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DOCUMENT HISTORY LOG

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¹ Status should be represented as “Baseline” for initial issuances, “Revision” for changes to the Baseline version, and “Cancellation” for withdrawn versions

² Revisions should be numbered according to the version of the issuance and sequential numbering of the revision—e.g., “1.2” refers to the first version of the document and the second revision.

³ Brief description of the changes to the document made in the revision.



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Applicability and Purpose of Chapter 16.4

This chapter applies to Managed Care Organizations (MCOs) participating in the STAR, STAR+PLUS, Medicare-Medicaid Dual Demonstration, STAR Kids, and the STAR Health Programs, and Dental Contractors providing Children’s Medicaid Dental Services to Members through dental health plans. References to “Medicaid” or the “Medicaid Program(s)” apply to the STAR, STAR+PLUS, and Medicare-Medicaid Dual Demonstration, STAR Kids, and STAR Health Programs, and the Medicaid Dental Contractors. The term “MCO” includes health maintenance organizations (HMOs), exclusive provider organizations (EPOs), insurers, Medicare-Medicaid Plans (MMPs), Dental Contractors, and any other entities licensed or approved by the Texas Department of Insurance. The requirements in this chapter apply to all Medicaid Programs, except where noted.

This chapter outlines policy related to Nonemergency Medical Transportation (NEMT) Services delivered to Medicaid Managed Care Programs.

1000 Introduction

Medicaid Members are eligible for NEMT, including Nonmedical Transportation (NMT) Services, as part of their Medicaid benefits. The MCO or its Subcontractor must ensure drivers meet federal, state, and local government requirements. The MCO or its Subcontractor must arrange for the most cost-effective and appropriate modes of transportation to meet Member needs, including to services provided under single case agreements.

1100 Program Overview

NEMT Services must be delivered in a manner that is:

1. similar in scope and duration for all Members consistent with the Members’ medical needs;
2. consistent with the best interest of each Member;
3. appropriate, considering services available to and geographic location of each Member;
4. prompt;
5. cost-effective; and
6. administratively efficient.

The MCO or its Subcontractor must assess, approve, arrange, coordinate, and ensure delivery of NEMT Services. These services include the following:

1. Demand response transportation services (DRTS), including NMT Services, Prearranged Rides, Shared Rides, and Public Transportation Services;
2. Mass transit;
3. Individual transportation participant (ITP) mileage reimbursement;
4. Meals;



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5. Lodging;
6. Advanced funds; and
7. Commercial airline travel.

NEMT Services do not include nonemergency or emergency ambulance services.

1200 Applicable Laws and Regulations

The MCO must comply with all provisions of state and federal laws, rules, regulations, federal waivers, policies and guidelines, and any court-ordered consent decrees, settlement agreements, or other court orders that govern the Contract, including all applicable provisions of the following:

- 42 C.F.R. § 440.170(a)(1)-(3)
- 42 C.F.R. Part 438

The MCO or its Subcontractor must ensure NEMT Services providers comply with all federal, state and local laws and regulations, including the following:

- 36 C.F.R. Part 1192
- 49 C.F.R. Part 571
- Texas Government Code §§ 531.02414, 533.00258, and 533.002581
- Texas Transportation Code Ch. 547
- Texas Insurance Code Ch. 1952

The MCO or its Subcontractor must ensure Transportation Network Companies (TNCs) and their drivers comply with:

- Texas Occupations Code, Title 14, Ch. 2402
- Texas Insurance Code, Title 10, Chs. 1952 and 1954
- Texas Government Code, Title 15, §533.002571(f)
- 16 Texas Administrative Code (T.A.C.) Ch. 95

1300 Administrative Requirements

The MCO may subcontract with an entity to fulfill its obligations under the Contract regarding the provision of NEMT Services. The MCO must have a data use agreement (DUA) with the Subcontractor that requires the Subcontractor to safeguard confidential information in compliance with all applicable federal and state privacy, security, and breach notification laws and regulations. The Subcontractor must have a DUA that contains the same aforementioned safeguards with each NEMT Services provider that has an agreement with the Subcontractor.

All claims must be submitted within 95 Days of the date of service and adjudicated by the MCO, or its Subcontractor within 30 Days of the claim received date.



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2000 Provider Requirements

2100 Provider Network

The MCO or its Subcontractor must maintain and monitor a network of NEMT Services providers sufficient to provide each Member adequate access to all NEMT Services. NEMT Services providers include any entity that provides NEMT Services to a Member, including independent contractors, Lodging and meal vendors, intercity or intra-city bus services, and TNCs.

The MCO's network adequacy will be measured by HHSC from multiple perspectives, including comparison to historical service utilization data; measures in Section 4100; and provider and Member Complaints regarding timely and quality service provision. If HHSC identifies an insufficient number of NEMT Services providers in the MCO Service Area, HHSC will notify the MCO or its Subcontractor in writing of the deficiency. The MCO or its Subcontractor must develop and implement a plan to recruit sufficient NEMT Services Providers to meet the transportation needs of its Members. The plan must be reported to HHSC by close of business on the tenth Business Day after notification from HHSC of the deficiency and must include milestones and expected completion date. As directed through the Contract, the MCO or its Subcontractor must notify HHSC through the Provider Termination Report when an NEMT Services provider ceases to participate in the MCO's network for any reason.

The MCO or its Subcontractor must exclude from participation in its network NEMT Services providers and drivers that have been identified as:

1. having state or federal Office of Inspector General sanctions that prohibit participation in Medicaid;
2. having failed to renew a license, certification, registration or permit relating to the particular NEMT Services to be provided, if applicable;
3. being excluded from participation in other state or federally funded health care programs, including Medicaid or Medicare;
4. having been approved for time-limited enrollment that has expired; or
5. being prohibited from providing NEMT Services for any other reasons required by law.

2110 Non-Transportation Network Company Demand Response Transportation Services Providers

The MCO or its Subcontractor must maintain a list of contracted DRTS providers. For each non-TNC DRTS provider, the MCO or its Subcontractor must maintain or have access to a current roster of all the provider's drivers. The MCO or its Subcontractor must ensure the roster lists by Service Area the name of each driver providing non-TNC DRTS and his or her driver's license number, date of hire, and date of



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termination if applicable. If a driver is providing non-TNC DRTS in more than one Service Area, the MCO or its Subcontractor must ensure the roster includes the aforementioned information for each Service Area in which the driver provides such services. For each non-TNC DRTS provider, the MCO or its Subcontractor must also have or have access to, by Service Area, a current roster of the provider’s vehicles and backup vehicles including vehicle identification number (VIN) or license plate number and type of vehicle (e.g., sedan, van, minivan, wheelchair van, etc.).

The MCO or its Subcontractor must also maintain or have access to non-TNC DRTS provider records, which include at a minimum:

1. a signed copy of the MCO’s or its Subcontractor’s executed contract with each DRTS provider;
2. vehicle documentation and maintenance records to ensure that vehicles used to provide NEMT Services meet the motor vehicle standards requirements listed in this handbook; and
3. driver records that establish full compliance with all drivers’ standards listed in this handbook.

The MCO or its Subcontractor must ensure non-TNC DRTS providers and drivers carry insurance as specified in Section 5300.

