

Non-Emergent Medical Transportation (NEMT) Policies and Procedures Deliverable Evaluation

CCO Name:	
Date of Review:	
Reviewer:	

NON-EMERGENT MEDICAL TRANSPORTATION OHA HEALTH PLAN SERVICES CCO 2.0 CONTRACT, EXHIBIT B, Part 2 (5.e.) <u>CCO WRITTEN POLICIES AND PROCEDURES TO SUPPORT DEVELOPED AND IMPLEMENTED NEMT SYSTEMS</u>		
Category	Required Components	Score
Receiving Member Requests NEMT Services	CCO's written policies and procedures describe processes for receiving Member requests NEMT Services:	
<i>Exhibit B, Part 2(5.e) OAR 410-141-3920</i>	1.CCO must permit Members of their Representative to make requests for NEMT Services on behalf of Members. For purposes of this Para. B, Sub. Para (7), Sec. 4, Ex B, Part 2 Representatives include the Member's Community Health Worker, foster parent, adoptive parent, or other Provider delegated with this authority.	Y <input type="checkbox"/> N <input type="checkbox"/>
	2.CCO references "member" to include any individual eligible for NEMT services under this section (1) unless context dictates otherwise.	Y <input type="checkbox"/> N <input type="checkbox"/>
	3.CCO provides all non-emergency medical transportation (NEMT) services for its members and verifies that the person for whom the transportation is begin requested is a member enrolled with the CCO.	Y <input type="checkbox"/> N <input type="checkbox"/>
	4.CCO verifies that the services being requested is a covered services or health-related service, or in the case of FBDE members, that such members require NEMT travel to a Medicaid or Medicare covered appointment within the CCOs service area or outside the service area if NEMT services are not available within the CCO's service area and for which the CCO is responsible for cost-sharing, including the NEMT services.	Y <input type="checkbox"/> N <input type="checkbox"/>
	5.CCO verifies that the member is eligible for services.	Y <input type="checkbox"/> N <input type="checkbox"/>
	6.CCO verifies eligibility for services for FBDE members with such members' MA or DSNP Plans, or directly with such member's Medicare provider.	Y <input type="checkbox"/> N <input type="checkbox"/>
	7.CCO verifies that the transportation is a covered NEMT service.	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Approving NEMT Services	CCO written policies and procedures that describe processes for Approving NEMT Services:	

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<i>Exhibit B, Part 2(5.e)</i> <i>OAR 410-141-3835 through</i> <i>OAR 410-414-3915</i> <i>OAR 410-141-3920</i> <i>OAR 410-141-3930</i> <i>OAR 410-141-3940</i> <i>OAR 410-141-3950 through</i> <i>OAR 410-141-3955</i>	8. CCO verifies member’s eligibility for NEMT services.	Y <input type="checkbox"/> N <input type="checkbox"/>
	9. CCO determines the appropriate mode of transportation for the member.	Y <input type="checkbox"/> N <input type="checkbox"/>
	10. CCO determines the appropriate level for service for the member.	Y <input type="checkbox"/> N <input type="checkbox"/>
	11. CCO approves or denies requests for NEMT services in accordance with OARs 410-141-3835 through 410-414-3915, 410-141-3920, 410-141-3930, 410-141-3940, and 410-141-3950 through 410-141-3955; including issuing a notice of adverse benefit determination if denied.	Y <input type="checkbox"/> N <input type="checkbox"/>
	12. Appropriate information pertaining to the verification and approval or denial of NEMT services is entered into the CCO’s system.	Y <input type="checkbox"/> N <input type="checkbox"/>
	13. Neither the CCO or any of its Subcontracted transportation providers may bill a member for transport to or from covered medical services, even if the CCO or its contracted transportation provider denied reimbursement for the transportation services.	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Scheduling, Approving, and Dispatching	CCO written policies and procedures that describe processes for Scheduling, Approving, and Dispatching NEMT Services:	
<i>Exhibit B, Part 2(5.e)</i> <i>OAR 410-141-3920</i>	14. Providing Covered NEMT Services twenty-four (24) hours a day, three hundred and sixty-five (365) days a year and, in accordance with OAR 410-141-3920; permitting members to schedule: <ul style="list-style-type: none"> ▪ Same day for NEMT Services, ▪ Up to 90 days in advance, ▪ Multiple NEMT Services at one time for reoccurring appointments up to 90 days in advance 	Y <input type="checkbox"/> N <input type="checkbox"/>
	15. Scheduling and assigning the requested Transportation to an appropriate NEMT Provider after approving a NEMT Service to be provided by a NEMT Provider (i.e., not fixed route).	Y <input type="checkbox"/> N <input type="checkbox"/>
	16. Approving and scheduling or denying a request for NEMT (including all legs of the trip) Services within twenty-four (24) hours of receiving the request. This timeframe shall be reduced as necessary to ensure the member arrives in time for such member’s appointment.	Y <input type="checkbox"/> N <input type="checkbox"/>
	17. Ensuring trips are dispatched appropriately and meet the requirements of this Section and the needs of the member.	Y <input type="checkbox"/> N <input type="checkbox"/>
	18. Ensuring dispatcher, at minimum, provides updated information to drivers, monitor drivers’ locations, and resolve pick-up and delivery issues.	Y <input type="checkbox"/> N <input type="checkbox"/>

