



NEMT Operations Manual

Medi Trans NEMT Policy and Procedure	
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<u>Authorized Approval</u>	<u>Leah Begnaud, Chief Operating Officer</u>
<u>Approving Signature</u>	[VG1][EH2]

Operations

Policy and Procedures

A. Policy Development

1. Policies reflect the core principles and regulatory requirements that Medi Trans must follow to ensure that business operations are conducted in accordance with applicable laws, rules, regulations and principles of safety and soundness.
2. Policy and procedure documents are critical to maintaining a culture of compliance, control and effective risk management.
3. Employees must follow Medi Trans P&Ps.
4. Failure to comply with Medi Trans P&Ps may result in disciplinary action, up to and including termination.

B. Review

1. P&Ps are reviewed internally for accuracy and applicability at least annually or otherwise as needed to ensure compliance.
2. Required P&Ps are sent to the applicable regulatory or legal bodies, as required, for review or approval.
3. In the event Health Plan and/or State statutory or regulatory provisions are made, MediTrans will comply with or implement any revisions upon notice within the required time frames.

NEMT Service Requests

- A. Each transportation request processed by Medi Trans will be assigned a unique number that contains all the pertinent information regarding the request and will be available to Agents through the trip management system.
- B. As part of the approval process, Medi Trans will:
 1. Collect relevant information from the caller and enter it into the trip management system
 2. Verify the member's eligibility for NEMT services
 3. Determine the appropriate mode of transportation for the member



4. Determine the appropriate level of service for the member
 5. Assure that the transportation is to a covered service
 6. Enter the appropriate information into the trip management system
- C. This information will include, but not be limited to the following:
1. Verification of member's eligibility (e.g. member name, address, Medicaid ID number, and telephone number if available; eligibility start and end dates)
 2. Determination that service is a covered service (e.g., category of service)
 3. Determination that the transportation is a covered NEMT service
 4. Determination of the appropriate mode of transportation (e.g. member's requested mode of transportation, member's special needs, availability and appropriateness of fixed route, the approved mode of transportation, justification for the approved mode of transportation)
 5. Determination of the appropriate level of service
 6. Information regarding Standing Orders (if applicable)
 7. Information about whether the request was modified, approved or denied and how the member was notified
 8. Information about approved and scheduled transportation (e.g., elements required for the trip manifest, whether the request was validated)
 9. Timeframes for the approval process (e.g. date and time of request, determination, scheduling, and notification of member)
 10. If applicable, reason for trip cancellation
- D. Based on approval of previous NEMT services, Medi Trans will display members' permanent and temporary special needs, appropriate mode of transportation, and any other information necessary to ensure that appropriate transportation is approved and provided.
- E. All of this information will be easily accessible by all Agents.
- F. Medi Trans's approval and scheduling systems will also support the following:
1. A database of NEMT providers that includes information needed to determine trip assignments such as but not limited to:
 - a. Types of vehicles
 - b. Number of vehicles by type
 - c. Lift capacity of vehicles
 - d. Geographic coverage
 - e. Days and hours of operation
 - f. Performance metrics
 - g. Member preference
 2. Automatic address validations, distance calculations and trip pricing, if applicable
 3. Ability to generate a trip manifest
 4. Standing Order and Single Trip reservation capability
 5. Ability to determine if fixed route transportation is available and appropriate for the member
- G. Medi Trans's approval and scheduling system will also enable management to report and submit the prior month's encounter data no later than the 15th of the following month. All data is submitted electronically, via a secure FTP site between The Health Plan and MediTRANS.



1. Data must meet all LDH and The Health Plan standards
2. Data will reflect proper CPT codes to ensure accurate reporting to CMS systems
3. Data will capture information including but not limited to:
 - A. Member name
 - B. Pickup description
 - C. Pickup phone number
 - D. Pickup address, city, state, parish, & zip code
 - E. Drop off description
 - F. Drop off phone number
 - G. Drop off address, city, state, parish, & zip code
 - H. Member mobility
 - I. Appointment date of service
 - J. Appointment time
 - K. Pickup time
 - L. Drop off time
 - M. Trip leg ID
 - N. Miles
 - O. Transportation Provider name
 - P. Comments
 - Q. Treatment type
- H. Failure to comply with requirements regarding the approving NEMT services standards may result in liquidated damage assessment to the transportation provider.

Service Approval

Eligibility

- A. Medi Trans receives daily/weekly/monthly files containing a listing of all eligible Medicaid members within the regions we serve along with all member information currently on file with Medicaid and that is pertinent to verifying their eligibility.
- B. These files are utilized to import the following data fields into MediTrans' trip management software:
 - The member's:
 1. Full name
 2. Address (on file with Medicaid)
 3. Parish of residence (on file with Medicaid)
 4. Telephone number (on file with Medicaid)
 5. Medicaid identification number
 6. Medicaid eligibility date
 7. Sex
 8. Date of birth
 9. Telephone number
 10. All other data fields required by The Health Plan and LDH
- C. The EMEVS system produces daily eligibility reports that identify members whose eligibility has expired and can be checked by any Call Center or Dispatching Agent.
- D. If a member loses their eligibility, Medi Trans:



1. Marks the member ineligible for transportation services
 2. Will not allow a CSR to book a trip for the member until they verify current eligibility and change their status in the computer system
- E. If eligibility cannot be verified via daily download, eligibility will be verified through either:
1. EMEVS
 2. The designated The Health Plan staff
- F. Additional reports are automatically generated daily to identify members with subscription trips (e.g. recurring trips such as Dialysis or Radiation Therapy) that have lost eligibility.
- G. Additional steps are taken to determine if the Member is ineligible before transportation to an appointment or program that is critical to their well-being is denied.
- H. The member is also notified to call their social worker to verify their change in eligibility to allow errors to be corrected before transportation services are needed.
- I. The ability to import daily Medicaid member eligibility files directly into MediTrans' trip management software and to run reports that document changes in their eligibility status greatly reduces processing time to schedule a member's trip, while also alerting members to unexpected eligibility changes that could affect their ability to receive medical care.
- J. Medi Trans will screen all requests for NEMT services to confirm each of the following items:
1. That the person for whom the transportation is being requested is an enrolled The Health Plan Medicaid Member;
 2. That the transportation is a covered NEMT service.
Note: Covered NEMT services are necessary non-emergency transportation services provided to convey members to and from Medicaid covered services. Non-emergency transportation services shall be provided in accordance with federal law and all applicable rules and policies and procedures.
 3. That the service for which NEMT service is requested is a The Health Plan covered service, as defined in the SOW between Medi Trans and The Health Plan.

Mode

- A. The MediTrans' trip management software system helps the Agent select the best mode of transportation through features designed to determine the least costly, most appropriate choice based on responses provided during the gatekeeping process.
- B. The members' medical, physical, and cognitive abilities are the decisive factors when assigning the mode of transportation after the trip request has met criteria for approval.
- C. Medi Trans authorizes and schedules trips based upon the The Health Plan SOW guidelines.
- D. The modes of transportation include:
 1. [Public Transportation](#)
 2. [Gas Reimbursement \(Family and Friends\)](#)



3. Common Vehicles (both ambulatory and wheelchair)

4. Non-emergency ambulance transportations

- E. During the call intake process, Agents inquire about any special needs a member may have to determine the most appropriate level of transportation.
Example: The Agent can document if a member uses a cane, is in a wheelchair, is bed-confined or if the member has a seeing-eye dog that needs to be accommodated. These needs are addressed in the MediTrans' trip management software system as a member need and all future trips are booked accordingly unless a change of status is provided.
- F. Special needs requirements also appear on the transportation provider's manifest and, using Medi Trans trip management software, the appropriate type of vehicle is dispatched, and the driver is alerted of any special needs a member may have.
- G. Trips for members with special needs or unusual trip requirements are negotiated on a case-by-case basis according to distance, time of day, network provider availability, and other factors that may include air ambulance, meals, and lodging.

Minor Requirements

- A. Medi Trans takes special care in scheduling transportation services for minor children and makes such arrangements in strict compliance with LDH's policies and regulations.
- B. Medi Trans understands that children under the age of seventeen (17) must be accompanied by an adult and that it is the responsibility of the child's parent, foster parent, caretaker, legal guardian, or the health plan to serve as or arrange for the appropriate ~~escort~~attendant. Exception: All females, regardless of their age, seeking prenatal and/or postpartum care shall not be required to have an attendant.
- C. Medi Trans will accommodate the following requests whenever possible:
 - 1. Transport for adult members requesting that minor children accompany them to an appointment because the adult member does not have anyone to care for the child, or
 - 2. Transport for an adult serving as an ~~escort~~attendant -to a minor child receiving services and requesting an additional child to travel because there is no one to care for the child.
- D. Medi Trans makes every effort to make travel accommodations for additional children, provided there is an available seat in the vehicle.
 - 1. We understand that no small child shall travel in a vehicle without a booster seat and the member is required to furnish their own.
 - 2. This information is conveyed to the member at the time their transportation is scheduled.
- E. Children under the age of seventeen (17) years of age shall be ~~escort~~escorted to medically necessary appointments.
- F. The child's parent, foster parent, caretaker, legal guardian or the Department of Family and Children Services (DFCS), as appropriate, shall be responsible for providing the ~~escort~~attendant.
- G. Minor traveling with adult members



1. There may be times when an adult member requests to allow a minor to accompany them to an appointment, not as an [escort/attendant](#), but because the member does not have any one to stay with the child.
2. This should be requested at the time of the trip request.
3. If there is room or an available seat that is not being occupied by a member requiring treatment, the broker may allow a child to be transported with the adult member requiring treatment.
4. For a pre-arranged situation where the minor is traveling with the adult, if the provider cannot accommodate the minor child, the adult member should be notified at least 24 hours in advance, when possible, so appointment and trip cancellations can occur.

