FRONT END <input type="checkbox"/> SIDESWIPE <input type="checkbox"/> AT AN ANGLE <input type="checkbox"/> BACKING <input type="checkbox"/> REAR END <input type="checkbox"/> VANDALISM <input type="checkbox"/> PASS INJURY <input type="checkbox"/> FIRE <input type="checkbox"/> BLIND REPORT <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> PEDESTRIAN <input type="checkbox"/> MOTOR VEHICLE IN TRAFFIC <input type="checkbox"/> PARKED MOTOR VEHICLE <input type="checkbox"/> LIFT <input type="checkbox"/> FIXED OBJECT <input type="checkbox"/> MOTORCYCLE <input type="checkbox"/> DOOR <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> BOARDING <input type="checkbox"/> ALIGHTING <input type="checkbox"/> FELL OFF SEAT <input type="checkbox"/> IN MOTION WITHIN VEHICLE <input type="checkbox"/> DISTURBANCE <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> DIAL-A-RIDE <input type="checkbox"/> REGULAR <input type="checkbox"/> OFF ROUTE / DETOUR <input type="checkbox"/> DEADHEAD <input type="checkbox"/> AT GARAGE <input type="checkbox"/> SERVICE CALL <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> GOING STRAIGHT AHEAD <input type="checkbox"/> CHANGING LANES, PASSING <input type="checkbox"/> MAKING RIGHT TURN <input type="checkbox"/> MAKING LEFT TURN <input type="checkbox"/> SLOWING OR STOPPED <input type="checkbox"/> PULLING FROM CURB <input type="checkbox"/> PULLING TO CURB <input type="checkbox"/> PARKED (NO DRIVER) <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> CROSSING AT INTERSECTION <input type="checkbox"/> CROSSING NOT AT INTERSECTION <input type="checkbox"/> WALKING BETWEEN PARKED VEHICLES <input type="checkbox"/> WALKING IN ROADWAY WITH TRAFFIC <input type="checkbox"/> WALKING IN ROADWAY AGAINST TRAFFIC <input type="checkbox"/> GETTING ON/OFF VEHICLE <input type="checkbox"/> PLAYING IN ROADWAY <input type="checkbox"/> OTHER: _____																								
TRAFFIC CONTROL	WEATHER	LIGHT	ROAD SURFACE	VEHICLE LIGHTS	TURN SIGNALS																								
<input type="checkbox"/> STOP SIGN <input type="checkbox"/> WORKING LIGHTS <input type="checkbox"/> OFFICER, FLAGMAN <input type="checkbox"/> RAILROAD CROSSING GATE <input type="checkbox"/> RAILROAD FLASHING LIGHTS <input type="checkbox"/> NONE <input type="checkbox"/> OTHER: <input type="checkbox"/> POSTED SPEED LIMIT: _____	<input type="checkbox"/> CLEAR <input type="checkbox"/> RAIN <input type="checkbox"/> SNOW <input type="checkbox"/> FOG <input type="checkbox"/> SLEET <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN <input type="checkbox"/> DUSK <input type="checkbox"/> DARKNESS <input type="checkbox"/> ARTIFICIAL <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> DRY <input type="checkbox"/> WET <input type="checkbox"/> SNOW, ICE <input type="checkbox"/> UNDER REPAIR <input type="checkbox"/> OTHER: _____	<table border="1"> <tr> <td>VEHICLE NO. 1</td> <td>VEHICLE NO. 2</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>ON</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>OFF</td> </tr> </table>	VEHICLE NO. 1	VEHICLE NO. 2		<input type="checkbox"/>	<input type="checkbox"/>	ON	<input type="checkbox"/>	<input type="checkbox"/>	OFF	<table border="1"> <tr> <td>VEHICLE NO. 1</td> <td>VEHICLE NO. 2</td> <td>LEFT TURN ON</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>RIGHT TURN ON</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>4-WAY ON</td> </tr> </table>	VEHICLE NO. 1	VEHICLE NO. 2	LEFT TURN ON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RIGHT TURN ON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4-WAY ON
VEHICLE NO. 1	VEHICLE NO. 2																												
<input type="checkbox"/>	<input type="checkbox"/>	ON																											
<input type="checkbox"/>	<input type="checkbox"/>	OFF																											
VEHICLE NO. 1	VEHICLE NO. 2	LEFT TURN ON																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
<input type="checkbox"/>	<input type="checkbox"/>	RIGHT TURN ON																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
<input type="checkbox"/>	<input type="checkbox"/>	4-WAY ON																											
POLICE																													
WAS POLICE PRESENT? <input type="checkbox"/> YES <input type="checkbox"/> NO			TICKETS TO DRIVER NO. 1? <input type="checkbox"/> YES <input type="checkbox"/> NO																										
OFFICER'S NAME: _____			TICKETS TO DRIVER NO. 2? <input type="checkbox"/> YES <input type="checkbox"/> NO																										
VEHICLE NO. _____			FIRE DEPARTMENT PRESENT? <input type="checkbox"/> YES <input type="checkbox"/> NO																										
NAME OF FORCE: _____			NAME OF FIRE DEPARTMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO																										
POLICE REPORT NO. _____																													
DIAGRAM WHAT HAPPENED			DRAW THE VEHICLE AND MARK AN "X" ON EXACT POINT OF IMPACT																										
<ul style="list-style-type: none"> NUMBER VEHICLES AND INDICATE DIRECTION OF TRAVEL WITH ARROW IDENTIFY STREETS AND HIGHWAYS BY NAME OR NUMBER 			<table border="1"> <tr> <td>VEHICLE NO. 1</td> <td>VEHICLE NO. 2</td> </tr> <tr> <td style="height: 100px;"></td> <td style="height: 100px;"></td> </tr> </table>			VEHICLE NO. 1	VEHICLE NO. 2																						
VEHICLE NO. 1	VEHICLE NO. 2																												
 DRAW ARROW INDICATING NORTH																													
DESCRIBE EXACTLY WHAT HAPPENED (PLEASE PRINT):																													
_____ _____ _____ _____ _____ _____ _____ _____ _____ _____																													
DRIVER SIGNATURE: _____		DATE: _____		REVIEWED BY: _____																									