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	<p>19. Accommodating unforeseen schedule changes, including the timely reassignment of the affected trip to another NEMT Provider if necessary.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>20. Ensuring that neither NEMT drivers change the assigned pick-up time without prior, documented permission from Contractor or, when such services are Subcontracted, Contractor's NEMT Subcontractor.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>21. Notifying members, which must include, when possible, Contractor informing members of the Transportation arrangements during the phone call requesting the NEMT Service.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>22. CCO must obtain the member's preferred method (e.g., phone call, email, fax) and time of contact, and Contractor must notify members of the Transportation arrangements as soon as the arrangements are in place and prior to the date of the NEMT Service.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>23. Information about Transportation arrangements includes but not be limited to the name and telephone number of the NEMT Provider, the scheduled time and address of pick-up, and the name and address of the Provider to whom the member seeks transport. Responsibility of determining whether Transportation arrangements have been made shall not be delegated to any member.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Member Rights and Responsibilities	CCO written policies and procedures that address Member and passenger rights and responsibilities, including the right to file a Grievance related to NEMT Services, as follows:	
<i>Exhibit B, Part 2(5.e) OAR 410-141-3920</i>	<p>24. CCO describes passenger rights and responsibilities including file a grievance and request an appeal of reconsideration.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>25. The grievance and appeal processes and rights specified in OAR 410-141-3835 through 410-141-3915 are available with respect to NEMT services, with the following modifications:</p> <ul style="list-style-type: none"> ▪ Prior to mailing a notice of adverse benefit determination to a member, the CCO must provide a secondary review by another employee when the initial screener denies a ride. ▪ The CCO shall mail, within 72 hours of denial, a notice of adverse benefit determination to: <ul style="list-style-type: none"> ○ A member denied a ride; and ○ The provider or other third-party with which the affected member was scheduled for an appointment. 	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>26. CCO directs members (and passengers) to comply with its Grievance and Appeals Systems for grievances related to NEMT Services including, without limitation: (1) denial of services in full or in part, (2) driver or vehicle safety, (3) quality of services, (4) appropriateness of services, and (5) access to services.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>

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	<p>27. If the CCO Subcontracts its NEMT Service obligations to a Subcontractor, neither the Subcontractor nor CCO shall preclude Members from making complaints or Grievances that have been made previously, or from filing or submitting, the same complaint or Grievance to both the NEMT Subcontractor and CCO.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>28. CCO has a process for documenting, responding to, addressing or otherwise resolving all service quality complaints or grievances, or both, of whether such complaints or Grievances involve services provided by CCO itself or a Subcontractor.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Approval of NEMT Services	CCO written policies and procedures that address approval of NEMT Services which requires:	
<p><i>Exhibit B, Part 2(5.e)</i> <i>OAR 410-141-3835 through</i> <i>OAR 410-141-3915</i> <i>OAR 410-141-3920</i> <i>OAR 410-141-3930</i> <i>OAR 410-141-3940</i> <i>OAR 410-141-3950 through</i> <i>OAR 410-141-3955</i></p>	<p>29. CCO verifies member’s eligibility for NEMT services.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>30. CCO determines the appropriate mode of transportation for the member.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>31. CCO determines the appropriate level for service for the member.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>32. CCO approves or denies requests for NEMT services in accordance with OARs 410-141-3835 through 410-141-3915, 410-141-3920, 410-141-3930, 410-141-3940, and 410-141-3950 through 410-141-3955; including issuing a notice of adverse benefit determination if denied.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>33. Appropriate information pertaining to the verification and approval or denial of NEMT services is entered into the CCO’s system.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>34. Neither the CCO or any of its Subcontracted transportation providers may bill a member for transport to or from covered medical services, even if the CCO or its contracted transportation provider denied reimbursement for the transportation services.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Verification of Eligibility	CCO written policies and procedures that address verification of eligibility for NEMT Services by screening and confirming all requests for service, as follows:	
<p><i>Exhibit B, Part 2(5.e)</i> <i>OAR 410-141-3920</i></p>	<p>35. CCO references “member” to include any individual eligible for NEMT services under this section (1) unless context dictates otherwise.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>36. CCO provides all non-emergency medical transportation (NEMT) services for its members and verifies that the person for whom the transportation is begin requested is a member enrolled with the CCO.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>