Standing Orders Process

- A. All members with recurring transportation events such as trips to dialysis, behavioral health, and chemotherapy are entered into the system as a Standing Order for the purpose of trip scheduling, placement, tracking, and re-certification.
- B. A standing order (also referred to as a subscription order) is defined as a transport to or from multiple recurring medical appointments for covered services for the same member with the same healthcare provider for the same treatment or condition (can be one (1) or multiple trip legs).
- C. In order for Medi Trans to approve a standing order, Medi Trans will, at a minimum, call the medical provider to verify the series of appointments.
- D. Medi Trans may, at its discretion, require that the member's medical provider certify the series of appointments in writing.
- E. For those trips that require Prior [Authorization Approval](#), Medi Trans will submit the Prior [Authorization Approval](#) to The Health Plan as required.
- F. Medi Trans will approve standing orders consistent with the series of appointments. Example: If the member has a series of appointments over six (6) months, Medi Trans will approve transportation for each trip, including all legs of the trip, for the six (6) months. However, Medi Trans will verify the member's eligibility prior to each pick-up.
- G. Medi Trans may verify additional information before each pick-up as necessary.
- H. Agents are responsible for handling and processing all standing order requests from Medicaid members or healthcare providers, including obtaining written verification of standing orders on Medi Trans's Standing Order form, or via Facility and/or MCO Portal.
- I. Medi Trans will assign standing order(s) to the most appropriate and qualified NEMT provider.
- J. Medi Trans will base this determination on, but not be limited to;
 1. Types of vehicles
 2. Number of vehicles by type
 3. Lift capacity of vehicles
 4. Geographic coverage
 5. Days and hours of operation
 6. Performance metrics
 7. Member preference^[VG3]_[LB4]



7.8. Least costly means of transportation

- K. Medi Trans will continue to assign standing order or subscriptions to the same NEMT Provider as long as the Provider complies to its agreement with Medi Trans.
- L. Medi Trans reserves the right to reassign a standing order or subscription trips from a NEMT Provider to another as it deems necessary.

Recertification^[VG5]_[LB6]

- A. The recertification process verifies the member's continuing need for a standing order and re-verifies the days and times as submitted on the original standing order request. All standing orders shall be reviewed at least once per calendar month to ensure the agreement with the assigned transportation provider is the most cost-effective option available. Results of these reviews shall be retained and made available to LDH upon request.
- B. This process significantly decreases the number of provider no-shows due to insufficient updates and deters fraudulent requests for high volume trip assignments.
- C. All standing orders will be re-certified according to the schedule below:
 - 1. Dialysis – Every 6 months
 - 2. Behavioral Health – Every 3 months
 - 3. All other services – Every 3 months

Modifying Standing Orders

- A. If a member's eligibility has changed, the agent must process the eligibility change for the member.
- B. Daily Post-Trip Verification Report for Public Transit enable Medi Trans to validate that members are attending the appointments for which the bus fare has been issued.
- C. If it has been determined through the gatekeeping process that the member does not meet the criteria for public transportation where time does not allow the delivery of the fare, the trip will be scheduled with a traditional NEMT provider.
- D. We realize a member's condition can change over time resulting in a need to change their usual mode of transportation. Since the trip management system stores the member's usual mode of transportation, the Agent can review their trip history to ensure they receive most cost effective and appropriate means of transportation available.

Appropriateness of Using An Ambulance To Provide Covered NEMT Services

- A. If the request is for emergency ambulance service, Agents will instruct the caller to dial 911. Note: This advisory is also part of the initial auto-pilot message that the member hears first when contacting Medi Trans call center.
- B. If the request is for non-emergency ambulance service, Agents will follow The Health Plan's contracted requirements or Medicare Requirements ^[VG7]_[LB8] in the case of Medicare trips, including but not limited to, providing services based on medical necessity.

Scheduling, Assigning and Dispatching Trips

- A. Medi Trans utilizes a proprietary technology platform that includes:
 - 1. Trip management
 - 2. Program integrity



3. Web, and mobile tracking components
- B. MediTrans' trip management software serves as the central repository for all operational data functions; each module maintaining data related to the specific business purpose.
Example: The Provider Profile maintains all transportation provider business licenses, insurance certification, driver credentials, vehicle inspections, coverage area, contracted rates, and vehicle capacity.
- C. MediTrans' trip management software is utilized to:
 1. Schedule and assign trips
 2. Generate and distribute trip manifests to transportation providers including the following:
 1. Number assigned by Medi Trans for approved trip;
 2. NEMT provider name;
 3. The mobility type of transportation;
 4. MCO name;
 5. Member's name; age, and sex
 6. Trip date;
 7. Number of legs for the trip (e.g., one-way, round trip, or multiple legs);
 8. Origin of trip/place of pick-up (e.g., residence)
 9. Time of pick-up for the time zone applicable to the pick-up location;
 10. Address of the pick-up, including street address, city, parish, state, and zip code;
 11. Member's phone number(s);
 12. Number of riders;
 13. Time of appointment for the time zone applicable to the appointment location;
 14. Facility name;
 15. Address of the facility, including street address, city, parish, state, and zip code;
 16. Facility's phone number(s);
 17. Return trip times for the applicable time zone(s) and addresses, if applicable;
 18. Any additional stops (e.g., pharmacy);
 19. Any special needs of the member;
 20. Any special instructions to the driver, e.g., door-to-door, hand-to-hand service, and assistance to and from the main entrance of the pickup and drop off locations upon request of members who may require additional assistance
 3. Update the member database
 4. Other critical NEMT program functions
- D. Medi Trans's system is HIPAA-compliant, stable, scalable, and flexible enough to adapt to technology advances and accommodate The Health Plan's specific contractual requirements.
- E. Member notification process regarding transportation arrangements



- F. Accommodation of unforeseen schedule changes and shall timely assign the trip to another NEMT provider if necessary and shall ensure that neither NEMT providers nor drivers change the assigned pick-up time without permission
- G. Handling of urgent trips, adverse weather, and contingency back up plans

Multi-Passenger Requirements

Pick-up and delivery standards as outlined in contract, state or federal requirements. Including but not limited to the following:

1. Arrive on time for scheduled pick-ups
2. Driver makes sure presence known to the member and wait no less than (5) minutes after scheduled pick up time; notify broker |dispatcher [VG9]| [LB10] before departing from the pick-up location.
3. Pick-up waiting times do not exceed (10) minutes
4. When multi-loading, the member’s ride time is no more than 45 minutes longer than the direct |curb-to-curb [VG11]| [LB12] travel time

Member Notification [VG13]

- A. If possible, Medi Trans will inform the member of the transportation arrangements during the phone call requesting the NEMT service.
- B. Otherwise, Medi Trans will ~~obtain the member’s preferred method (e.g. phone call, email, text, or member portal) and time of contact, and will notify the member of the transportation arrangements as soon as the arrangements are in place or within twenty-four (24) hours of receiving the request, provide the requestor with a confirmation number for the requested transport.~~
- C. Information about transportation arrangements will include but not be limited to the:
 5. Name ~~and telephone number~~ [LB14] of the NEMT provider
 6. Scheduled time window [LB15] and address of pick-up
 7. Name and address of the provider to whom the member seeks transport

Reporting

Medi Trans’s approval and scheduling system will also enable management to report and submit the prior month’s encounter data no later than the 15th of the following month. All data is submitted electronically, via a secure FTP site between The Health Plan and MediTrans. All contacts between both parties are listed below:

<u>Contact Name</u>	<u>Title</u>	<u>Organization</u>	<u>Email</u>
Kelly Russell	CTO	MediTrans	krussell@meditrans.com

Quality Improvement

The Medi Trans Quality Improvement Plan describes specific objects that Medi Trans will continuously monitor and improve in order to ensure excellent customer service during the delivery of transportation services. Medi Trans views this process as vital to Member’s and the Health Plan’s



satisfaction.

Medi Trans' quality improvement procedures are overseen and implemented by the Executive Leadership Team. Medi Trans will work continuously to advance Key Performance Indicators (KPI), enabling Medi Trans and The Health Plan to track overall performance.

By offering real-time access to Medi Trans staff for members, Medi Trans can assess and address any immediate transportation concerns. In addition to monitoring and addressing complaints, our Quality Assurance Program can react to situations that occur in real-time, as well as identify potential issues proactively. We also monitor our transportation providers, vehicles, and drivers at least weekly to ensure the highest levels of service to the members in our care. Regardless of apparent need, we meet with providers quarterly to identify areas (both internal and external) which may need improvement.

Medi Trans' Quality Improvement Plan will meet the following criterion:

- Use a systematic process to assess the quality of services provided to our members and Health Plan partners
- Use a process to assess and to ensure safe practices and a safe workplace.
- Implement corrective action when issues or opportunities are identified.

Medi Trans builds Quality Assurance into our operational procedures to facilitate continuous monitoring and control throughout our organization. Quality Assurance is an integral part of our planning, operation and delivery of services.

This Quality Improvement Plan has been approved by the highest levels of executive staff. The operational responsibility for the Quality Improvement Plan ultimately lies with the Chief Executive Officer (CEO), Chief Operating Officer (COO), and the executive leadership team. This team approves any changes to the Quality Improvement Plan.

The key components of Quality Management are:

- Ensure that all front-line employees comply with policy, practice, and procedures.
- Ensure accurate documentation and entry of key information into the system.
- Monitoring, tracking and trending service-related concerns.
- Ensure Network Transportation Provider compliance.
- Ensure accurate claims payment to transportation providers
- Ensure precise reporting to the Health Plan and LDH

Medi Trans incorporates these objectives into standard operating guidelines within Medi Trans call centers and operations. Operating guidelines are constantly evolving as Medi Trans is committed to continuous improvement of company and client standards.



Elements of Quality Assurance Plan

Medi Trans's Quality Assurance plan elements are designed to work in tandem with one another to build a strong foundation of continuous quality improvement. A strong Quality Improvement Plan demands involvement and participation from all levels of the organization. Assessment of Medi Trans will be performed in accordance with the following staff, oversight, scheduled activities and functions.

Complaint Resolution

If a client raises an issue of a possible quality related concern, Medi Trans will investigate and work to resolve the issues or concern. This includes any issue related to a member's interaction with Medi Trans or a provider in its transportation network. Working together ensures continuous improvement in services provided by Medi Trans.