2120 Transportation Network Company Providers

The MCO or its Subcontractor must maintain a list of the names of all contracted TNC providers. The MCO or its Subcontractor must also maintain a signed copy of the MCO’s or its Subcontractor’s executed contract with each TNC. The MCO or its Subcontractor must maintain or have access to TNC records that demonstrate that TNC drivers meet the requirements found in Texas Occupations Code § 2402.107.

2200 General Provider Requirements

The MCO or its Subcontractor must maintain a list of contracted DRTS providers. The MCO or its Subcontractor must ensure that DRTS providers, including TNCs, are properly enrolled in Texas Medicaid through the HHSC Medicaid Claims Administrator prior to entering into an agreement with the MCO or its Subcontractor.

General credentialing requirements, such as using a credentialing verification organization, do not apply to NEMT Services providers. However, the MCO or its Subcontractor must have processes in place to routinely review NEMT Services providers’ compliance with Contract requirements. The MCO may incorporate this requirement into its established credentialing process or create a separate process.

2300 Transportation Network Company Requirements

A TNC must be enrolled as a Texas Medicaid provider. TNCs are required to provide services only in areas in which the TNC operates.



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2400 Backup Personnel and Motor Vehicles for Demand Response Transportation

The MCO or its Subcontractor must arrange, including through TNCs, for backup vehicles and personnel when notified by a Member or a health care provider that a vehicle is excessively late, is otherwise unavailable for DRTS, or if requested by HHSC. A vehicle is excessively late if it is more than 30 minutes late following the time the Member is scheduled to be picked up to go to the Member’s appointment or more than 30 minutes after the Member’s initial call for the return ride.

2500 Driver Standards

2510 General Motor Vehicle Operator Standards

The MCO or its Subcontractor must verify that the driver is at least 18 years of age and has a valid driver's license. The MCO or its Subcontractor must ensure a driver who does not possess a valid driver's license does not provide NEMT Services.

2520 Non-Transportation Network Company Demand Response Transportation Services Driver Standards

The MCO or its Subcontractor must ensure that a non-TNC DRTS driver who does not meet driving history requirements as specified in the Contract, does not provide NEMT Services.

For each driver and for each NEMT Services provider’s employee who works directly with Members or who has direct access to Member records, the MCO or its Subcontractor must conduct the following checks and screening requirements:

Checks and Screening Requirements	Frequency
State Sex Offender Registry check from the Texas Department of Public Safety’s website	Prior to hire date and then annually from date of hire
National Sex Offender Registry check from an organization that is nationally approved and recognized to provide sex offender registry checks	Prior to hire date and then annually from date of hire



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Checks and Screening Requirements	Frequency
Federal and State database screening requirements: <ul style="list-style-type: none"> • U.S. Department of Health and Human Services-Office of Inspector General’s List of Excluded Individuals and Entities (LEIE) (applies to TNCs and their drivers); • HHSC Inspector General exclusion list; • Texas Comptroller of Public Accounts’ Vendor Debarment List; • Social Security Administration’s Death Master File; • Excluded Parties List System (EPLS) on the System for Award Management (SAM) 	Prior to hire date and then annually from date of hire, except for LEIE and EPLS, which must be conducted monthly.

The MCO or its Subcontractor must ensure that a driver whose name appears on any of the above registries or databases does not provide NEMT Services. The MCO or its Subcontractor must maintain evidence of screening requirements at the MCO’s or its Subcontractor’s headquarters. The MCO must ensure the proof of compliance with screening requirements is provided to HHSC upon request. The MCO or its Subcontractor must ensure NEMT Services providers or their employees and drivers do not provide NEMT Services under the Contract if the required checks and screening requirements are past due. The MCO or its Subcontractor must ensure a driver who does not meet criminal history requirements as specified in the Contract between HHSC and the MCO does not provide NEMT Services. Any services that are determined to have been provided by a person not eligible to provide services under the Contract will be subject to recoupment.

The MCO or its Subcontractor must ensure a state Computerized Criminal History (CCH) background check through the Texas Department of Public Safety’s website and the national CCH background check from an organization that is nationally approved and recognized such as Professional Background Screening Association to provide criminal history background checks is conducted for each driver.

The MCO or its Subcontractor ensure a check is conducted of each driver’s driving history through the motor vehicle report (MVR) maintained by the Department of Public Safety (DPS) under Ch. 521, Subchapter C, of the Texas Transportation Code.

When considering whether a driver is qualified to provide NEMT Services, the MCO or its Subcontractor must:

1. Ensure drivers do not have any convictions, including deferred adjudication, of driving while intoxicated or driving while under the influence of any substance



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within seven years prior to the initial hire date or any time after the hire date that may impair their ability to safely operate a motor vehicle.

2. Ensure drivers do not have more than one moving violation, as defined in Title 37 of Texas Administrative Code § 15.89, either on or off the job within a rolling 12-month period;
3. Ensure drivers do not have, at any time prior to or after date of hire, a felony or misdemeanor conviction for an act of abuse, neglect, or exploitation of children, the elderly, or persons with disabilities as defined in Texas Family Code Ch. 261 and Texas Human Resources Code Ch. 48;
4. Ensure drivers do not have, within seven years of the initial hire date or any time after the hire date, a felony or misdemeanor conviction for:
 - a) An offense under the Texas Penal Code, as amended, against: the person; the family; public order or decency; public health, safety, or morals; or property; or
 - b) An offense under Ch. 481 of the Texas Health and Safety Code (Texas Controlled Substances Act);
5. Ensure that drivers have not been convicted or found liable for an act prohibited by Ch. 36 of the Texas Human Resources Code (Medicaid Fraud Prevention).

The MCO or its Subcontractor must ensure that any driver who is convicted of any of these offenses after the hire date is immediately ineligible to provide NEMT Services for a period of seven years after the date of conviction.

The MCO or its Subcontractor must implement and maintain a drug and alcohol testing program in accordance with Federal regulations 49 C.F.R Part 40 and Part 655, that prohibits use of any substance that may impair the operation of the motor vehicle by the driver.

The MCO or its Subcontractor must require NEMT Services providers to notify the MCO or its Subcontractor in writing, within ten Business Days, of a criminal conviction (felony or misdemeanor, including deferred adjudication), pending felony charge, or placement on the national or state sex offender registry of any driver or any provider employee who works directly with Members or has access to Member records.

HHSC will recoup payment from the MCO for any NEMT Services that are determined by the state or a federal governmental entity to have been provided by a driver not eligible to provide NEMT Services.

2530 Transportation Network Company Driver Standards

Prior to permitting a TNC driver to serve a Member, the MCO or its Subcontractor must verify that any driver providing or seeking to provide DRTS through a TNC meets the requirements in Texas Occupations Code § 2402.107. The MCO or its Subcontractor must not permit NEMT Services to be provided by individuals who do not meet the requirements of Tex. Occ. Code 2402.



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For each driver in the network of a TNC, the MCO or its Subcontractor must also conduct or require a TNC to report the results of conducting monthly screenings against the U.S. Department of Health and Human Services-Office of Inspector General’s List of Excluded Individuals and Entities (LEIE). The MCO or its Subcontractor must not permit a TNC driver to provide NEMT Services if the screening requirements are past due.

The MCO or its Subcontractor must ensure TNCs follow the Intoxicating Substance Policy as outlined in Texas Occupations Code § 2402.106. The MCO or its Subcontractor must ensure use of any substance that may impair the operation of the motor vehicle by the driver is prohibited.