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	<p>37. CCO verifies that the services being requested is a covered services or health-related service, or in the case of FBDE members, that such members require NEMT travel to a Medicaid or Medicare covered appointment within the CCOs service area or outside the service area if NEMT services are not available within the CCO’s service area and for which the CCO is responsible for cost-sharing, including the NEMT services.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>38. CCO verifies that the member is eligible for services.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>39. CCO verifies eligibility for services for FBDE members with such members’ MA or DSN Plans, or directly with such member’s Medicare provider.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>40. CCO verifies that the transportation is a covered NEMT service.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Service Modifications	CCO written policies and procedures that address service modifications for passengers and driver’s safety in accordance with OAR 410-141-3955, which includes modifications when a Member:	
<i>Exhibit B, Part 2(5.e)</i> <i>OAR 140-141-3955</i>	<p>41. A member has a health condition that prevents a direct threat to the driver or others in the vehicle.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>42. A member threatens harm to the driver or others in the vehicle or engages in behavior or creates circumstances that puts the driver or others in the vehicle at risk of harm.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>43. Engages in behavior that, in the CCO’s judgement, causes local medical providers or facilities to refuse to provide further services without modifying NEMT services.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>44. A member frequently cancels or does not show up for the scheduled NEMT services on the date such services is to be provided.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Appropriate Mode of Transportation	CCO written policies and procedures that determine the appropriate mode of transportation to meet the needs of the member by determining or assessing whether the member:	
<i>Exhibit B, Part 2(5.e)</i> <i>OAR 410-141-3935</i> <i>OAR 410-141-3955</i> <i>OAR 410-141-3940</i>	<p>45. Is ambulatory and the member’s current level of mobility and functional independence.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>46. Will be accompanied by an attendant, including those permitted under OAR 410-141-3935, and if so, whether the member requires assistance and whether the attendant meets the requirements for an attendant.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>47. Is age twelve (12) or under and will be accompanied by an adult.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>

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	48. Has any special conditions or needs including physical or behavioral health disabilities and modify, as may be required, the NEMT services in accordance with OAR 410-141-3955.	Y <input type="checkbox"/> N <input type="checkbox"/>
	49. Requires secured transportation in accordance with OAR 410-141-3940.	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Ensuring Timely Access	CCO written policies and procedures that ensure timely access for NEMT services which shall include:	
<i>Exhibit B, Part 2(5.e)</i> <i>OAR 410-141-3510</i> <i>OAR 410-141-392</i>	50. Arranging for NEMT Services to be available in a timely manner to ensure members arrive at their destination with sufficient time to check in and prepare for an appointment; including the timely pick up of members at the end of their appointments to provide the return trip without excessive delay .	Y <input type="checkbox"/> N <input type="checkbox"/>
	51. Implementing contingency plans for unexpected peak Transportation demands and back-up plans for instances when a vehicle is excessively late (more than fifteen (15) minutes late) or is otherwise unavailable for service.	Y <input type="checkbox"/> N <input type="checkbox"/>
	52. Conducting a readiness review of NEMT brokerages or other entities providing NEMT Services in line with the Subcontractor readiness review requirements, prior to entering into a contract with an NEMT Provider.	Y <input type="checkbox"/> N <input type="checkbox"/>
	53. Ensuring that NEMT drivers undergo background checks and are subject to the Participating Provider credentialing requirements of OAR 410-141-3510 prior to providing services.	Y <input type="checkbox"/> N <input type="checkbox"/>
	54. Ensuring ensure that NEMT Services are only provided using vehicles that meet all of the requirements set forth in OAR 410-141-3925 and are operated by drivers who meet all of the requirements, and have undergone all of the required screening, credentialed, background checks required, under OAR 410-141-3925.	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Scheduling, Approving, and Dispatching	CCO written policies and procedures that describe how Contractor schedules, assigns, and dispatches trips which must include:	
<i>Exhibit B, Part 2(5.e)</i> <i>OAR 140-141-3920</i>	55. Providing Covered NEMT Services twenty-four (24) hours a day, three hundred and sixty-five (365) days per year and, in accordance with OAR 410-141-3920; permitting members to schedule: <ul style="list-style-type: none"> ▪ Same day for NEMT Services, ▪ Up to 90 days in advance, ▪ Multiple NEMT Services at one time for reoccurring appointments up to 90 days in advance 	Y <input type="checkbox"/> N <input type="checkbox"/>