Continuing Education (Internal and External)

In addition to the new hire training and provider orientation, Continuing Education is provided regularly and as needed.

Including, but not limited to the following topics:

- Customer Service
- Policy and Procedures
- Software Training

Monitoring Calls

Call Center Supervisors are responsible for listening to a minimum of two calls per CSR on a monthly basis. Call-auditing results will contain results by individual, team leader and as an overall percentage for the call center. Call Center Supervisors will review the calls for application of policy, adherence to procedures, courteousness, and accuracy of trip authorization requirements. If deficiencies are identified, Call Center Supervisors will determine, document and then administer appropriate corrective action(s) necessary to correct any outstanding issues.

Mode of Transportation Reviews

Our staff will assess the actual need for the requested transportation. The Medi Trans staff can take the following courses of action based on their review:

- Approve Requested Mode – in this case, no further action is necessary.



- Refer for a Medical Review – in this case, the request will be referred to the Health Plan for further evaluation of the necessity for a higher level of transport.

Network Transportation Provider Oversight

The key quality indicators related to actual trip delivery include timely pick-up and drop-off, participant comfort and safety during transport, vehicle condition and driver appearance, and driver conduct and interaction with the participants. The primary quality indicator that summarizes a Member’s overall level of satisfaction with the transportation provider is the number of complaints received.

The following table lists some of the key indicators and standards of quality we have set for our network transportation providers:

<u>Item</u>	<u>Requirement</u>
On Time Performance	Member is picked up and dropped off no more than two hours before the appointment time, but at least 15 minutes prior. For return trips, no more than two (2) hours from member notifying Medi Trans of being ready for pickup.
Vehicle condition	100% compliance with vehicle maintenance and safety requirements
Operator appearance and conduct	100% compliance with operator appearance and conduct requirements.
Overall complaint Rate	Less than 1%
Multi-load trip times	No participant can remain on a transportation provider’s vehicle longer than 45 minutes longer than a dedicated vehicle trip would.
Provider no-shows	0%

Provider Business Standards

Administrative Documents

- Transportation Providers are required to obtain the following administrative documents for their business:
- A Disclosure of Ownership Information Form for Entity and Business as required by 42 C.F.R. §§ 455.104-455.106; and 438, subpart H
- Name and address of any person, or any relative of this person, with an ownership or control interest in the entity or in any subdelegate/subcontractor in which the entity has a 5% or more interest.



- The provider's National Provider Identifier (NPI) number in his or her business entity name if the provider has obtained one from the National Plan and Provider Enumeration System (NPPES);
- A copy of the IRS Form CP 575 or 147C showing the Employer Identification Number (EIN) and business entity name which must match all other documentation including, but not limited to, vehicle signage;^{[MD16][LB17]}
- An IRS Form W-9 which matches the information on the IRS Form 575^{[MD18][LB19]} or 147C
- A Certificate of Public Necessity and Convenience (CPNC) issued by the Orleans Parish Taxicab Service and Enforcement Bureau for each provider, driver, and vehicle that will operate in Orleans Parish; and
- An NEMT permit issued by the Jefferson Parish Emergency Management Office for each provider, driver, and vehicle that will operate in Jefferson Parish

Driver Standards

Insurance

- A. Transportation Providers are required to obtain and maintain, at their sole expense, worker's compensation, auto liability and general commercial liability insurance, as applicable by LDH standards.
- B. The minimum amounts of which shall be as follows:
 1. State minimum for Worker's Compensation
 2. Auto Liability and General Commercial Liability insurance for amounts no less than state minimum requirements as set forth by LDH for Medicaid Transportation.
- C. The insurance must cover all owned, hired, or non-owned vehicles, as applicable, used to transport Members under the contract and must list the Louisiana Department of Health (LDH), Medi Trans, and The Health Plan as additional insured.^{[MD20][LB21]}
- D. General Liability coverage must include blanket contractual liabilities and sexual abuse and molestation.
- E. Certificates for insurance must be supplied to Medi Trans prior to providing transportation services and at any other time requested by Medi Trans; this includes certificates of renewal or surcharge, cancellation notices, or verification of coverage.
- F. A 30-day written notice must be provided to Medi Trans in the event of a cancellation, renewal, restriction, or non-renewal of any insurance coverage.

Drivers

- A. The Transportation Provider must provide a detailed and complete Driver Roster as part of the Network Application Process.
- B. Transportation Providers must resubmit this documentation upon request from Medi Trans.
- C. If there are any changes to employees (hiring or removal from service), such changes must be submitted in writing or email.
- D. The Driver Roster Form requires the following information:
 1. Last name
 2. First name



3. Driver's License number and issuing state
 4. Date of birth (DOB)
 5. Dates for completing:
- E. Transportation Provider must provide:
1. Evidence of a complete a background check and drug and alcohol check for each driver
 2. Evidence that driver is at least twenty-one (21) years of age and have a valid Class D, CDL, commercial driver license or equivalent, appropriate, driver license issued by the driver's state of residence.
 3. Successful completion of a safety program approved by the state of Louisiana. This training MUST include:
 - a. CPR
 - b. Passenger Assistance (PASS)
 - c. Defensive Driving^{[MD22][LB23]}
 - d. Wheelchair Securement
 - e. Child passenger restraint systems, including installation and usage in compliance with La. R.S. 32:295
 4. Transportation Provider must always recertify and maintain documentation of their driver's certifications.
 5. The appropriate municipal or parochial permits if operating in Orleans and Jefferson Parish for their drivers
- F. Transportation providers must adhere to LDH's criteria and procedures for the selection, qualification and training of drivers participating in the program.

CRIMINAL BACKGROUND AND MOTOR VEHICLE CHECK

- A. Potential drivers must submit to a criminal background check and drug and alcohol test.
- B. Drivers must be verified as not having been convicted of any barrier crimes, as defined by LDH. Any exceptions to this rule can only be made with explicit consent from LDH. Comply with La. R.S. 40:1203.1 - 40:1203.7. Transportation providers shall conduct an annual criminal history check on all NEMT drivers. The criminal history check must be performed by the Louisiana State Police, an agency authorized by the Louisiana State Police, or the FBI. The results of the criminal history check must be transmitted directly to the transportation broker by the authorizing agency. The driver must submit written consent allowing the authorized agency to release the background check results directly to the transportation broker. The driver must have a "clean" record, with no convictions for prohibited crimes, unless the person has received a pardon of the conviction or has had their conviction expunged.
- C. Driving record verification must consist of a five-year driving record check with neither three or more moving violations, nor any convictions for operating a vehicle while intoxicated, within the past three years
- D. Driver must immediately notify the Contractor if a driver is arrested for, charged with, or convicted of a criminal offense that would disqualify the driver.
- E. No driver has been convicted of a criminal offense related to the driver's involvement with Medicare, Medicaid, or the federal Title XX services program.



- F. Medi Trans must verify that drivers are not listed on the Sexual Offender Registry and the equivalent registry showing data from all fifty (50) states. This is in addition to the criminal background check and results must be maintained in the drivers file as to allow for unscheduled file audits.
- G. All criminal background checks, motor vehicle records, and sex offender checks must be completed prior to hire and annually thereafter.

Additional Screening

All Transportation Provider owners and drivers providing service to Medi Trans under the Agreement, must also undergo exclusion screenings.

These individuals must:

- A. Not be listed as an excluded persons on the U.S. Department of Health and Human Services, Officer of Inspector General (OIG)'s List of Excluded Individuals and Entities (LEIE) currently available on the website <http://exclusions.oig.hhs.gov/>.
- B. Not be listed on the non-procurement portion of the General Service Administration's "List of Parties Excluded from Federal procurement or Non-procurement Programs" currently found at <https://www.sam.gov/portal/public/SAM/>.
- C. Not be listed on the Louisiana State Adverse Actions List located at <https://adverseactions.ldh.la.gov/SelSearch>.

Transportation Provider will ensure it reruns and documents these screenings, which are free at the websites listed above, on a monthly basis. Should the screenings turn up a match, MediTrans will notify the health plans within 72 hours.

Drug Testing

Transportation Providers must additionally establish a drug-free workplace policy statement and a substance abuse management and testing program. Drivers must have successfully passed a five-panel drug screen, at a minimum, which shall be performed annually and upon reasonable suspicion. Drug screens must also be taken by drivers within 12 hours of any accident. The results of the drug screen must be transmitted directly to the transportation broker by the testing agency. Any driver, or prospective driver, who fails the drug screen may resume driver responsibilities after a substance abuse professional issues a final evaluation and return to work clearance. The transportation broker shall confirm that the driver successfully completes three follow-up screens over the six-month period following return to duty.

Testing will include a five (5) panel drug screen, which shall mean a urine-based drug test that screens for the use of:

- Amphetamines
- Cocaine
- Marijuana
- Opiates
- Methamphetamines



Driver's License

A driver who receives a notice of license suspension, cancellation or revocation must inform their Transportation Provider of the contents of the notice immediately, or no later than the end of the business day after receiving the notice. Transportation Provider must notify Medi Trans in writing within one (1) business day.

Medi Trans 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.

Training

- A. Transportation Providers must train their employees in the understanding of NEMT services in general, its reporting forms, vehicle operation, requirements for fraud, abuse reporting and the geographic area in which Provider will provide service.
- A. All employees must be trained in the understanding of service expectations set forth in these policies.
- B. Provider must be trained in understanding established procedures for providers and drivers in the event that the Member needs emergency care during the ride.
- C. In addition, Transportation Provider's entire staff must undergo the following training prior to Transportation Provider accepting or performing services for Medi Trans and on an annual basis:
 - 1. HIPAA Privacy and Security Training
 - 2. Fraud Waste and Abuse Training
 - 3. Cultural Competency
 - 4. Cultural Diversity
 - 5. Code of Business Conduct
 - 6. Reporting Abuse
- D. Understanding established procedures for providers and drivers in the event that the Member needs emergency care during the ride. Drivers must complete the following courses and provide copies of certificates to Medi Trans before taking trips:
 - 1. Defensive Driving
 - 2. CPR
- E. Additionally, before allowing new drivers to drive unsupervised, Transportation Providers must train and test their drivers to demonstrate and ensure that each has adequate skills and capabilities to safely operate each type of vehicle or vehicle combination.
- F. Transportation Providers must provide drivers with explicit instructional and procedural training:
 - 1. Safety and operational policies and procedures as set forth in the Transportation Service Agreement and Louisiana Provider Manual.
 - 2. Briefing about the program, its reporting forms, and the geographical area in which they will be providing service.
 - 3. Operational vehicle and equipment inspections.
 - 4. Familiarization with vehicle equipment.
 - 5. Basic operations and maneuvering.
 - 6. Boarding and unloading passengers.