Any NEMT Services that are determined to have been provided by a driver not eligible to provide NEMT Services will be subject to recoupment.

2540 Individual Transportation Participant Motor Vehicle Operator Standards

The MCO or its Subcontractor must ensure that a potential ITP has submitted a complete ITP application to the MCO or its Subcontractor. The MCO or its Subcontractor must ensure all ITPs have a current driver's license, current vehicle insurance, current vehicle inspection, and current vehicle license tags. In addition, the MCO or its Subcontractor must ensure that an ITP applying to receive mileage reimbursement for transporting a Member other than himself or herself or a family member meets the requirements in Section 2520 of this Handbook.

2550 Motor Vehicle Operator Conduct Standards

The MCO or its Subcontractor must ensure a driver providing NEMT Services does not:

- Use, consume, or be under the influence of alcohol, narcotics, prescribed medication, or illegal drugs that impair the driver’s ability to perform while on duty;
- Use tobacco products, including electronic cigarettes and related materials, in the presence of any Member while providing NEMT Services;
- Touch any Member except as appropriate and necessary to assist the Member or NEMT Attendant into or out of the vehicle, into a seat, and to secure the seatbelt when the Member requests assistance, or as necessary to render first aid or assistance for which the driver has been trained;
- Wear any type of headphones or earphones while delivering NEMT Services;
- Solicit or accept money, goods, or additional business from Members;
- Use a cell phone or texting device while driving for any purpose other than for directions relating to the NEMT Services being provided at that time;
- Eat or drink while in the vehicle, other than a personal vehicle, while providing NEMT Services; and
- Install or secure a child safety seat for the Member.



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The MCO or its Subcontractor must require a driver to:

- Exit the vehicle to open and close vehicle doors when Members enter or exit the vehicle and aid the Member entering or exiting the vehicle. These requirements do not apply to TNC drivers;
- Identify himself or herself to the Member and announce to the Member his or her presence at the specified pick-up location;
- Assist the Member in the process of being seated, including fastening of the seat belts, when the Member or NEMT Attendant requests assistance. Assistance does not include installing or securing child safety seats. These requirements do not apply to TNC drivers;
- Prior to beginning to drive the vehicle, confirm that wheelchairs are properly secured, and that Members are properly seat-belted, secured, or restrained in their wheelchairs;
- Meet federal guidelines for HIPAA compliance by keeping all Member protected health information confidential.
- Observe and ensure passengers observe Texas safety belt laws at all times during the delivery of NEMT Services;
- Provide verbal directions to Members as needed to assist them with entering and exiting the vehicle; and
- Provide physical assistance to Members by assisting with their use of wheelchair lifts or ramps to enter or exit the vehicle. Such assistance includes stowage of mobility aids and folding wheelchairs but not a Member’s personal items;
- Notify the MCO or its Subcontractor or provider immediately of a late arrival, so contact can be made with the health care provider to advise of the late arrival and to confirm the health care provider can still see the Member.

The MCO or its Subcontractor must require the driver, when picking up the Member to transport him or her to the health care appointment or home from the health care appointment, to inform the Member that the ride has arrived and must wait at least ten minutes after the scheduled pick-up time before declaring the trip a Member no show. All cancellations, Member or Provider no shows, or rescheduled trips must be documented by the NEMT Services provider, whether the change is requested by the Member, the MCO or its Subcontractor, or the NEMT Services provider.

2560 Training Requirements

This section does not apply to TNCs.

In addition to the training requirements outlined in the Contract, the MCO is responsible for ensuring its staff or its Subcontractor’s staff, NEMT Services provider staff, and DRTS drivers complete the NEMT-specific training outlined in Appendix II and any additional training HHSC determines to be necessary.

The MCO or its subcontractor must require DRTS providers to maintain a list of drivers that includes the driver’s:



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- Legal name;
- Driver’s license number;
- Date hired and terminated; and
- Trainings successfully completed, including effective dates and renewal dates.

2600 Vehicle Standards

2610 All Vehicles

All vehicles must meet or exceed warranty and component standards for both state and federal safety mechanical operating and maintenance standards.

2620 Demand Response Transportation Services Provider-owned Vehicles

This section does not apply to TNCs or ITPs.

Vehicles must be identified with the provider name and vehicle number using letters that are at least six inches in height. Vehicles also must display a “How is my driving?” sticker with a phone number that may be used by the public to report the behavior of the driver.

Vehicles must be equipped with:

- Functioning, clean, and accessible seat belts for each passenger seat position that must be stored off the floor when not in use;
- An operating speedometer and odometer;
- Working interior lights within the passenger compartment;
- Adequate interior sidewall padding and ceiling covering;
- Two exterior rear-view mirrors, one on each side of the vehicle;
- An interior mirror, which should be used for monitoring the passenger compartment;
- A clean interior and exterior free of broken mirrors or windows, excessive grime, rust, chipped paint, and major dents;
- A functional fire extinguisher secured within reach of the driver and visible to passengers;
- A first aid kit, which must include, at minimum, latex gloves, hazardous waste disposal bags, scrub brush, disinfectant, personal protective equipment, and deodorizer;
- Working heating and cooling systems adequate for the heating, cooling, and ventilation needs of both the driver and the passengers;
- Signage posted within the vehicle that reads:
 - No Smoking, Eating, or Drinking.*
 - All passengers must wear seat belts.*
 - Weapons Prohibited.*
- Operational windows;



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- A retractable step or a step-stool to aid in passenger boarding if the vehicle is not already equipped with a running board or similar device. The driver may not use milk crates or similar makeshift step stool configurations as a step stool;
- Three portable triangular reflectors mounted on stands. Use of flares or similar substitutes are prohibited; and
- A vehicle information packet in each vehicle used to provide NEMT Services to include, at a minimum:
 - Evidence of vehicle registration and inspection;
 - Copy of vehicle insurance card;
 - Accident and Incident procedures and forms; and
 - A map of the Service Area with sufficient detail to locate Members and health care facilities. Voice activated navigation is allowed.

In addition, any vehicle communication systems, Mobile Data Terminals (MDT), and vehicle cameras must be maintained in operable condition at all times and in accordance with manufacturer’s recommended maintenance procedures as well as with applicable federal and state laws, rules, and regulations.

Vehicles receiving two substantiated Complaints from Members, NEMT Attendants, or health care providers, concerning cleanliness, temperature deficiencies, or other deficiencies within a 10-Day period may not be used in the provision of DRTS. The MCO or its Subcontractor must document appropriate corrective actions taken to address all deficiencies before a vehicle is cleared to provide DRTS. All corrective actions taken on a vehicle and all supporting documentation, must be maintained for each vehicle’s permanent record.

2630 Demand Response Transportation Services Provider-owned Motor Vehicle Registration Information

This section does not apply to TNCs or ITPs.