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	<p>56. Scheduling and assigning the requested Transportation to an appropriate NEMT Provider after approving a NEMT Service to be provided by a NEMT Provider (i.e., not fixed route).</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>57. Approving and scheduling or denying a request for NEMT Services (including all legs of the trip) within twenty-four (24) hours of receiving the request. This timeframe shall be reduced as necessary to ensure the member arrives in time for their appointment.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>58. Ensuring trips are dispatched appropriately and meet the requirements of this Section and the needs of the member.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>59. Ensuring dispatcher, at minimum, provides updated information to drivers, monitor drivers' locations, and resolve pick-up and delivery issues.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>60. Accommodating unforeseen schedule changes, including the timely reassignment of the affected trip to another NEMT Provider, if necessary.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>61. Ensuring that NEMT drivers do not change the assigned pick-up time without prior, documented permission from Contractor or, when such services are Subcontracted, Contractor's NEMT Subcontractor.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>62. Notifying members, which must include, when possible, Contractor informing members of the Transportation arrangements during the phone call requesting the NEMT Service.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>63. CCO must obtain the member's preferred method (e.g., phone call, email, fax) and time of contact, and Contractor must notify members of the Transportation arrangements as soon as the arrangements are in place and prior to the date of the NEMT Service.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>64. Information about Transportation arrangements includes but not be limited to the name and telephone number of the NEMT Provider, the scheduled time and address of pick-up, and the name and address of the Provider to whom the member seeks transport. Responsibility of determining whether Transportation arrangements have been made shall not be delegated to any member.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Contingency and Back-up Plans	CCO written policies and procedures that address contingency and back-up plans for NEMT trips, which must include:	
<i>Exhibit B, Part 2(5.e)</i>	<p>65. CCO's Adverse Weather Plan, which must provide for the transportation of members who need critical medical care, including but not limited to renal dialysis and chemotherapy, during adverse weather conditions. "Adverse weather conditions" includes, but is not limited to, extreme heat, extreme cold, flooding, tornado warnings and heavy snowfall, or icy roads.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>

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	<p>66. Policies and procedures include, at a minimum, staff training, methods of notification, and member education.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>67. Contingency and Back-Up Plans includes descriptions of CCO’s contingency plans for unexpected peak Transportation demands and back-up plans for instances when a vehicle is excessively late (more than fifteen (15) minutes late) or is otherwise unavailable for service.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>68. The NEMT Provider may arrive before the scheduled pick-up time, but the member may not be required to board the vehicle prior to the scheduled pick-up time.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Pick-up and Delivery	CCO written policies and procedures that address pick-up and delivery for NEMT Services, which must include:	
<p><i>Exhibit B, Part 2(5.e)</i> <i>OAR 410-141-3920</i></p>	<p>69. Drivers make their presence known to members and require drivers to wait until at least fifteen (15) minutes after the scheduled pick-up time. If the member is not present fifteen (15) minutes after the scheduled pick-up time, the driver must notify the dispatcher before departing from the pick-up location.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>70. Drivers provide, at a minimum, the approved level of service (curb-to-curb, door-to-door, or hand-to-hand, or all of the foregoing as applicable).</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>71. Members arrive at pre-arranged times for appointments and are picked up at pre-arranged times for the return leg of the trip. If there is no pre-arranged time for the return leg of the trip, Contractor shall ensure that Members are picked up within one (1) hours after notification.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>72. Pick-up and drop-off times should be captured in such a way to allow reporting as requested by OHA. Members may not be required to arrive at their scheduled appointment more than one (1) hour before their appointment time.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>73. Drivers are not permitted to drop off members at an appointment more than 15 minutes prior to the office or other facility opening for business, unless required by the member or, as applicable, the member’s guardian, parent, or representative, as permitted under OAR 410-141-3920 (5)(b)(A).</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>74. Drivers are not permitted to drop off members at an appointment more than 15 minutes prior to the office or other facility closes for business unless the appointment is not reasonably expected to end within 15 minutes after closing or as requested by the member or, as applicable, the member’s guardian, parent, or representative, as permitted under OAR 410-141-3920 (5)(b)(B).</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>75. The waiting time for members for pick-up does not exceed fifteen (15) minutes past the scheduled pick-up time.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>