7. Operation of wheelchair lift and other special equipment and driving conditions.
 8. Defensive driving.
 9. Passenger assistance and securement.
 10. Awareness and handling of emergency and security threats.
- G. Transportation providers must also provide their drivers with written operational and safety procedures addressing the following:
1. Communication and handling of unsafe conditions, security threats and emergencies.
 2. Familiarization and operation of safety and emergency equipment, wheelchair lift equipment and restraining devices.
 3. Application and compliance with applicable federal and state rules and regulations
 4. Procedures for reporting abuse and neglect.
- G. Drivers must maintain daily transportation logs containing, at a minimum, the information listed below.
1. Date of service;
 2. Driver's name;
 3. Driver's signature;
 4. Name of ~~escort~~attendant or accompanying adult (for Member's under age eighteen (18) and relationship to Member (if applicable));
 5. Vehicle Identification Number (VIN);
 6. Member's name;
 7. The NEMT provider's name;
 8. Number assigned by Medi Trans for the approved trip;
 9. Mobility type of transportation approved;
 10. Scheduled pick-up time for the time zone applicable to the pick-up location;
 11. Actual pick-up location and time for the time zone applicable to the pick-up location;
 12. Actual departure time from pick-up location for the time zone applicable to the pick-up location;
 13. Actual destination and time for the time zone applicable to the destination;
 14. Actual number of wheelchairs, ~~escort~~attendants, and accompanying adults (for Members under age eighteen (18));
 15. Odometer readings at each point of pick-up and of drop-off; and
 16. Notes, if applicable. At a minimum, the log shall show notes in the case of cancellations, incomplete requests, "no-shows", accident and incident.
 17. For ambulance, the log shall also contain, at a minimum:
 1. Patient assessment by ambulance personnel and a chronological narrative of care/service rendered by ambulance personnel;
 2. Itemized list of specialized services and/or supplies; and
 3. Type of vehicle used for transport (class or service category).



Other Driver Requirements

Provider shall ensure that its drivers and attendants abide by the following State or federal statutes and regulations:

- A. No drivers or attendants shall allow firearms, alcoholic beverages, unauthorized controlled substances, or highly combustible materials to be transported in the vehicle.
- B. No drivers or attendants shall solicit or accept controlled substances, alcohol or medications from Members.
- C. No drivers or attendants shall make sexually explicit comments, or solicit sexual favors, or engage in sexual activity while in the course of their job duties.
- D. No drivers or attendants shall solicit or accept money from Members.
- E. No drivers or attendants shall wear any type of headphones while on duty.
- F. During performance of Transportation Services, mobile telephones may only be used in regard to the services under Agreement, and driver shall at all times comply with applicable laws regarding the use of cell phones by the driver of a moving vehicle.
- G. Drivers must speak English.
Note: To best serve the needs of The Health Plan's population, Medi Trans strongly encourages the utilization of drivers who speak additional languages including American Sign Language.
- H. While on duty, drivers must have photo Identification displayed in a conspicuous location of the vehicle, and the driver's name patches, inscription, or badge will be affixed to the driver's clothing as applicable based on state contractual and regulatory requirements.
- I. Drivers must never use alcohol, narcotics, illegal drugs, prescription drugs and/or over the counter medication, that impair their ability to perform their duties.
- J. Drivers must not use or be under the influence of marijuana, including therapeutic or medical marijuana as permitted by state law, while operating, or having physical control of, a vehicle. The crossing of state lines with medical marijuana as well as the unlawful distribution, dispensation, possession, or use of marijuana in the workplace is otherwise prohibited.

Vehicle Standards

- A. As part of the application process, Provider must provide Medi Trans with a detailed vehicle list.
- B. Only vehicles on this list may be used for any service provided to Members.
- C. Provider may utilize only its own leased or owned vehicles and shall not sublet, subcontract or arrange for transportation under this agreement from any third party.
- D. Each vehicle must pass initial and annual inspections by Medi Trans as well as unannounced inspections as required by Medi Trans or The Health Plan at its sole discretion.
- E. Inspections performed by Medi Trans do not replace or excuse the Transportation Provider from obtaining vehicle safety inspections as required by state or local law and/or ensuring vehicle safety.



- F. Vehicles must meet federal, state, local and manufacturer's safety and mechanical operating and maintenance standards for the vehicle.
- G. All vehicles to be used to provide transportation services under any Agreement shall have and display proof of any required vehicle safety inspections pursuant to applicable federal, state or local laws and regulations.
- H. Proof that each vehicle has successfully completed such inspection shall be provided to Medi Trans upon request.
- I. Vehicles used must be either medical carriers or regular passenger vehicles.
Note: Medical carrier vehicles shall have sufficient interior space for Members who are in wheelchairs with elevated leg rests.
- J. Provider must comply with the appropriate federal, state and local transportation safety standards regarding passenger safety and comfort.
- K. Provider must ensure that every vehicle operating in connection with any Agreement is in first class operating condition and shall be maintained in this condition throughout the life of any Agreement.
- L. Vehicles must have proper permits and licenses to operate within the area to deliver services required by any Agreement or the Louisiana Provider Manual.
- M. Any vehicle found non-compliant with the applicable inspection standards, Louisiana licensing requirements, safety standards, Louisiana Highway and Transportation Department, or ADA regulations, or other state or federal laws or regulations must be immediately removed from service and must pass a reinspection before it may be used to provide transportation services for Members under any Agreement.
- N. Additionally, Medi Trans reserves the right to inspect the vehicles and require that a vehicle be taken out of service if it, in Medi Trans's or LDH's opinion, does not meet any of the standards in this Manual, Louisiana Provider Manual or any Agreement.
- O. Providers must ensure the comfort and safety of the members being transported by properly maintaining their vehicles to the following standards (not all-inclusive):
 - 1. **Interior of the Vehicle**
 - a. Provider shall ensure that every vehicle operated in the state in connection with any Agreement is maintained for the comfort and safety of the Members. The vehicles shall meet the following requirements:
 - a. The interior must be clean and well-maintained.
 - b. It must be free of dirt, grime, grease, oil, trash, torn upholstery, broken mirrors or windows, major dents, material paint damage, torn upholstery, torn or damaged floor or ceiling coverings, unsecured items, 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. Cosmetic defects are to be repaired promptly.



- c. The following must be posted and clearly visible:
 - “No Smoking, No Cell Phones, No Firearms, and No Food or Beverage” signage
 - Name and phone number of the Transportation Provider prominently displayed on both the side panels/windows in full view.
 - Vehicle number
 - Medi Trans’s toll-free phone number (for complaint filing)

2. **Equipment**

- a. The following items must always be in operating condition:
 - i. If the vehicle is legally required to provide safety belts, safety belts for all size passengers and at least one seat belt extenders must be in operable condition.
 - a. Side and rear-view mirrors, which will include at least two exterior rear-view mirrors, one on each side of the vehicle as well as one interior mirror for monitoring the passenger compartment.
 - b. A working horn
 - c. Working turn signals, headlights, taillights and windshield wipers
 - d. An accurate, operating speedometer and odometer
 - e. A two-way communication system to link all vehicles to Provider’s place of business.
 - f. Note: A vehicle with an inoperative two-way communication system shall be placed out of service until the system is repaired or replaced.
 - g. Wiring and battery
 - h. Service and parking brakes
 - i. Heating and air conditioning systems
- b. The following safety equipment must be present and operable in the vehicle:
 - i. First Aid kit
 - a. Fire extinguisher
 - b. Disposable gloves
 - c. "Spill kit" that includes liquid spill absorbent, latex or other impermeable gloves, hazardous waste disposal bags, scrub brush, disinfectant and deodorizer. This includes an appropriate means to handle blood borne pathogens.
 - d. At least one seat belt cutter that is kept within easy reach of the driver for use in emergency situations.
 - e. Accident report forms and waivers
 - f. All equipment necessary to transport Members using wheelchairs or stretchers if the Provider uses the vehicle for these modes of transport.
 - g. Onboard vehicle information packet containing vehicle registration, insurance card, and accident procedures and forms.



- h. Other equipment may need to be present and functioning depending on the type of vehicle.

P. Individuals with Disabilities

Vehicles shall comply with the Americans with Disabilities Act (ADA) Accessibility Specifications for Transportation as well as Federal Transit Administration (FTA) and Department of Transportation regulations, as and if applicable for the type of vehicle utilized by Provider.

Q. Maintenance

1. Vehicles must meet federal, state, local and manufacturer's safety and mechanical operating and maintenance standards for the vehicle.
2. All vehicles and equipment must be maintained and operated in accordance with the manufacturers' federal and state safety and mechanical operating and maintenance standards.
3. Upon the request of Medi Trans, Provider must submit records to Medi Trans documenting the maintenance performed on each vehicle, including routine maintenance and major repairs (e.g. brake system, transmission, electrical system, etc.).
4. Providers must abide by the following maintenance guidelines:
 - a. Establish and maintain preventive maintenance policy and procedures as well as a schedule that includes, at a minimum, the schedule recommended by the vehicle's manufacturer
 - a. Ensure that all vehicles and 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
 - b. Establish a recording and tracking system for the inspections, maintenance, and lubrication intervals, including the date or mileage of when these services are due. Required maintenance inspections shall be more comprehensive than daily inspections performed by the driver.
 - c. Maintain written documentation of preventive maintenance, regular maintenance, inspections, lubrication and repairs performed for each vehicle. These records must be kept for ten (10) years and include, at a minimum:
 - i. Identification of the vehicle, including make, model and license number or other means of positive identification and ownership.
 - a. Date, mileage, type of inspection, maintenance, lubrication or repair performed, and a description of each.
 - b. If not owned by Provider, the name of any person or lessor furnishing any vehicle.
 - c. The name and address of any entity or contractor performing an inspection, maintenance, lubrication or repair.