The MCO or its Subcontractor must maintain, or require its providers to maintain, the following records and related information for each vehicle in the MCO’s or Subcontractor’s transportation network:

- Manufacturer, model, and model year;
- VIN and vehicle fleet number, if any;
- Type of vehicle (e.g. sedan, minibus, wheelchair van);
- License plate number;
- Insurance certifications;
- Texas Department of Motor Vehicles (DMV)–issued registration;
- Special equipment (lift, ramp, etc.);
- Communication device installed, if any (e.g., two-way radio, Citizens Band Radio (CB), MDT);
- Navigation system installed, if any;
- Description of inspection activity and date (e.g., verification that vehicle meets



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vehicle requirements, inspection of equipment such as brakes, tire tread, turn signals, horn, seat belts, air conditioning/heating, etc.);

- History of all vehicle inspections; and
- Maintenance records for each vehicle used to transport Members for the term of the Contract.

This information must be provided to HHSC upon request.

3000 Service Delivery

The MCO or its Subcontractor may develop its own process for assessing, approving, arranging, and coordinating NEMT Services. The process must comply with all Contract requirements.

When Scheduling trips, the NEMT Services call center must record the medical appointment date and time to ensure the Member will arrive at his or her Destination at least 15 minutes, but no more than one hour (unless requested by the Member), prior to the scheduled appointment time. If the Member’s appointment is the first or last of the day for a provider, the trip must be scheduled to ensure the Member will not be dropped off more than 15 minutes prior to or picked up more than 15 minutes after the health care provider’s scheduled operating hours. Members must be informed of the timeframes required for pick-up and drop-off.

Shared ride trips must be scheduled in a manner that ensures a Member does not remain in the vehicle for more than one hour longer than the average travel time for direct transportation of that Member. The Member must be picked up after his or her Health Care Service within one hour of requesting the return trip. This does not apply to trips for hospital discharge, which allow up to three hours waiting time.

If a Member requires a child safety seat for the trip and does not have one at the time of pick-up or the parent is unable to install the child safety seat, the trip must be cancelled and recorded as a “Member no show”.

3100 NEMT Services

Demand Response Transportation Services (DRTS)

When Fixed Route Transportation or Mass Transit is not available or does not meet the Member’s medical needs, the MCO or its Subcontractor must offer and arrange DRTS to the Member and, as applicable, to his or her NEMT Attendant. DRTS includes Prearranged Rides, including NMT Services, and Add-on Trips. The MCO or its Subcontractor must provide DRTS using the most cost-effective and cost-efficient method of delivery that allows the Member to meet his or her health care needs.

The MCO or its Subcontractor may use TNCs to provide all DRTS, including NMT Services, but only TNCs may provide NMT Services. If a TNC is not available, or the use of a TNC is not medically appropriate for a Member or the most cost-effective way to provide DRTS, the MCO or its Subcontractor must approve DRTS using



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another provider type. This includes providing DRTS with less than 48 hours' notice if the request is related to a pharmacy visit, treatment for an urgent condition, or hospital discharge.

DRTS must be confirmed with Members 24 hours prior to the pick-up date and time, except for Add-on Trips, NMT Services, and hospital discharge trips. This confirmation may be made via phone, text, or another platform made available to the Member by the MCO or its Subcontractor. Members must not be contacted after 9 p.m. local time. The DRTS provider must maintain documentation of this contact.

Mass Transit

Mass transit tickets (e.g., monthly pass, tickets, tokens, and transfers), are provided for Members to use Fixed Route Transportation. Approval of Mass Transit NEMT Services must be provided in accordance with the Contract and this Handbook.

When determining if Mass Transit is an appropriate mode of transportation for a Member, the MCO or its Subcontractor must consider:

- distance from Member's home to the Fixed Route Transportation stop and the distance from the scheduled stops to the location of the Member's appointment (must not be more than one-quarter mile from Member's home or the location of the Health Care Service);
- Member age or any physical or cognitive conditions that might make Mass Transit difficult;
- weather conditions; and
- other pertinent factors as determined by the MCO or its Subcontractor.

The MCO or its Subcontractor may accept a Member's self-declared mobility or other limitation as a reason to initially determine that Mass Transit is not an appropriate mode of transportation for the Member. Before approving a subsequent trip using an alternative to otherwise available Mass Transit, the MCO or its Subcontractor must obtain documentation from a healthcare provider of the Member's mobility or other limitation and keep such documentation on file. If the MCO or its Subcontractor already has documentation of an allowable mobility or other limitation on file, additional documentation is not required.

Mass transit tickets must be received by the Member prior to the Member's appointment.

Individual Transportation Participant Services

Individual Transportation Participant (ITP) services provide mileage reimbursement to individuals who drive a Member to a Health Care Service. Individuals who provide ITP services are referred to as "ITPs." ITPs must enter into a participation agreement with the MCO or its Subcontractor. There are two types of ITPs, ITP-Self and ITP-Other. ITP-Self includes a Member or his or her family members who are reimbursed for



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transporting the Member. ITP-Other includes non-family members, such as neighbors or friends, who are reimbursed for transporting a Member.

To provide services as either an ITP-Self or ITP-Other, an individual must have a current driver's license, current vehicle insurance and inspection, and current vehicle license tags.

The MCO or its Subcontractor must calculate the mileage for transportation provided by an ITP and reimburse for the mileage at the rate established by HHSC. The MCO or its Subcontractor must approve the use of Advanced Funds if the ITP does not have funds to purchase fuel prior to the trip and is transporting a Member age 20 or younger.

Meals and Lodging

The MCO or its Subcontractor must provide meals and Lodging to Members age 20 or younger in accordance with the Contract and this Handbook. Meals and Lodging must be approved for an NEMT Attendant unless the NEMT Attendant is a service animal. The MCO or its Subcontractor is responsible for assisting the Member in arranging free or low-cost Lodging options, such as the Ronald McDonald House, if such assistance is necessary for the Member to access Health Care Services.

The MCO or its Subcontractor may use Advanced Funds to ensure NEMT Services, including meals and Lodging, are available to eligible Members if needed to access Health Care Services. If the MCO or its Subcontractor has contracts with providers of meals or Lodging, reimbursement through those processes should be used when appropriate.

Advanced Funds

Advanced Funds are intended to pay for NEMT Services such as meals, lodging, and fuel for ITPs, in circumstances in which the Member requires these funds in advance to access Health Care Services. The MCO or its Subcontractor may also approve Advanced Funds for airline tickets, taxicab fare, commercial bus tickets, toll charges, and parking fees if the MCO or its Subcontractor determines it is in the best interest of the Member or if providing Advanced Funds is more cost-effective than other NEMT Services. The MCO or its Subcontractor must not approve Advanced Funds to purchase NEMT Services if there are other options available, such as mileage reimbursement or direct payment by the MCO or its Subcontractor to an NEMT Services provider.

Advanced Funds are allowable only for Members age 20 and younger and, if applicable, his or her NEMT Attendant(s).

The MCO or its Subcontractor must ensure that any fees, such as administrative fees, check cashing fees, or processing fees, are not incurred by the Member or his or her NEMT Attendant or deducted from the benefit amount. The MCO or its Subcontractor



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must have policies and procedures, including how fees will be avoided, demonstrating how Advanced Funds will be disbursed to Members before the appointment date.

The MCO or its Subcontractor must obtain evidence of how Advanced Funds were used to reconcile what was spent against the Advanced Funds allocation. If the Member paid more out of pocket for eligible expenses, then the MCO or its Subcontractor must reimburse the difference. Likewise, if receipts total less than the Advanced Funds allocation, then the Member is required to reimburse the difference. If the trip for which Advanced Funds were provided does not occur, the Member must pay back the funds. The MCO or its Subcontractor’s follow-up options include issuing a demand letter to the Member, withholding part or all future distributions of advance funds or reimbursements (i.e., applying an offset), or reporting the debt to a collection agency.