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	76. Scheduled pick-up times shall allow the appropriate amount of travel time to assure the members arrive giving them sufficient time to check-in for their appointment.	Y <input type="checkbox"/> N <input type="checkbox"/>
	77. Members shall be dropped off for their appointment no less than fifteen (15) minutes prior to their appointment time to prevent the drop off time from being considered a late drop off.	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Accidents and Incidents	CCO written policies and procedures that address accidents and incidents, and the Administrative Notice that will be made as follows:	
<i>Exhibit B, Part 2(5.e)</i>	78. Within two (2) business days of the CCO becoming aware of the Incident, submit email notification to: CCO.MCOTDeliverableReports@dhsosha.state.or.us	Y <input type="checkbox"/> N <input type="checkbox"/>
	79. Describe the Incident with particularity including, without limitation: (i) the name of the driver, (ii) the name of the passenger, (iii) the location of the Incident, (iv) the date and time of the Incident, (iv) a description of the Incident and any injuries sustained as a result of the Incident, and (v) whether the driver or the passenger required treatment at a Hospital.	Y <input type="checkbox"/> N <input type="checkbox"/>
	80. If applicable, a police report number will be included with such Administrative Notice or shall provide the full police report to OHA as soon as possible after providing Administrative Notice of the Incident.	Y <input type="checkbox"/> N <input type="checkbox"/>
	81. CCO ensures cooperation in any related investigation.	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		
Monitoring and Documentation	CCO written policies and procedures that address monitoring and documenting of services, which requires the CCO to:	
<i>Exhibit B, Part 2(5.e)</i> <i>OAR 410-141-3965</i> <i>OAR 410-141-3520</i>	82. Subject to OAR410-141-3965, collect and maintain documentation of services provided that includes each trip, the member ID, the destination, the reason the ride was requested (service reason), and any incidents of no-show on part of the driver or the member.	Y <input type="checkbox"/> N <input type="checkbox"/>
	83. Subject to the requirements set forth in OAR 410-141-3965, pay for coordination and provision of NEMT Services provided to members if the member is eligible for NEMT.	Y <input type="checkbox"/> N <input type="checkbox"/>
	84. CCO may also pay, with its Health-Related Services funds, for the coordination and provision of NEMT provided to members if the member is eligible for NEMT and the request for NEMT is for a Health-Related Service	Y <input type="checkbox"/> N <input type="checkbox"/>

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	<p>85. Monitoring and documenting complaints about NEMT Services, including those relating to any incidence of a driver failing to show up for a requested transport. Any and all instances of a driver failing to show up for a requested transport shall require documented follow up from the Contractor’s NEMT coordinator or designee.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>86. Required follow up includes determining whether the member suffered any harm as a result of the driver’s failure to provide the ride, whether rescheduling of appointments was or is necessary, and whether any additional recourse or Corrective Action with the driver or the Subcontracted NEMT Provider is appropriate.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>87. Transportation providers will be considered “participating providers” for the purposes of OAR 410-141-3520 (Record Keeping and Use of Health Information Technology).</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
<p>Comments:</p>		