DRIVER AND VEHICLE STANDARDS WHILE TRANSPORTING THE MEMBER

- A. Drivers or, if applicable, attendants must:
1. Always identify themselves by name and company, unless the driver transports the member on a recurring basis
 2. Provide members with moderate accommodations to the seating portion of the vehicle.
Note: This includes opening the vehicle door, fastening the seat belt or using the wheelchair securement devices, storing mobility devices and closing the vehicle door.
 3. Ensure adequate seating space for the member and attendant(s).
Note: The vehicle must not transport more passengers than the registered seating or standing capacity at any time.
 4. 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
 5. Not place calls or texts at any time during transport unless safely parked
 6. Allow free transportation of the following items for the member, provided they can be carried by the passenger or driver and can be stowed safely on the vehicle:
 - a. Wheelchairs
 - a. Secured oxygen
 - b. Personal assistive devices
 - c. Intravenous devices
 7. Reasonably assist the Member from their residence to the vehicle and deliver them to the specific location designated on the manifest issued to the transportation provider
 8. Be courteous, patient and helpful to all Members and be neat and clean in appearance
 9. Maintain a temperature with respect for the comfort of the Member
- B. Members must:
1. Not be allowed to stand on vehicles not designed for that purpose
 2. Not be transferred from one vehicle to another vehicle while being transported except in the case of mechanical breakdown, accident or similar emergency, in which case transportation provider shall immediately notify Medi Trans
 3. Never be abandoned in a vehicle
- C. Drivers, attendants and occupants must wear seat belts at all times.
- D. The vehicle must:
1. Not be refueled in a closed building or when members are on board.
 2. Not be left unattended with a member aboard for longer than five (5) minutes.
 3. Not be left unattended in an unsafe condition with Member(s) aboard at any time



- E. Ambulatory and wheelchair services must be curb-to-curb, ~~unless additional assistance is otherwise requested by the beneficiary.~~^[VG24]^[LB25] or door-to-door assistance to and from the main entrance of the pickup and/or drop off locations upon request of enrollees who may require additional assistance.
- F. Smoking, eating and drinking are prohibited in any vehicle, except in cases in which, as a medical necessity, the Members requires fluids or sustenance during transport.



LOUISIANA-SPECIFIC DRIVER AND VEHICLE STANDARDS WHILE TRANSPORTING THE MEMBER

- Drivers must exercise the utmost safety in caring for enrollees while transporting them and guard against becoming insensitive to their physical and emotional conditions.
- Drivers must ensure:
 - The equipment and vehicle used are kept clean and serviceable at all times;
 - All laws of the State of Louisiana are observed while transporting passengers; and
 - The vehicle is safe and in good operating condition.
- Drivers must:
 - Not use or be under the influence of alcohol within four hours before going on duty or while operating, or having physical control of, a vehicle.
 - Not be under the influence of an amphetamine of any formulation thereof, a narcotic drug or any derivative thereof, or other substance to a degree which renders the driver incapable of safely operating a vehicle.
 - Come to a complete stop at all railroad crossings. • Utilize the proper procedures required to move enrollees into and out of the vehicle equipped to transport non-ambulatory, wheelchair enrollees.
 - Ensure that all passengers are wearing seatbelts or are otherwise secured. If the passenger uses a wheelchair during transport, the driver must ensure the appropriate use of an occupant restraint system. Lap positioning belts and chest straps are not sufficient safety restraints for wheelchair passengers.
 - Ensure that no smoking or vaping occurs in the vehicle as in accordance with current Occupational, Safety and Health Administration (OSHA) regulations.
 - Always turn the engine off when fueling a motor vehicle, and never fuel the vehicle where there is smoke or an open flame.
 - Ensure that vehicles are not towed or pushed with passengers on board.
 - Ensure the proper installation and usage of the child passenger restraint systems in compliance with La. R.S. 32:295.
 - The parent or guardian of the child is responsible for providing an appropriate child passenger restraint system as outlined by La. R.S. 32:295. The vendor is responsible for notifying the parents or guardians of this requirement when scheduling the trip.
- Emergency situations:
 - If an emergency arises while transporting an enrollee, the driver must immediately assess the situation and determine whether to: Stop the vehicle and assist with the emergency; • Proceed immediately to the nearest medical facility; or • Call 911 for emergency medical assistance.
 - If the enrollee is taken to an emergency medical facility, the driver must immediately notify the health plan or its transportation broker and a



member of the enrollee's family if that information is available. When driving to the emergency medical facility, the driver should remain calm and alert and drive as quickly as conditions permit for safe vehicle operation.

Inspections

Throughout the contract period and at intervals determined by Medi Trans, 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 Medi Trans upon initiation of the Provider's participation in the program and at other times as deemed necessary by Medi Trans.

Daily Pre-trip Inspections

- A. Drivers must 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:
 1. Service brakes
 2. Parking brakes
 3. Tires and wheels
 4. Steering
 5. Horn
 6. Lighting devices
 7. Windshield wipers
 8. Rear vision mirrors
 9. Passenger doors and seats
 10. Exhaust system
 11. Equipment for transporting wheelchairs
 12. Safety, security and emergency equipment
- B. Transportation Providers must provide their drivers with a Vehicle Inspection Checklist to document their daily inspections and submit them to the Transportation Provider for daily review.
- C. These inspection forms must be released to Medi Trans upon request.
- D. 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.
- E. Records of all inspections and documentation for these corrective actions must be recorded and retained for ten (10) years.

Company Inspections

- A. Prior to commencement of transportation services, and at other times deemed necessary by Medi Trans, a qualified Medi Trans employee will inspect vehicles for compliance with the required safety devices and equipment, such as:
 1. Horn
 2. Windshield wipers
 3. Mirrors
 4. Wiring and battery



5. Service and parking brakes
6. Warning devices
7. Directional signals
8. Hazard warning signals
9. Lighting systems and signaling devices
10. Handrails and stanchions
11. Standee line and warning
12. Doors and interlock devices
13. Stepwells and flooring
14. Emergency exits
15. Tires and wheels
16. Suspension system
17. Steering system
18. Exhaust system
19. Seat belts
20. Safety equipment
21. Equipment for transporting
22. Decals noting that vehicle will stop at Rail Road Crossings (Medicare only requirement)

B. Medi Trans's inspection reports will include:

1. Identification of the Transportation Provider
2. Date of inspection
3. Identification of the vehicle inspected
4. Identification of the equipment and devices inspected and what was found deficient or defective.
5. Identification of the corrective actions for the deficient or defective items and the date of completion of those actions.

Note: Random inspections will take place at times and locations determined by Medi Trans, taking into consideration the Transportation Provider's workload whenever possible.

6. Reports from The Health Plan, 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.

C. 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

Result	Action
Pass	Continue to use the vehicle
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
Fail	Vehicle must remain out of service until the infraction is fixed and the vehicle is re-inspected



Unfavorable inspection results as noted by Medi Trans may be satisfied by the Provider fixing the issues and scheduling a follow-up inspection with Medi Trans.

Records and Reports

Daily Reports

- A. Drivers must submit a daily vehicle inspection report to the Transportation Provider for any vehicle that is to be used to transport members in the program.
- B. These reports are subject to inspection by Medi Trans.
- C. Upon completion of a ride to a member, drivers must also complete the trip record.
- D. Provider must provide Medi Trans a daily report of any scheduled transportation that results in a passenger “no show,” cancellation, late pick up and a reason, and other detail as requested by Medi Trans. All “no shows” must be reported within 24 hours.
- E. Provider must notify Medi Trans, within two hours, of any motor vehicle accident occurring with Members on board. Once Medi Trans is notified of accident or incident with Member on board, it is our responsibility to notify The Health Plan within 72 hours via phone or email. If applicable, the following supporting documents will be provided upon request:
 - 1. Medi Trans Accident/Incident Report Form
 - 2. Louisiana Uniform Motor Vehicle Accident Report
 - 3. Police report
 - 4. Driver drug screen
 - 5. Recommendation of remedial driver training as needed upon review of audio and video evidence
- F. Provider must provide Medi Trans a daily report of any scheduled transportation where any of the following occurred.
 - 1. Passenger is suspected of using NEMT services for non-medical transportation.
 - 2. Passenger’s service level needs do not match the service level indicated by Medi Trans.
- G. Provider shall immediately report to Medi Trans in writing any suspected fraud or abuse of NEMT Services.
- H. Provider must immediately report to Medi Trans in writing the issuance of a traffic citation to any of its Drivers and the outcome thereof.
- I. Provider agrees that this information may be shared by Medi Trans with its The Health Plan.

Report Retention

- A. Transportation providers must maintain the following records for at least ten (10) years:
 - 1. Records of driver background checks and qualifications
 - 2. Detailed descriptions of training administered and completed by each driver
 - 3. 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



4. Any documents required to be prepared by the contract

Ad-Hoc Reports

At any time, Medi Trans may request the Provider to provide reports to verify compliance with the terms and conditions of any Agreement, this Manual or applicable laws, rules or regulations. Additionally, the Provider may be requested to provide reports and documentation to support the fees, charges, or mileage.