Out-of-State Transportation

The MCO or its Subcontractor must approve out-of-state transportation without additional charge to the Member or HHSC to both bordering and non-bordering states if the Health Care Service must be provided out-of-state as verified by the MCO’s Medical Director. This includes services approved under a single case agreement.

The MCO or its Subcontractor must provide transport to contiguous counties or bordering counties in adjoining states (Louisiana, Arkansas, Oklahoma, and New Mexico) that are within 50 miles of the Texas border, if it is the customary or general practice of Members living in counties bordering other states to obtain services from the out-of-state provider.

Commercial Airline Transportation Services

The MCO or its Subcontractor is responsible for arranging commercial airline transportation services for the Member and, if applicable, his or her NEMT Attendant(s) when it is the most cost-effective option to meet the Member’s medical needs. The MCO or its Subcontractor must:

- maintain approval documentation;
- ensure arrangements for medical equipment or supplies such as oxygen or saline are made during Scheduling and before the dates of departure to and from the Health Care Service, if the need is documented by the health care provider; and
- choose a flight that reduces the number of transfers and travel time and has departure and arrival times based on the medical needs of the Member.

3110 NEMT Services for Members with Dual Eligibility

The Medicaid State Plan permits NEMT Services to be provided to Members who are dually eligible. NEMT Services may be used to travel to any Health Care Service, including wrap services as defined in the Contract (Medicaid Wrap-Around Services). In addition, NEMT Services may be used to travel to a service being reimbursed



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through Medicare for which a Medicaid copay is required. There is no equivalent Medicare service that must be exhausted before NEMT Services may be used.

3120 Service Limitations

NEMT Services may not be used for the following:

- transportation to or from a Day Activity Health Services facility, an Assisted living Facility, or state institution, or in conjunction with a Medicaid service for which the reimbursement rate includes transportation.
- transportation to or from a nursing facility except for transportation to or from dialysis or discharge home.
- transportation of a Member without an NEMT Attendant if documentation is on file stating the Member requires an NEMT Attendant during transportation.

The MCO or its Subcontractor must develop a policy with input from its Medical Director on how to safely transport Members who have or suspect they have a contagious illness. If the policy is developed by the Subcontractor, it must be approved by the MCO Medical Director.

3200 Administrative Responsibilities

The MCO or its Subcontractor is responsible for the following administrative activities:

- Enhancing existing billing systems or developing an electronic billing invoice system that will allow providers and ITPs to bill electronically through a secure encrypted portal that requires unique login credentials and maintains appropriate system roles and responsibilities.
- Developing a paper-based claims processing system that allows providers and ITPs to submit their claim for manual processing, when the provider or ITP cannot submit claim electronically.
- Providing deliverables necessary to show compliance with all performance standards and other Contract requirements, including ad hoc reports requested by HHSC.

The MCO or its Subcontractor must ensure DRTS providers, other than TNCs, utilized by the MCO or its Subcontractor have dispatch communication systems to remain in continuous contact with their drivers to control and monitor service delivery. Cellular telephones may be used for this purpose as long as the use does not violate state or local laws or Section 2550 of this handbook.

3210 Demand Response Transportation Services Trip Manifest

3211 Non-TNC Requirements

The MCO or its Subcontractor must distribute trip information, referred to as the Trip Manifest, via secure data transmission, such as Secure Sockets Layer (SSL) encryption, to DRTS providers to ensure timely and safe transport of Members to



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Health Care Services. At a minimum, the MCO or its Subcontractor must ensure that the Trip Manifest contains:

- A unique identifier for each leg of the trip for billing purposes;
- The Member’s name, phone number, and the pick-up address;
- Destination address, facility name, and phone number;
- Mode of transport, including whether it must be wheelchair accessible, and Member mobility devices or other medical equipment, if applicable;
- Any special needs or instructions regarding the Member;
- Signature of Member and parent or NEMT Attendant, if one accompanies Member.
- The MCO or its Subcontractor may obtain verification that the transportation service was rendered using a digital signature or other mechanism such as Global Positioning System (GPS), which can be used validate the service at Origin and Destination.

A Trip Leg is defined as transportation of a Member from one point to another. For example, transportation of a Member from pick-up location to Destination is one Trip Leg. The return trip is a separate Trip Leg. An Add-on Trip adds a separate leg.

3212 TNC Requirements

This information is communicated to TNC drivers via the TNC’s digital trip scheduling platform. The requirement for Member and NEMT Attendant signatures does not apply to TNCs.

3230 Call Center Operational Requirements

The MCO may delegate approval of NEMT Services to its Subcontractor. The MCO or its Subcontractor must ensure Members are able to request NEMT Services in accordance with the Contract.

The MCO or its Subcontractor must operate a call center in accordance with the Contract. The MCO or its Subcontractor must have a phone number or menu option that serves the same functional purpose as the “Where’s My Ride” line but may use its own phone numbers. The line must be referred to as the “Where’s My Ride line.”

Informative announcement messages must be used to advise Members of holiday closures, policy changes, etc. Call center services must be fully compliant with the Americans with Disabilities Act (ADA), HIPAA, and all other State and Federal regulations.

Call center staff must be trained in accordance with the Contract. The MCO or its Subcontractor must ensure that all call center staff attend retraining when call monitoring indicates a need for additional training.



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3240 Member Online Reservation System

Within twelve months of the effective date of the Contract, the MCO or its Subcontractor must provide an online reservation system or application for Members or health care providers to request NEMT Services. The online reservation system enables Members to submit requests for NEMT Services in a timely manner. The MCO or its Subcontractor may choose to use an existing portal or may create a separate NEMT Services online reservation system. The online reservation system must be:

- HIPAA-compliant and require unique login credentials;
- Capable of providing the requestor with a mailbox, phone number, system, or webpage to check the status of his or her request;
- Available 24 hours, 365 days, unless notice is posted informing the user the system will be down for scheduled maintenance; and
- Able to interface with the MCO or its Subcontractor’s automated scheduling system.

The MCO or its Subcontractor must develop and use a security protocol that complies with Section 3250 of this Handbook.

The online reservation system must operate in a way that all requirements of service approval in the Contract are met. The MCO or its Subcontractor must employ any mechanism it deems appropriate to verify that NEMT Services claimed and paid to its NEMT Services providers can be matched to a corresponding Health Care Service.

3250 Automated Scheduling System

The MCO or its Subcontractor must develop and maintain an automated scheduling database compliant with federal and state laws, rules, and regulations to be used by NEMT Services call center staff to record, approve, and coordinate NEMT Services. The system must be capable of providing electronic records in a prescribed media and format. The system must be capable of accommodating reservations for future trips as well as requests for Same Day Services and urgent trips. The automated scheduling system must comply with all requirements in the Contract. At a minimum, the MCO or its Subcontractor must:

- Establish and maintain a computer system that complies with federal and state laws, rules, and regulations, including HIPAA.
- Maintain hardware, software, internet and communication equipment to support automated services necessary to carry out the requirements of the Contract using industry standard products.
- Maintain a reservation system capable of conducting NEMT Services reservations and confirmation of transactions.
- Track NEMT Services received by Members through the system and accurately and fully maintain those service records as HIPAA-compliant encounter transactions.