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NON-EMERGENT MEDICAL TRANSPORTATION <i>OHA HEALTH PLAN SERVICES CCO 2.0 CONTRACT, EXHIBIT B, Part 2 (5.f)</i> <u>CALL CENTER OPERATIONS</u>		
Category	Required Components	Score
<i>Call Center Operations</i>	The CCO's NEMT Call Center Operations will maintain, operate, arrange, develop, and/or record all of the items, as follows:	
<i>Exhibit B, Part 2(5.f)</i> <i>OAR 410-141-3920</i> <i>OAR 410-141-3965</i>	88. NEMT Call Center handles requests for NEMT Services as well as questions, comments, complaints, Grievances, and inquiries from members and their Representatives, NEMT Providers, and Providers.	Y <input type="checkbox"/> N <input type="checkbox"/>
	89. NEMT Call Center has a toll-free separate line or queue for members to request calls.	Y <input type="checkbox"/> N <input type="checkbox"/>
	90. NEMT Call Center has staff dedicated to NEMT calls.	Y <input type="checkbox"/> N <input type="checkbox"/>
	91. NEMT Call Center at minimum operates Monday through Friday from 9:00 a.m. to 5:00 p.m. (excluding New Year's Day, Memorial Day, July 4th, Labor Day, Thanksgiving, and Christmas).	Y <input type="checkbox"/> N <input type="checkbox"/>
	92. CCO has a mechanism to handle NEMT calls during hours outside of minimum operating hours, when the NEMT Call Center is closed, including an after-hours message in, at minimum, English and Spanish.	Y <input type="checkbox"/> N <input type="checkbox"/>
	93. CCO has a mechanism for monitoring and documenting after hours messages and ensuring that members are contacted by no later than the next business day and call attempts are made until the member is reached.	Y <input type="checkbox"/> N <input type="checkbox"/>
	94. NEMT Call Center system has the capability to: <ul style="list-style-type: none"> ▪ Make outbound calls ▪ Advise members of approximate wait times, member's line in the queue, and provided option for call back without losing their place in line. 	Y <input type="checkbox"/> N <input type="checkbox"/>
	95. CCO described a mechanism to monitor and ensure that calls are received and processed; meeting the performance standard for each line or queue. <ul style="list-style-type: none"> ▪ Answer rate – At least eighty-five percent (85%) of all calls are answered by a live voice within thirty (30) seconds; ▪ Abandoned calls – No more than five percent (5%) of calls are abandoned; and ▪ Hold time – Average hold time, including transfers to other Contractor staff, is no more than three (3) minutes. 	Y <input type="checkbox"/> N <input type="checkbox"/>
	96. If an NEMT call cannot be answered by a live voice within thirty (30) seconds, CCO shall provide a message in, at a minimum, English and Spanish, advising the caller that the call will not be answered promptly and offering the caller the opportunity to leave a message.	Y <input type="checkbox"/> N <input type="checkbox"/>

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	<p>97. If the message asks the CCO to return the call and includes a valid phone number for the member, the CCO promptly returns the call within three (3) hours and make, as may be necessary to reach the member or the member’s Representative, three phone calls within that third (3rd) hour. If the member or the member’s Representative cannot be reached directly after three phone calls, the person returning the call may instead (i) leave a message for the member or the member’s representative with the person answering the call or, (ii) if applicable, leave a voicemail message.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>
	<p>98. All efforts made to reach a member who has left a message shall be documented in order to demonstrate compliance with this requirement.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>
	<p>99. Have a qualified multilingual (English and, at minimum, Spanish) NEMT Call Center staff to communicate with callers. The CCO provides oral interpretation services via a telephone interpretation service free of charge to callers with Limited English Proficiency.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>
	<p>100.CCO accommodates callers who are hearing and/or speech impaired.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>
	<p>101.CCO operates an automatic call distribution system for its NEMT Call Center. CCO routes incoming calls to the NEMT Call Center to, at minimum, an English-speaking member queue, a Spanish-speaking member queue, an NEMT Provider queue, and a Provider healthcare queue.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>
	<p>102.The welcome message for the NEMT Call Center shall be in English and shall include, at minimum, a Spanish language prompt allowing the member to opt into the appropriate queue.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>
	<p>103.CCO develops NEMT Call Center scripts for calls requesting NEMT Services that include a sequence of questions and criteria that the NEMT Call Center representatives shall use to determine the member’s eligibility for NEMT Services, the appropriate mode of Transportation, the purpose of the trip and all other pertinent information relating to the trip. Contractor may develop additional scripts for other types of NEMT calls from members, healthcare Providers, and NEMT Providers.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>
	<p>104.Any script for use with a member shall be written at the sixth (6th) grade reading level and must have been pre-approved in writing by OHA, which must be provided to OHA via Administrative Notice. Contractor shall not implement any changes in its script unless approved in writing by OHA.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>
	<p>105.CCO advises callers that calls to the NEMT Call Center are Monitored and recorded for quality assurance purposes.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>
	<p>106.CCO records a statistically valid sample of incoming and outgoing calls to/from the NEMT Call Center for quality control, program integrity, and training purposes.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>
	<p>107.CCO monitors and audits at least one percent (1%) of calls of each NEMT Call Center staff member on a monthly basis.</p>	<p style="text-align: right;">Y <input type="checkbox"/> N <input type="checkbox"/></p>