RESPONSIBILITIES AND SERVICE STANDARDS

Medi Trans is responsible for securing safe, consistent, professional, necessary, adequate, timely and cost-effective service to and from medically necessary services for all qualifying Members in our care who lack viable alternative means of transportation. Such responsibilities include but are not limited to:

Geo-access and Provider Selection & Records

1. Transportation for the member and one attendant, by any means permitted by law, including but not limited to the requirements of La. R.S. 40:1203.1 et seq.
2. Reimbursement to transportation providers shall be no less than the published Medicaid fee-for-service (FFS) rate in effect on the date of service, unless mutually agreed to by the transportation broker and the transportation provider in the provider agreement.
3. Educate Call Center and Dispatch staff on guidelines to adhere to Geo-access standards
 - a) When seeking services from a PCP: This is generally 10 miles for urban populations and 30 miles for rural populations. If enrollees choose to travel outside of these guidelines, they become responsible for travel arrangements and costs. Requests for exceptions as a result of prevailing community standards must be submitted in writing to LDH for approval. Note: Through encounter data, LDH continues to identify scores of incidents of trips provided to enrollees traveling far outside of these guidelines for routine care.
 - b) For Specialized Care: 75% of enrollees are to be seen within 60 miles of their residence and 100% of enrollees are to be seen within 90 miles of their residence. Requests for exceptions as a result of prevailing community standards must be submitted in writing to LDH for approval
 - Educate Call Center and Dispatch staff so that enrollees are being transported to the closest provider of routine and specialty care.
 - Ensure that NEMT transport is not occurring for enrollees residing in a nursing facility or any other non-covered service unless it is an explicitly requested value added benefit of the Health Plan.
 - Members are linked to specific Opioid Treatment Program (OTP) locations; however members may "guest dose" at other clinics. NEMT will cover any OTP location, not just the location to which the member is linked. If a member chooses to travel outside of the transportation service area in order to access a preferred healthcare provider a written request for exception will be submitted to LDH for approval. If LDH denies the request, the trip should be denied and not reimbursed.



- Verify and cancel any NEMT Standing Orders for nursing facility residents.
- Verify that any NEAT standing orders for nursing facility residents are for the transport of enrollees that are bedbound or have a condition requiring monitoring by medical professionals. NEAT transports require a Certification of Ambulance Transportation Form to be signed by a licensed medical professional.
- Ensure that no NEMT or NEAT transportation is occurring when an enrollee is also on hospice status, including discharge transportation that occurs on the same DOS as the hospice admit.
- The use of any service that utilizes drivers that have not met LDH requirements is strictly prohibited.
- Transportation providers are selected to ensure proximity to the member to the maximum extent reasonable given all other contractual, legal, and regulatory requirements.
- Maintenance by the Vendor in an electronic format, of all records necessary to establish and validate NEMT claims, including but not limited to:
 - Authorization data, including all member, provider, pick-up, drop-off, and mileage information necessary to establish a claim or as requested by LDH.
 - Trip dispatch and passenger records, including logs and driver and passenger transportation verifications.
 - Vehicle and driver compliance records, including all required licensure and credentialing
- All NEMT service claims are reviewed against physical claims for potential abuse and affirmatively reported to LDH and the Health Plan upon reasonable suspicion of impropriety
- Vendor must have sufficient NEMT providers, including wheelchair lift equipped vans, to transport members to medically necessary services when notified 48 hours in advance, and Vendor must be able to arrive and provide services with sufficient time to ensure the member arrives at their appointment at least 15 minutes but no more than 2 hours early.
- For medically necessary non-emergent transportation requested by the member or someone on behalf of the member, the Vendor shall require its transportation contractor to schedule the transportation so that the member arrives on time but no sooner than one hour before the appointment; nor have to wait more than two hours after the conclusion of the treatment for transportation home; nor be picked up prior to the completion of treatment.

Meals, Lodging, and Long-Distance Travel

- For trips requiring long distance travel, in accordance with Section 6.23.3.2, the cost of meals and lodging and other related travel expenses determined to be necessary to secure medical examinations and treatment for a member.
- Medi Trans will require prior authorization from the Health Plan for all meals, lodging, and long-distance travel expenses, prior to approving services
- Coverage and reimbursement for meals and lodging for both the member and one attendant, shall be included when treatment requires more than twelve (12)



hours of total travel. "Total travel" includes the duration of the health care appointment and travel to and from that appointment.

- Vendor must allow for meals and lodging, for each trip that is not otherwise covered in the inpatient per diem, primary insurance, or other payer sources.
- Other primary private insurance coverage must not impede a member's ability to receive transportation benefits to and from services covered by Medicaid as a secondary payer. If the private insurer has approved out-of-state services that are covered by Medicaid, the Vendor must provide transportation, meals and lodging as specified in this section.
- For all NEMT services requiring scheduling and/or prior authorization, the Vendor shall make eighty percent (80%) of standard service authorization determinations within two (2) business days of the request for services. All standard service authorization determinations shall be made no later than fourteen (14) calendar days following receipt of the request for service or no less than 24 hours prior to the date of service, unless the request is received less than 48 hours prior to service.
- In cases where the request is made less than 48 hours in advance of needed transportation, the Vendor shall make reasonable efforts to schedule transportation and provide notice in advance of the scheduled appointment

Gas Reimbursement

- It is Medi Trans' responsibility to ensure that all Gas Reimbursement (GR) Participants (drivers) are required to:
 - be enrolled with Medicaid as a Friends and Family provider
 - must have completed a Vendor's Transportation Provider Enrollment Form
 - must complete, when applicable the Vendor's GR Form.
 - Medi Trans is responsible for managing the GR Program, therefore, Vendor must provide and collect all the needed forms, and must ensure that the driver meets all requirements, including:
 - Proof of current valid driver's license that shows gas reimbursement provider is 18 years of age or older (copy of the license is required)
 - Proof of current valid state minimum automobile liability insurance coverage and vehicle registration (copy of insurance and registration is required)
 - Proof of current valid state inspection sticker (picture of the sticker is required)^{[MD26][LB27]}
 - Driver's social security number
 - When a trip is booked, the contractual Geo-Access requirements must be followed.
 - Vendor is responsible for not allowing "double dipping" for this benefit. For example, if the participant takes two individuals from the same location to the same facility, they should only be reimbursed for the mileage one time instead of twice. Vendor must have a policy and procedure in place to prevent "double dipping".



- The GR Enrollee cannot be transported by a GR Participant with the same address as the Enrollee.
- GR participants are allowed to transport up to five (5) specific Medicaid recipients or all members of one household. Note: Individuals transporting more than five (5) Medicaid recipients shall be considered profits providers and must be enrolled as such.
- The GR Form must be required for every reimbursement claim/trip. This form should only be completed by the driver. Completing this form via phone or portal is prohibited. **The gas reimbursement form must be typed or written in ink and include the following information:**
 - Trip identification number;
 - Driver's full name;
 - Driver's residential address;
 - Driver's phone number;
 - Driver's e-mail address (if applicable);
 - Driver's relationship to enrollee;
 - Enrollee's name;
 - Enrollee's Medicaid ID number;
 - Enrollee's address;
 - Transportation date;
 - Name of facility/medical provider;
 - Address of facility/medical provider;
 - Phone number of facility/medical provider;
 - Signature of driver attesting that the information on the form is true and correct;
 - Signature of enrollee or parent/guardian attesting that the information on the form is true and correct;
 - Medical facility/physician's signature and date; and
 - Medical facility's stamp.

~~The GR Form must include the following information:~~

 - ~~• Full name of driver~~
 - ~~• Contact information of driver~~
 - ~~• Relationship to member~~
 - ~~• Enrollee name~~
 - ~~• Enrollee address~~
 - ~~• Transportation date~~
 - ~~• Facility/medical provider name and contact information (should be compared to what was originally booked to eliminate false information on form)~~
 - ~~• Facility/medical provider address~~
 - ~~• Signature spot for the driver and enrollee with an attestation that the information is true and correct.~~

~~[MD28][LB29]~~
- Appointment type (to make sure payment for value added services is not made).
- Medi Trans must calculate the miles based on the most direct route to the appointment, but take into account road closures or tolls



Adding or Deleting Transportation Vehicles

- Any Transportation Provider performing ~~sub-delegated~~ transportation services under Medi Trans must provide a list of all vehicle used for said services, and vehicle must be authorized for use by Medi Trans, once sufficient documents have been collected and inspection of vehicle passed by a Medi Trans authorized agent^{[MD30][LB31][VG32]}
- The requested addition or deletion of any authorized vehicle must be accompanied by an updated vehicle roster.
- In the case of vehicle additions, proper registration and insurance must also accompany the request
- NEMT providers from the Parishes of Orleans and from Jefferson must also submit copies of their appropriate municipal or parochial permits.
- NEMT providers in Orleans Parish must use their Orleans Parish Certificate of Public Necessity and Convenience (CPNC) number as their unit number. The CPNC number must meet Orleans Parish regulations for size, contrast of color and location.
- When a vehicle is deleted from the fleet, the decal must be removed from the vehicle

Insurance Requirements

- It is Medi Trans' responsibility to ensure all Transportation Sub-contractors have a minimum liability insurance to cover \$25,000 per person, \$50,000 per accident and \$25,000 property damage policy or a combined single limit policy with a minimum of \$300,000 in coverage. Furthermore, the Transportation Sub-contractor's liability policy must cover any and all of the (a) non-owned autos, (b) scheduled autos, (c) hired autos; ~~(d) non-owned autos~~^{[MD33][LB34]}. *Source: 12/27/2019 Justification of Promulgation of Emergency Rule – LAC 50:XXVII.541 Medical Transportation Program – Non-emergency Medical Transportation. State of Louisiana department of health, Office of the Secretary – Memorandum.* Transportation provider insurance coverage shall meet state minimum requirements and are subject to change based on changes from the Louisiana Department of Health as referenced in Insurance Addendum.

To further promote professional, prompt and courteous service, Medi Trans will periodically solicit Member assessment of the Provider services and will actively address concerns raised by the Members.

Responsibilities and Requirements

A. The Provider must:

1. Ensure services are available at all times agreed upon in Provider Agreement.



2. Agree to cover the entire parish or parishes for which he or she provides NEMT services.
3. Be equipped to utilize on-line trip assignment and reconciliation program.
4. Maintain sufficient staffing and vehicle capacity to deliver timely transportation services for trip assignments accepted by the Provider.
5. Maintain, in fully operational status, the number of vehicles it proposed at the execution of any Agreement as well as sufficient number of drivers to operate such vehicles.
6. Notify Medi Trans if the number of vehicles or staffing levels are reduced to the extent that it threatens timely performance of services under any Agreement.
7. Notify Medi Trans as soon as possible of an accepted trip that provider is unable to complete.

Note: Notification shall be through mutually agreed upon on-line system or telephone call.