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- Maintain a history of changes and adjustments and audit trails for current and retroactive data.
- Maintain a vehicle management platform¹ capable of monitoring vehicle status including:
 - vehicle condition and inspection information,
 - owner name,
 - license plate number, and
 - vehicle identification number.
- Maintain a driver management platform capable of monitoring driver status including trainings, driver’s license, criminal history checks, sex offender registry checks, motor vehicle reports from DPS, drug testing, and federal and state screening requirements (an existing TNC digital trip scheduling platform is sufficient to meet this requirement).
- Maintain procedures and processes for accumulating, archiving, and restoring data in the event of a system or subsystem failure.

The MCO or its Subcontractor must employ any mechanism it deems appropriate to verify that NEMT Services claimed and paid to its NEMT Services providers can be matched to a corresponding Health Care Service. If a Health Care Service claim or encounter is not available, the MCO should obtain from the provider evidence that the member kept the appointment. This should be kept on file and will be sufficient documentation to support paying a NEMT Service claim.

4000 Monitoring

The MCO or its Subcontractor is responsible for the oversight of NEMT Services providers and drivers to ensure compliance with all requirements of the Contract and this Handbook. The MCO or its Subcontractor must have processes in place to periodically review NEMT Service provider compliance with requirements of the Contract and this Handbook. MCOs may incorporate this requirement into their established credentialing process or create a separate process. The MCO or its Subcontractor must maintain a monitoring plan that includes a monitoring schedule that is provided to HHSC upon request.

The state’s external quality review organization (EQRO) conducts Member satisfaction surveys annually. HHSC approves the survey prior to implementation, and survey results and analysis of those responses are submitted to HHSC by the EQRO after the completion of the surveys. The MCO or its Subcontractor must use the Member satisfaction survey reports provided by HHSC to implement strategies to:

- address meaningful or recurring service delivery issues;

¹An existing TNC digital trip scheduling platform is sufficient to meet this requirement



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- assess performance of its service units (e.g., call center, encounter processing section, etc.); and
- improve its administrative and call center processes, and standards for service delivery.

The MCO or its Subcontractor must submit a corrective action plan to HHSC no later than 30 Calendar Days from receipt of Member satisfaction reports, when Member satisfaction is less than 95 percent in a specific Service Area.

4100 Standards

The MCO or its Subcontractor must monitor performance to ensure the quality of the delivery of DRTS and to ensure the needs of Members are met. The MCO or its Subcontractor’s monitoring process must be documented.

DRTS performance standards are defined as:

- Service Delivery: 99 percent of all trips that were assigned and accepted by the MCO or its Subcontractor and NEMT Services providers were completed. Member cancellations and Member no-shows are excluded.
- On Time Pick-up: 95 percent of all trips in which the Member was picked up and dropped off were within 15 minutes but no more than one (1) hour prior to their scheduled appointment time.
- On Time Drop-off: 95 percent of all trips in which the Member was picked up were within 1 hour of notifying the MCO or its Subcontractor or provider to initiate return trip.
- Hospital Discharge: 95 percent of all trips in which the Member is picked up were within 3 hours of the Member or advocate notifying the MCO or its Subcontractor to initiate the trip.
- Vehicle Roster: 99 percent of all trips in which the vehicles used met federal, state and local ordinances.
- Driver Roster: 99 percent of all drivers met all driver credentialing and screening requirements.
- Member Complaints: 98 percent of Member Complaints were resolved within 30 Days of receipt of the Complaint by the MCO or its Subcontractor.

5000 Accidents and Incidents

5100 General Accident and Incident Requirements

The MCO or its Subcontractor must collect the information required on the Accident and Incident Report Form for any Accident or Incident involving a Member or NEMT Attendant during transport, loading, or offloading. The information collected must include the name of the insurance company furnishing liability coverage. In the case of an Incident not involving Member death or serious injury, this report must be



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made available to HHSC upon request. The following details are included in the Accident and Incident Report Form:

- Managed care organization and Subcontractor information
- Driver's name, license number, and the trip approval number
- VIN, license plate number, and the driver's insurance carrier
- Member name, date of birth, Medicaid ID, and contact information
- NEMT Attendant name, date of birth, and contact information, if applicable
- The location, date, and time of the Accident or Incident
- Whether emergency services were contacted, and which ones (police, EMS, fire department, etc.)
- Whether there was an injury because of the Accident or Incident
- A description of Accident or Incident
- An attestation that the information provided in this document is true and correct, that supporting documentation for the report must be maintained as necessary, and that HHSC reserves the right to request and validate documentation to support the reported Accident or Incident.

The MCO or its Subcontractor must develop and use a monitoring and tracking system to identify trends of Accidents and Incidents involving the same drivers, vehicles, and Member or NEMT Attendant, including any corrective action taken.

The MCO or its Subcontractor must develop a trip recovery protocol to ensure that, in the event of an Accident or injury, Members arrive at their appointments and are transported to their residences without excessive delays. The MCO or its Subcontractor must coordinate for a backup vehicle to transport the Member and NEMT Attendant to the scheduled appointment if they are willing and able to attend the appointment and if the MCO or its Subcontractor confirms with the provider that the appointment can be kept.

HHSC assumes no liability for any Accident or Incident that may occur while in route to or from Health Care Services.

5200 Accident Involving Serious Injury

The MCO or its Subcontractor must report the information required on the Accident and Incident Report Form Accidents involving serious injury of a Member, NEMT Attendant, or driver to HHSC within four hours of receiving notification. This report must be submitted via the NEMT Services mailbox (MTPAccidents_Incidents@hhsc.state.tx.us). The MCO or its Subcontractor or the driver must call 911, as needed. If the serious injury is not to the Member or NEMT Attendant, the MCO or its Subcontractor must coordinate for a backup vehicle in



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accordance with Section 4100. Serious injury is any injury that would qualify as an emergency medical condition as defined in 42 C.F.R. § 438.114(a) (relating to emergency and post-stabilization services).

Notification of Death of Member

The MCO or its Subcontractor must report the information required on the Accident and Incident Report Form to HHSC in the event a Member death resulting from an Accident or Incident while using NEMT Services. This report must be submitted via the NEMT Services mailbox (MTPAccidents_Incidents@hhsc.state.tx.us) within two hours of the MCO or its Subcontractor becoming aware of the death of a Member.

5300 Insurance Requirements

For the full term of the Contract, including the original Contract term and all periods of renewal and all additional extensions, the MCO and its Subcontractor, if any, must obtain and maintain seven hundred and fifty thousand dollars (\$750,000) combined single limit Business Auto Insurance with Combined Single Limit of \$750,000 bodily injury per person, bodily injury per accident, damage per accident is a requirement for owned, non-owned, and hired automobiles. As such, \$750,000 combined single limit is the minimum requirement that all Contractor Subcontractors must carry whether the Subcontractor owns fleet, hired, or contracted by the Subcontractor. The MCO is responsible for ensuring its Subcontractor’s compliance with all requirements.

Workers’ Compensation & Employer’s Liability

The MCO’s Subcontractor and Subcontractor’s providers shall maintain Workers’ Compensation insurance coverage in accordance with applicable statutory limits.