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	<p>108.CCO develops a tool for auditing calls, which shall include components to be audited and the scoring methodology. Contractor shall use this Monitoring to identify problems or issues, for quality control and for training purposes. Contractor shall document and retain results of this Monitoring and subsequent training.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
	<p>109.CCO’s NEMT Call Center system collects and documents data and produce quarterly and ad hoc reports required under both this Contract and OAR 410-141-3965 as set forth in further detail in Para. g of Sec. 5, Ex. B, Part 2.</p>	Y <input type="checkbox"/> N <input type="checkbox"/>
<p>Comments:</p>		

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NON-EMERGENT MEDICAL TRANSPORTATION OHA HEALTH PLAN SERVICES CCO 2.0 CONTRACT, EXHIBIT B, Part 2 (5.g.) NEMT QUALITY ASSURANCE PROGRAM (NEMT QUALITY ASSURANCE PLAN)		
Category	Required Components	Score
<i>NEMT Quality Assurance Plan</i>	The CCO’s NEMT Quality Assurance Plan, will include at least the following written policies and procedures outlining the activities for ongoing Monitoring, evaluation and improvement of the quality and appropriateness of NEMT Services:	
<i>Exhibit B, Part 2(5.g) OAR 410-141-3920 through OAR 410-141-3965</i>	110. Procedures for monitoring and improving member satisfaction with NEMT Services must include, without limitation; processes for accepting NEMT complaints and Grievances from members and from others acting on members’ behalf, including medical Providers.	Y <input type="checkbox"/> N <input type="checkbox"/>
	111. Processes for conducting member satisfaction surveys on a regular basis. Follow up member satisfaction surveys must be sent to, and collected from, a minimum of ten percent (10%) of all members who scheduled NEMT rides.	Y <input type="checkbox"/> N <input type="checkbox"/>
	112. Procedures for ensuring that all NEMT Services paid for are properly approved and actually rendered, including but not limited to validation checks and an annual analysis matching claims/encounters for services for which CCO is fully or partially financially responsible based on the Member’s CCO plan type and NEMT claims/encounters.	Y <input type="checkbox"/> N <input type="checkbox"/>
	113. CCO procedures for monitoring and improving the quality of Transportation provided pursuant to this Contract, including Transportation provided by fixed route.	Y <input type="checkbox"/> N <input type="checkbox"/>
	114. Policies and procedures for a Monitoring Plan for NEMT Providers to ensure compliance with OARs 410-141-3920 through 410-141-3965, which shall include, without limitation for: Verifying that provider vehicles are accessible for members, including those members with disabilities, or other Special Health Care Needs (e.g., wheelchair restraints for wheelchairs, etc.).	Y <input type="checkbox"/> N <input type="checkbox"/>
	115. Verifying that provider vehicles are accessible for members, including those members with disabilities, or other Special Health Care Needs (e.g., wheelchair restraints for wheelchairs, etc.).	Y <input type="checkbox"/> N <input type="checkbox"/>
	116. Conducting, and maintaining documentation of, background checks at regular intervals on all drivers including criminal history, driver history, sex offender status, and drug testing.	Y <input type="checkbox"/> N <input type="checkbox"/>
	117. Providing, or ensuring that drivers have attended, and documentation thereof, appropriate training for the level of services being provided (e.g., door to door vs, curbside to curbside), how to assist members with disabilities, and other Special Health Care Needs, and how to serve passengers in a culturally aware manner.	Y <input type="checkbox"/> N <input type="checkbox"/>

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	118. Verifying, and documentation thereof, NEMT Service Subcontractors have and maintain appropriate workers compensation, general liability, and automotive Liability Insurance.	Y <input type="checkbox"/> N <input type="checkbox"/>
	119. Auditing and documentation thereof, a percentage of daily rides for claims data, pick-up, and drop off times, appropriate level of transport, and member satisfaction.	Y <input type="checkbox"/> N <input type="checkbox"/>
Comments:		

Total # Compliant Elements by Category	
Written CCO NEMT Policy & Procedure	
Call Center Operations	
NEMT Quality Assurance Prog	

Total # Applicable Elements	
Total # Compliant Elements	
Total Percent Compliant	