8. Fully cooperate with Medi Trans, the State of Louisiana and any of its agencies, the Federal Government and any of its agencies during any investigation of suspected program fraud or abuse.

Note: Such cooperation shall include prompt response to reasonable requests for information and documentation.

9. Meet all insurance, licensure and certification requirements and the non-emergency transportation requirements established by the State or other government body of competent jurisdiction to regulate provider's services.
10. Deliver transportation services in any part of a region or other defined service area for which they have agreed to provide service.
11. Not sublet, subcontract, or arrange for transportation for any calls assigned to them except as otherwise provided in any Agreement.
12. Make available to Medi Trans upon request, all drivers logs with information.
13. Supply Medi Trans with dedicated phone numbers for a management representative at their Dispatch Center and a frequently monitored email address.
14. Attend an orientation by Medi Trans, to ensure that the requirements of the The Health Plan Contract are understood so that the needs of the Members are met.

Service Standards

- A. Provider's habitual late or missed pick-ups may result in trip reduction, liquidated damages, and/or termination of any Agreement.
- B. The Provider understands and agrees that the Member has the right to cancel use of the Provider's Service if the Provider's vehicle arrives at the residence after the appointment time with no charge to Medi Trans, the The Health Plan or the Member.
- C. Provider Must pick up Members on all "will call" return trips within two (2) hours from receipt of Member request for return transportation.
- D. Provider Must attempt to deliver the Member to scheduled medical appointments within fifteen (15) minutes of the medical appointment time as standard practice, conversely, an earlier drop off before the appointment time may be acceptable in



unusual situations on a case- by-case basis. However, in no event shall a Member be dropped off for a medical appointment before the opening time of a medical office or facility or earlier than two (2) hours prior to their scheduled appointment time.

- E. Provider shall ensure that Members are picked up at pre-arranged times for the return trip if the medical service provider follows a regular schedule. However, Providers are not guaranteed the return trip.
- F. All legs of each trip must have a valid Trip ID assigned by Medi Trans. The prearranged times may not be changed by the Provider or the driver without prior permission from Medi Trans.
- G. Provider's timely delivery of Members to scheduled medical appointments may be included as a measure of on-time performance.
- H. For same day hospital discharge reservations, Medi Trans must call Provider and Provider must pick-up Members at the agreed upon time.
- I. Member with 8:00 A.M. appointment times shall not be picked up prior to 6:00 A.M.
- J. Driver shall make their presence known to the Member upon arrival at the pick-up address and must wait an appropriate time given the situation, up to ten (10) minutes, after the scheduled pick-up time before the Member may be considered a "no show".
- K. If the Member is not present for pick up, the driver shall notify Provider's dispatcher and Medi Trans before leaving the pick-up location and document such "no show" in its trip logs.
- L. Providers must notify Medi Trans immediately of all no shows and document such no shows in writing to Medi Trans within twenty-four (24) hours.
- M. Provider shall not be required to wait more than ten (10) minutes after the scheduled pick- up time for a Member, provided reasonable attempts have been made to contact Member.
- N. If a Member is being transported to their residence after being discharged, the Provider shall also transport the Member's belongings and deliver those belongings to that person's residential entrance.
- O. The Provider understands and agrees that the Member has the right to cancel use of the Provider's transportation service if the Provider's vehicle arrives at the residence after the appointment time with no charge to Medi Trans, the The Health Plan or the Member.
- P. Provider shall notify Medi Trans of any conditions, which may result in delays to a Member's scheduled trips (e.g. accident, mechanical breakdown, etc.)
Note: If a delay of thirty (30) minutes or more occurs in the course of picking up scheduled riders, Provider must attempt contact waiting Members at their pick-up points to inform them of the delay and the expected arrival time of the vehicle. If a delay occurs that will result in a Member being late for a medical appointment, Provider must contact Medi Trans.
- Q. No Member in a multi-load vehicle shall remain in the vehicle more than forty-five (45) minutes longer that the average travel time for direct transport from point of pick-up to destination.
- R. Provider shall transport no more persons than previously authorized by Medi Trans.
- S. No charge shall be made for any additional passengers, such as companion, parent of minor child, etc.



- T. The number of occupants in the vehicle, including the driver, shall not exceed the vehicle manufacturer's approved seating capacity.
- U. All vehicles must properly utilize approved child safety seats when transporting children in accordance with Louisiana laws and regulations.
- V. If an individual requests an attendant that has not be noted by Medi Trans, the Provider will immediately contact Medi Trans for instructions.
- W. A Parent of a minor Member may accompany the child regardless of parent's age.
- X. Provider must allow service animals in the vehicle, as needed. However, other animals shall not be allowed on board the vehicle.
- Y. If a Member or other passenger's behavior or any other condition impedes the safe operation of the vehicle, the driver shall park the vehicle in a safe location out of traffic, notify Medi Trans, and request assistance.
- Z. All drivers shall document the following information:
 - 1. Provider name
 - 2. Provider ID number
 - 3. Vehicle license number
 - 4. Driver's name
 - 5. Driver's signature
 - 6. Names of Member(s) transported
 - 7. No show indicator, if applicable
 - 8. Actual arrival time at pick-up point
 - 9. Actual arrival time at drop-off point
 - 10. Date of service
 - 11. Name of attendant (if any)
 - 12. Any other pertinent information regarding completion of trips.
- AA. If providing transportation to more than one Member at a time, each Member must have an individual record of the above information.

KEY PERFORMANCE INDICATORS

Timely, efficient and reliable NEMT transportation is crucial to Members, The Health Plan and Medi Trans. All Members are traveling to necessary medical appointments, which makes late or missed trips unacceptable. To ensure quality standards are met, Transportation Providers are expected to meet Key Performance Indicators surrounding On Time Pick-Ups and Drop-offs as well as Missed Trips.

On Time Pick-Ups

On time performance of scheduled pick-ups shall be the standard practice. The Provider must ensure at least 90% on time pick-ups for Members. "On time pick up" means at the scheduled pick-up time is sufficient for ensuring the Member arrives at least 15 minutes in advance of the scheduled appointment time. In addition, early arrival of the vehicle is permissible so long as no Member is required to board the vehicle more than two (2) hours before the scheduled appointment time plus travel time. For "Will-call" trips, Providers must arrive to pick up the Member no later than two (2) hours from the time the Provider is notified by Medi Trans.



On Time Drop-Offs

On Time performance of scheduled drop-offs shall be the standard practice. Provider must ensure that at least 90% on time drop-offs for Members. Arriving at or departing from the required location in excess of fifteen (15) minutes from the scheduled time or any arrival after the Member's appointment time will be considered a "late" drop off. A late drop off shall not include a Member caused delay documented and verified on the Provider's trip sheets. Medi Trans shall have final determination as to whether a delay was caused by Member and therefore excused.

Medi Trans shall notify Provider in writing that a trip was considered an unexcused late response. Based on input from healthcare facilities, Medi Trans reserves the right, in its sole discretion, to measure on-time drop offs of Provider by reference to the on-time delivery of the Members to their medical appointment.

If in any month more than 10% of Provider's total trips are considered unexcused "late" drop offs by Medi Trans, then Medi Trans may be entitled to take as a liquidated damage a credit in the amount of up to 10% of the total invoices for applicable month. Such credit shall be taken against any unpaid Provider invoices. If there are no unpaid invoices, the Provider will be billed for such liquidated damaged by Medi Trans.

Missed Trips

Provider shall ensure zero missed trips per month. A missed trip is defined as trips are accepted by Provider but are not met and which had to be rescheduled to another provider. A missed trip is also when the Member does not make it to their appointment in time to be seen by the medical professional due to the untimeliness of the Provider. Any fines incurred by MediTRANS for missed trips may be passed on to the transportation provider.

Corrective Action Plans

Failure to comply with a Key Performance Indicators or the Standards of Service set forth in this Manual or the Transportation Provider Service Agreement may result in Provider being asked to develop a Corrective Action Plan (CAP). Failure to submit a timely satisfactory CAP or failure to make the necessary improvements may constitute a material breach of any Agreement.

State Requirements

Louisiana State requirements are addressed throughout standard policy and are used to establish baseline measures, indicators or requirements for the purpose of policy and procedure development.

NEMT/NEAT (Non-Emergency Ambulance Transportation) transportation to include the following, when necessary to ensure the delivery of necessary medical services:

- Transportation for the member and one attendant, by any means permitted by law, including but not limited to the requirements of La. R.S. 40:1203.1 et seq



- The Vendor must inform the transportation provider if a member intends to bring accompanying children or if an attendant is required.
- An attendant is required when (non-exclusive list):
 - the member is under the age of 17
 - has sensory deficits
 - need for human assistance for mobility
 - dementia or other cognitive impairments
 - at risk of elopement
 - behavioral disorders
 - need for interpretation or translation assistance
 - Special needs such as:
 - Convalescence from surgical procedures
 - Decubitus ulcers or other problems which prohibit sitting for a long period of time
 - Incontinence or lack of bowel control
 - Assistance with toileting; and
 - Artificial stoma, colostomy or gastrostomy
 - If the member is under the age of 17 the attendant must be a parent, legal guardian or responsible person designated by the parent/legal guardian and be able to authorize medical care for the member.
 - Attendants may not be under the age of 17; be a Medicaid provider or employee of a Medicaid provider that is providing services to the beneficiary being transported, except for employees of a mental health facility in the event an enrollee has been identified as being a danger to themselves or others or at risk for elopement; or
 - be a transportation provider or an employee of a transportation provider. [MD35][LB36]
 - *○ Exception: All females, regardless of their age, seeking prenatal and/or postpartum care shall not be required to have an attendant.

Standing Orders

It is MediTrans' responsibility to allow members who have recurring treatment and therapies, such as dialysis, chemotherapy, or wound care, to establish a standing order for transportation. This allowance shall extend to the healthcare facility providing the recurring treatment or therapies. MediTrans shall assign transportation providers to the standing order on the basis of the least costly means available. If multiple transportation providers meet the least costly standard, the standing order will be scheduled with the same transportation provider to ensure continuity of care and to prevent missed treatments.