Workers’ Compensation: Statutory Limits

- Employer’s Liability: Each Accident \$1,000,000
- Disease: Each Employee \$1,000,000
- Disease: Policy Limit \$1,000,000

Commercial General Liability

- Occurrence Based
- Bodily Injury and Property Damage
- Each occurrence Limit: \$1,000,000
- Aggregate Limit: \$2,000,000
- Medical Expense Each Person: \$5,000
- Personal Injury and Advertising Liability: \$1,000,000
- Products / Completed Operations Aggregate Limit: \$2,000,000



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Umbrella/Excess Liability:

- Per Occurrence: \$1,000,000

Identity Theft Coverage

Per occurrence: \$1,000,000

All required bonds and insurance shall be in a form satisfactory to HHSC and must be issued by companies or financial institutions that:

1. have both a Financial Strength Rating of "A" or better from A.M. Best Company, Inc.;
2. have a Financial Size Category Class of "VII" or better from A.M. Best Company, Inc.; and
3. are duly licensed, admitted, and authorized to do business under the laws of the State of Texas.

HHSC shall be named as the obligee in each required bond.

All required insurance contracts must:

1. be written on a primary and non-contributory basis with any other insurance coverages the MCO or Subcontractor currently has in place; and
2. include a Waiver of Subrogation Clause in favor of the State of Texas and its officers, directors, and employees for bodily injury (including death), property damage, or any other loss.

Each insurance policy, other than workers' compensation, employer's liability, and professional liability, must name the State of Texas and its officers, directors, and employees as additional insureds on the original policy and all renewals or replacements.

The insurance shall be evidenced by delivery to HHSC of certificates of insurance executed by the insurer or its authorized agency stating coverage, limits, expiration dates, and compliance with all required provisions. Upon request, HHSC shall be entitled to receive, without expense, certified copies of the policies and all endorsements. Except as otherwise provided herein, required coverage must remain in full force and effect throughout the term of the Contract and any extensions thereof, and provide adequate coverage for Incidents discovered after termination of the Contract.

The MCO or its Subcontractor shall:

1. provide written notice to Managed Care Compliance & Operations by email at CMD_ManagedCareOrganizations@hhsc.state.tx.us and by U.S. first class, certified mail to 4900 N. Lamar Blvd, Austin, Texas 78753, Mail Code H320 at least 30



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Calendar Days prior to any cancellation, non-renewal, or material change of a required policy.

2. ensure all insurance policies and certificates of insurance for required coverage are written to include all products, services, and locations related to the MCO or its Subcontractor performance under the Contract; and
3. deliver to Managed Care Compliance & Operations by email at CMD_ManagedCareOrganizations@hsc.state.tx.us and by U.S. first class mail to 4900 N. Lamar Blvd, Austin, Texas 78753, Mail Code H320 all renewal policies at least ten (10) Calendar Days prior to any expiration of a required policy. All renewal policies and corresponding certificates of insurance must meet all terms set forth herein.

The MCO or its Subcontractor must submit original certificates of insurance for each required insurance contract, and any renewals thereof, within 15 Calendar Days after contract execution. Renewal certificates shall be maintained by the MCO or its Subcontractor and made available to HHSC upon request. Applicants must submit required bonds when and as provided in sections of the Contract outlining bond requirements.

The MCO or its Subcontractor shall ensure that all Contract provisions concerning liability, duty, and standard of care, together with all indemnification provisions, shall be underwritten by contractual liability coverage sufficient to include the obligations under the Contract. In addition, the MCO shall be responsible for ensuring the Subcontractor used in the performance of the Contract maintain the insurance required in this section (covering all goods and services provided by the Subcontractor) throughout the Contract term and all renewals.

Alternative Insurability

Notwithstanding the preceding, HHSC reserves the right to consider reasonable alternative methods of insuring the Contract in lieu of the insurance policies required. It will be the Applicant's responsibility to recommend to HHSC alternative methods of insuring the Contract. Any alternatives proposed by Applicant should be accompanied by a detailed explanation regarding Applicant's inability to obtain the required insurance and/or bonds. HHSC shall be the sole and final judge as to the adequacy of any substitute form of insurance coverage.

6000 Member Accompaniment

6100 NEMT Attendants

An NEMT Attendant may accompany a Member to provide necessary mobility, personal care, or language assistance to the Member when necessary and in accordance with the Contract. A second NEMT Attendant may also accompany the Member, including on an out-of-state or Long-distance Trip, if a health care provider



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has documented that it is Medically Necessary, such as for both parents to receive training on the use of medical equipment or delivery of complex care, or to allow both parents to accompany a child not expected to survive the trip.

The MCO or its Subcontractor must obtain from each adult Member requesting an NEMT Attendant documentation of the need for each NEMT Attendant in accordance with the Contract. For Members who are under age 18, no documentation is necessary for a parent, guardian, or legally authorized representative (LAR) to accompany the Member. If the Member is over age 18 the call center staff will prompt the Member or the Member's LAR to obtain and provide documentation required for the parent or another adult to serve as an NEMT Attendant. A parent wishing to serve as an NEMT Attendant for his or her child could appeal a denial of his or her request if it were issued based on the age of the Member. The MCO may approve an NEMT Attendant for nonmedical reasons, such as to provide communication assistance to the Member, without a written statement from a healthcare provider. A written statement from the Member's primary healthcare provider is necessary for the MCO to approve an NEMT Attendant for medical reasons.

Any required documentation regarding attendants must be submitted or verified (if a permanent need for an attendant has been established) when Scheduling or prior to reimbursing for NEMT Services.

6200 Parental, Guardian, or Legally Authorized Representative (LAR) Accompaniment Requirements

All requirements for NEMT Attendants apply for parents, guardians, and LARs.

A Member who is 14 years of age and under must be accompanied by a parent, guardian, LAR, or another adult authorized in writing by the parent, guardian, or LAR. Members 15 through 17 years of age must be accompanied by a parent, guardian, LAR, or another adult authorized by the parent, guardian, or LAR unless the Member presents to the MCO or its Subcontractor staff the parent's, guardian's, or LAR's signed, written consent for NEMT Services, or if the treatment to which the Minor is being transported is such that the law extends confidentiality to the Minor for the treatment.

The Member must present signed, written consent for NEMT Services to the MCO or its Subcontractor staff in advance of the trip. The information must be verified at the time of the trip if the provider does not have the information on hand.

6300 Service Animals

NEMT Services providers must permit a service animal to accompany a Member to provide necessary mobility or personal assistance to the Member during the time that NEMT Services are provided. If a service animal is approved to accompany a Member, the MCO or its Subcontractor shall reimburse the provider for the space occupied by



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the service animal at the rate established in the services area for an adult attendant, if applicable. The service animal will be treated as an attendant for encounter submission purposes. Please refer to the MCO or its Subcontractor Transportation Encounters Companion Guide for detailed instructions.

Apart from not receiving meals or Lodging, a service animal is treated as any other NEMT Attendant. If documentation indicates a service animal is Medically Necessary for the Member, and the service animal is not available at the time the NEMT Services is to be delivered, the trip must be cancelled as the Member does not have necessary supports. The NEMT Services provider is not responsible for monitoring or providing care to the service animal while the Member is receiving his or her Health Care Services.