The standing order shall be flexible, allowing the member or healthcare facility to revise the pickup and/or drop-off time, incorporate additional recurring appointments, and change the completion date of treatment. MediTrans will update the standing order upon request of these changes and may not deny transportation associated with these changes. MediTrans will review all standing orders at least once per calendar month to ensure the agreement with the assigned transportation provider is the most cost-



effective option available. Results of these reviews shall be retained and made available to LDH upon request.

NEMT/NEAT Insurance

It is MediTrans' responsibility to ensure NEMT providers maintain, during the life of the agreement, between the MediTrans and the NEMT provider auto liability insurance to protect the Contractor, LDH, MediTrans and the NEMT provider during performance of work covered by the contract or provider agreement that shall have coverage of \$25,000 for bodily injury per person, \$50,000 per accident, and \$25,000 for property damages or a combined single limit policy with minimum coverage of \$300,000 for NEMT providers traveling in-state. ISO form number CA 00 01 (current form approved for use in Louisiana), or equivalent, is to be used in the policy. This insurance shall include third-party bodily injury and property damage liability for owned, hired and non-owned automobiles. NEAT provider insurance coverage shall meet state minimum requirements and are subject to change based on changes from the Louisiana Department of Health as referenced in Insurance Addendum.

Automobile liability coverage should include either:

Symbols 7, 8, and 9; or

Symbols 2, 8, and 9.

The NEMT providers certificate of insurance must state that this coverage is for a Non-Emergency Medical Transportation Vehicle. The policy must have a 30-day cancellation clause issued to the NEMT provider. LDH must be listed as an additional insured on the automobile liability and general liability policies. The Vendor shall obtain a copy of the policy from the provider.

If a transportation provider adds a vehicle, the Vendor shall obtain from the NEMT provider an updated copy of the policy, which shows that the additional vehicle is insured, prior to use of the vehicle.

MediTrans shall ensure that all transportation providers carry workers compensation insurance as required by Louisiana law.

MediTrans shall require all ambulance providers to maintain insurance, including but not limited to Medical Malpractice Liability, Automobile Liability, Commercial General Liability, and Workers Compensation Indemnity, in accordance with La. R.S. 40:1135.9 and any applicable federal, state, and local law or ordinance.^{[MD37][LB38][VG39]}

MediTrans shall NOT require NEMT providers to maintain Commercial General Liability Insurance, unless such insurance is required by a local ordinance in areas where the NEMT provider operates.

Accident / Incident Reporting

It is MediTrans' responsibility for immediately documenting, upon becoming aware of Drivers who are involved in an incident. Drivers shall notify emergency services



immediately and in accordance with La. R.S. 32:398. The transportation provider must report the following to the ~~MCO~~^[MD40]^[LB41]-broker within 72 hours:

For all motor vehicle accidents:

- Time, date, location, and summary of incident;
- Provider name;
- Driver and vehicle information;
- Enrollee name, Medicaid ID number, and contact information;
- Name and contact information for all other passengers;
- Injuries sustained;
- Names and contact information of witnesses;
- Any police issued citations or summons; and
- Results of drug screen which was conducted within 12 hours of the incident.
- Copy of the LA Uniform Motor Vehicle Accident Report within 15 business days of accident
- Written Report of all incidents when a Medicaid enrollee dies or is injured while in the providers care, regardless of the cause within 72 hours of the incident.
- Drivers involved in an accident involving the injury or death of a member or their ~~escort~~^{attendant}, child or personal assistant may be made inactive pending investigation at the request of the Health Plan.

NEMT Driver Training Requirements

It is MediTrans' responsibility to ensure that all NEMT Transporter/drivers receive and complete the following training requirements prior to transporting any Medicaid enrollees:

1. Defensive driving, utilizing an in-person course (online courses are not acceptable) of no less than four hours, to be renewed every three years, at a minimum;
2. Cardiopulmonary resuscitation (CPR), culminating in an active certification issued by a licensed instructor.
3. Child passenger restraint systems, including installation and usage in compliance with La. R.S. 32:295;
4. Wheelchair securement and Passenger Assistance Safety and Sensitivity (PASS), utilizing an in-person course, to be renewed every two years, at a minimum; and
5. Health Insurance Portability and Accountability Act (HIPAA) privacy and security.

NEMT Vehicle Requirements

It is MediTrans' responsibility to ensure that transporter vehicles meet all items covered under the Louisiana Highway Regulatory Act and functions as intended by the manufacturer. The MediTrans must perform an inspection prior to the vehicle being placed into the NEMT Program and annually thereafter.



Vehicle inspections shall be documented electronically and include digitized photographs evidencing that requirements have been met, including, but not limited to:

- Each side of the vehicle and appropriate signage;
- LA inspection sticker which should also include the vehicle VIN;
- Clear and legible license plate, registration sticker, VIN, and registration and insurance cards;
- Location of the seat belt cutter and fire extinguisher, including a pressure gauge reading;
- Active use of a temperature gun directed at a vent measuring the temperature of the air conditioning/heating of the front vent and rear vent, when one is present, of the vehicle. The reading should be no hotter than 52 degrees Fahrenheit when measuring the air conditioning nor cooler than 100 degrees Fahrenheit when measuring the heater;
- Interior of the vehicle showing all seat belts secured properly; and
- The transportation brokers decal, displaying the date the vehicle passed inspection, attached to the vehicle.
- If the vehicle is equipped to transport wheelchairs, the inspector shall ensure that the wheelchair lift and all backup mechanisms are in working order. Digital photographs of the following are also required:
 - Wheelchair secured showing proper application of the securements to the base; and
 - Wheelchair shoulder and lap belt properly secured with the wheelchair in frame for reference.
- All vehicle identifying information must be captured during the inspection to include VIN, year, make, model, vehicle color, license plate number, date of inspection, name and signature of inspector, and inspection results.
- NEMT vehicles equipped to transport wheelchairs comply with all applicable Americans with Disabilities Act (ADA) requirements, including requirements for restraints, tie-downs, lifts, and ramps.

NEMT Vehicle Requirements – Continued

It is MediTrans' responsibility to ensure that the transportation provider shall own or lease its vehicles. The Vendor shall obtain documentation that the vehicle is registered in the name of the company.

The Vendor shall ensure that vehicles meet the following minimum requirements:

1. Windshield in good condition and free of vision impairments;
2. Active LA inspection sticker or, if applicable, the inspection sticker for vehicles operating in Orleans and Jefferson Parish;
3. Certificate of Public Necessity and Convenience (CPNC) for each vehicle operating in New Orleans and NEMT permit for each vehicle operating in Jefferson Parish;
4. Signage on the appropriate sides of the vehicle (see Signage);



5. "For Hire, Public or Public Handicapped" License plate, with an active registration sticker;
6. Vehicle Identification Number (VIN) on a portion of the vehicle;
7. Registration and insurance card secured in the vehicle;
8. Functioning air conditioning and heating in the front and rear of the vehicle;
9. Functioning seatbelts;
10. Seat belt cutter secured in the vehicle within the drivers reach;
11. Fire extinguisher, showing the pressure gauge is reading within the manufacturers optimal setting, secured in the vehicle; and
12. Vendor or its transportation brokers decal, displaying the date the vehicle passed inspection, attached to the vehicle.
13. A vehicle must not be driven unless the driver determines that the following parts and accessories are in good working order: vehicle brakes, parking brakes, steering mechanism, lighting devices and reflectors, tires, horn, windshield wipers, and mirrors.
14. If a child is to be transported the parent or guardian is responsible for providing an appropriate child passenger restraint system. The parent or guardian of the child is responsible for providing an appropriate child passenger restraint system as outlined by La. R.S. 32:295. The vendor is responsible for notifying the parents or guardians of this requirement when scheduling the trip.
15. Each vehicle must have signage that displays the name and the telephone number of the enrolled provider and the vehicle number. The signage must be located on the driver side, passenger side, and, if a van, on the rear of the vehicle. Signs must not be affixed to the windows where they would interfere with the vision of the driver.
16. Stretcher vans, two-door vehicles, and pickup trucks are not allowable vehicle types. Salvage title vehicles are also not allowed.
17. Vehicles funded by the Louisiana Department of Transportation and Development (DOTD) are required to have the DOTD transit logo displayed on them. This logo will be accepted as appropriate signage for enrollment in the NEMT program.
18. Vehicles operating in Orleans Parish must use their Orleans Parish Certificate of Public Necessity and Convenience (CPNC) number as their vehicle number. The CPNC number must meet Orleans Parish regulations for size, contrast of color, and location.
19. Each NEMT vehicle must have a for hire, public, or public handicapped license plate, in accordance with La. R.S. 45:w1C1 and 49:121.

The Vendor shall require NEMT providers to notify the Vendor of any newly added vehicles in order for the Vendor to properly inspect and credential the vehicle prior to use within the NEMT Program. Providers must submit copies of vehicle registration and Certificate of Insurance (COI) for all newly added vehicles. Providers operating in New Orleans or Jefferson Parish must also submit copies of their appropriate municipal or parochial permits.



Broker / CTN Insurance Requirements

MediTrans must maintain, during the life of the contract between the Contractor and the MediTrans, Commercial General Liability Insurance, with a minimum limit per occurrence of \$1,000,000 and a minimum general aggregate of \$2,000,000, to protect the Contractor, LDH, the MediTrans and any subcontractor or provider during the performance of work covered by the Contract or the contract between the Contractor and MediTrans from claims or damages for personal injury, including accidental death, as well as from claims for property damages, which may arise from operations under the Contract or the contract between the Contractor and the MediTrans, whether such operations be by the Contractor or by MediTrans, subcontractor or provider, or by anyone directly or indirectly employed by either of them, or in such a manner as to impose liability to LDH. MediTrans is prohibited from passing the cost of the insurance described in this section down to the NEMT providers

Provider Acknowledgement

Please sign below that you have read and acknowledged all items in the MediTrans NEMT Operations Manual. You will receive notification of any changes, additions, or removal of any policies. If you have any questions, please contact Providers@MediTrans.com

Provider Name: _____

Signature: _____ **Date:** _____