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Appendix I – Definitions

(Manual definitions will be finalized upon completion of final language and will be consistent with final definitions in the UMCC).

Accident: An unexpected and unfortunate medically important bodily event causing loss or injury to person. An Accident may involve loss of property (e.g., automobile).

Add-on Trip: A trip (e.g., trip to pharmacy, medical laboratory, or medical radiology facility) that is not approved before the date of travel but provided to the client in one of the following circumstances:

- The services are prescribed by the Member's healthcare provider.
- The Add-on Trip (e.g., trip to a pharmacy, medical laboratory, or medical radiology facility) immediately follows an approved healthcare appointment.

Advanced Funds: Funds approved by the MCO or its Subcontractor in advance of travel and provided to the Member or NEMT Attendant to cover eligible travel and travel-related expenses.

Demand Response Transportation Services (DRTS): Curb-to-curb transportation to or from a Medically Necessary, non-emergency Health Care Service in a standard passenger vehicle such as a bus, van, or sedan. Uses dispatched vehicles, including Shared Rides and Transportation Network Company (TNC) vehicles, in response to request from members.

Destination: The location or point to which the Member has been approved to travel to receive or obtain Health Care Services.

Digitally Prearranged Ride: A ride in a personal vehicle between points chosen by the passenger that is prearranged through a digital network.

Fixed Route Transportation: A system of transporting individuals (other than by aircraft), including the provision of designated Public Transportation Service by public entities and the provision of transportation service by private entities, including, but not limited to, specified Public Transportation Service on which a vehicle is operated along a prescribed route according to a fixed schedule.

Incident: An occurrence, event, breakdown, or public disturbance that interrupts the trip, causing the driver to stop the vehicle, such as a passenger becomes unruly or ill.

Individual Transportation Participant (ITP): An individual that signs a participation agreement with the MCO or its Subcontractor to drive a Member, including himself or herself, to and from Covered Services in a personal car at a prescribed rate.



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Lodging: A stay in commercial establishment such as a hotel, motel, or a charitable organization (e.g., Ronald McDonald House) or hospital that provides overnight Lodging.

Long-distance Trip: Transportation to Covered Health Care Services approved by the MCO or its Subcontractor to be delivered at a location beyond:

- the Member’s county of residence;
- the counties adjacent to the Member’s county of residence; or
- the Member’s managed care Service Area.

Mass Transit: means public transportation by intercity bus, rail, air, ferry, or intra-city bus either publicly or privately owned, which provides general or special service transportation to the public on a regular and continuing basis. Mass transit includes intercity, intra-city, or interstate transportation and includes the use of commercial air service to transport Members to Covered Health Care Service.

Medically Necessary: Has the meaning defined in 1 T.A.C. § 353.2.

Minor: An individual under 18 years of age who has never been married or emancipated by court ruling.

Mobile Data Terminal (MDT): A computerized device used in public transit vehicles, taxicabs, or other service vehicles, to communicate with a central dispatch office.

Member No Show: A trip when the provider waits for the Member ten (10) minutes beyond the scheduled pick-up or return time.

NEMT Attendant:

1. for a Member under age 18, the Member’s parent, guardian, or another adult authorized in writing by the parent or guardian to accompany the Member;
2. an adult that accompanies a Member to provide necessary mobility, personal or language assistance to the Member during the time that transportation services are provided, including an adult serving as a personal attendant;
3. a service animal that accompanies a Member to provide necessary mobility or personal assistance to the Member during the time that transportation services are provided and who occupies a seat that would otherwise be filled with another Member; or
4. an adult that accompanies a Member because a health care provider has stated in writing that the Member requires an attendant.

Nonemergency Medical Transportation (NEMT) Services: Transportation and other related travel expenses determined to be necessary by the MCO or its



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Subcontractor or HHSC to secure medical examinations and treatment for a Member in accordance with 42 CFR 440.170(a).

Nonmedical Transportation (NMT): Has the meaning assigned in Texas Government Code §533.00258.

One-way Trip: A trip consisting of only one Trip Leg.

Origin: The location at which the provider is approved to pick up the Member at the start of the trip.

Prearranged Ride: Transportation provided by a Transportation Network Company driver to a Transportation Network Company rider, beginning at the time a driver accepts a ride requested by a rider through a digital network controlled by a Transportation Network Company and ending at the time the last requesting rider departs from the driver’s personal vehicle. The term does not include a shared expense carpool or vanpool arrangement or service; or transportation provided using a taxicab, limousine or similar vehicle for hire.

Provider No Show: A trip when the DRTS provider fails to show up to pick up a Member for a scheduled pick-up or return.

Public Transportation Services: Has the meaning assigned in Texas Transportation Code §461.002.

Same Day Service: A trip requested because a Member indicates his or her healthcare provider has told him or her to come to the provider’s office or to obtain other medical treatment or services that same day.

Scheduling: Means arranging of all NEMT Services covered under the Contract.

Service Area: Means the counties included in any HHSC-defined areas as applicable to each MCO Program.

Shared Ride: A DRTS for multiple Members traveling in the same direction with appointments scheduled within one hour of each other.

Transportation Network Company (TNC): Has the meaning assigned by Texas Occupations Code § 2402.001.

Trip Leg: Transportation of a Member from point of Origin to Destination. An add- on trip adds a separate leg.

Trip Manifest: means pertinent trip details provided to drivers and/or providers prior to date of service.

Urgent Request: A request for NEMT Services necessary to obtain treatment for an urgent condition as defined in the Uniform Managed Care Contract.



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Appendix II - Training Requirements

Personnel	Training	Timeline
All Staff	Overview of managed care and the NEMT Services benefits	Within 30 Days of hire.
All Staff	Handling difficult callers	Within 30 Days of hire.
All Staff	Scheduling and Coordinating of NEMT Services	Within 30 Days of hire.
All Staff	Civil Rights	Within 30 Days of hire and every 2 years thereafter.
All Staff	Fraud, Waste, and Abuse	Within 90 Days of hire and annually thereafter.
All Staff	Culture Diversity Training	Within 30 Days of hire and every 2 years thereafter.
All Staff	Customer Service	Within 30 Days of hire and every 3 years thereafter.
Drivers	Non-discrimination, sensitivity, and diversity	Within 30 Days of hire and annually thereafter.
Drivers	Passenger Assistance Techniques/Orientation Program	Within 30 Days of hire and every 3 years



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Personnel	Training	Timeline
		thereafter.
Drivers	Passenger Safety	Within 30 Days of hire and annually thereafter.
Drivers	Assistive Devices (e.g. wheelchair lifts, tie-down equipment, and child safety seats)	Within 30 Days of hire and annually thereafter.
Drivers	Defensive Driving	Within 30 Days of hire and every 2 years thereafter.
Drivers	Motor vehicle qualifications and conduct (e.g., prohibited behavior, including use of offensive language, use of tobacco, alcohol or drugs, and sexual harassment)	Within 30 Days of hire and every 2 years thereafter.



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Appendix III: Form Examples

To receive copies of the form examples listed below, please email a request to:
MTP_Legislative@hhsc.state.tx.us.

- Form 3007, Client Authorization for Advanced Funds
- Form H4214, Request for NEMT Services
- Optional Parental Accompaniment Form
- ITP Application
- ITP Claim