



Non-Emergent Medical Transportation Free Ride Guide

Revised January 1, 2025

For Our:

Eastern Oregon Coordinated Care Organization (EOCCO) Members

Oregon Health Plan / Medicaid Members

877-875-4657

EOCCO Non-discrimination Notice

- Discrimination is against the law
- Network providers must treat you fairly
- We and our providers must follow state and federal civil rights laws
- We cannot and will not treat people unfairly because of a person's:
 - 1. Age
 - 2. Color
 - 3. Disability
 - 4. National origin, primary language, and English language proficiency
 - 5. Race
 - 6. Religion
 - 7. Sex, sex characteristics, sexual orientation, gender identify, and sex stereotype
 - 8. Pregnancy and related conditions
- Health Status or need for services Everyone has a right to know about EOCCO's programs and services: All members have a right to use our programs and services
- We give free help when you need it
- We offer free sign and spoken language translation
- We also offer written materials in other languages, braille, large print, audio and other formats
- We provide multilingual call center staff and can accommodate hearing and/or speech impaired callers

If you need any of the services listed above, contact Customer Service at 888-788-9821 or TTY/Oregon Relay 711.

If you feel you were treated unfairly for any of the above reasons, you can make a complaint or grievance. For more information, click this link to access complaint forms and procedures: <u>EOCCO Member Forms</u>.

Need help filing a complaint? Call Customer Service, a peer wellness specialist, or personal health navigator. A member's access to covered services, grievance, appeals, or hearings will not be denied or limited based on the member's need for alternative formats or auxiliary aids.

Make (or file) a complaint with EOCCO's Section 1557 Coordinator in any of these ways:

Phone:	888-788-9821 TTY/OREGON RELAY 711
Fax:	503-412-4003
Mail:	EOCCO Attention: Appeal Unit 601 SW Second Ave. Portland, OR 97204
Web:	English: <u>https://www.eocco.com/-</u> /media/EOCCO/PDFs/Member/Resources/complaint_form.pdf Spanish: <u>https://www.eocco.com/-</u> /media/EOCCO/PDFs/Member/Resources/complaint_formSpanish.pdf

You also have a right to file complaint with any of these organizations:

Organization:	Oregon Health Authority Ombudsman	
Phone:	503-947-2346 877-642-0450 TTY/Oregon Relay 711	
Mail:	500 Summer St NE, E17 Salem, OR 97310-1097	

Organization:	Oregon Health Plan (OHP) Client Services Unit (CSU)
Phone:	800-273-0557 TTY/Oregon Relay 711
Hours:	Monday through Friday 8:00 a.m. to 5:00 p.m. PST

Nick Gross coordinates EOCCO's nondiscrimination and civil rights work:

Organization:	EOCCO
Name:	Nick Gross Chief Compliance Officer
Phone:	503-952-5033 TTY/OREGON RELAY 711
Email:	compliance@eocco.com

You also have a right to file a discrimination or civil rights complaint with:

Organization:	Oregon Health Authority (OHA) Civil Rights	
Web:	www.oregon.gov/OHA/EI	
Email:	OHA.PublicCivilRights@odhsoha.oregon.gov	
Phone:	844-882-7889 TTY/Oregon Relay 711	
Mail:	Office of Equity and Inclusion Division, 421 SW Oak St., Suite 750, Portland, OR 97204	

Organization:	Bureau of Labor and Industries Civil Rights Division	
Web:	Web: https://www.oregon.gov/boli/civil-rights	
Email:	BOLI_help@boli.oregon.gov	

Phone:	971-673-0764 TTY/Oregon Relay 711
Mail:	Bureau of Labor and Industries Civil Rights Division, 800 NE Oregon St., Suite 1045, Portland, OR 97232

Organization:	U.S. Department of Health and Human Services Office for Civil Rights (OCR)	
Web:	https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf	
Email:	OCRComplaint@hhs.gov	
Phone:	800-368-1019 800-537-7697 TTY/Oregon Relay 711	
Mail:	Office for Civil Rights, 200 Independence Ave. SW, Room 509F, HHH Bldg., Washington, DC 20201	

This free ride guide is available electronically or in paper copy within 5 business days of request at no charge. If you want an electronic copy, just ask and give us your approval to send it. Any format of the ride guide has the same information. We also want the ride guide to be easy to find on our website. It is on the first page. Contact EOCCO to get any type of ride guide at:

Phone:	503-765-3521 888-788-9821 TTY/Oregon Relay 711
Fax:	503-948-5577
Address:	Moda Tower, 601 SW 2 nd Avenue Portland, Oregon 97024
Web:	https://www.eocco.com/members

We want everyone to have information about EOCCO's care model in a way that they need it. This is free for:

- Members
- Member representatives
- Family members
- Caregivers

English

You can get this letter in other languages, large print, Braille or a format you prefer. You can also ask for an interpreter. This help is free. Call 1-888-788-9821 or TTY/Oregon Relay 711. We accept relay calls.

You can get help from a certified and qualified health care interpreter.

Spanish

Puede obtener este documento en otros idiomas, en letra grande, braille o en un formato que usted prefiera. También puede recibir los servicios de un intérprete. Esta ayuda es gratuita. Llame al servicio de atención al cliente 1-888-788-9821 o TTY/Oregon Relay 711. Aceptamos todas las llamadas de retransmisión.

Usted puede obtener ayudar de un intérprete certificado y calificado en atención de salud.

Russian

Вы можете получить это письмо на другом языке, напечатанное крупным шрифтом, шрифтом Брайля или в предпочитаемом вами формате. Вы также можете запросить услуги переводчика. Эта помощь предоставляется бесплатно. Звоните по тел. 1-888-788-9821 или TTY/Oregon Relay 711. Мы принимаем звонки по линии трансляционной связи.

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Вы можете получить помощь от аккредитованного и квалифицированного медицинского переводчика.

Vietnamese

Quý vị có thể nhận tài liệu này bằng một ngôn ngữ khác, theo định dạng chữ in lớn, chữ nổi Braille hoặc một định dạng khác theo ý muốn. Quý vị cũng có thể yêu cầu được thông dịch viên hỗ trợ. Sự trợ giúp này là miễn phí. Gọi 1-888-788-9821 hoặc TTY (Đường dây Dành cho Người Khiếm thính hoặc Khuyết tật về Phát âm) Oregon Relay 711. Chúng tôi chấp nhận các cuộc gọi chuyển tiếp.

Quý vị có thể nhận được sự giúp đỡ từ một thông dịch viên có chứng nhật và đủ tiêu chuẩn chuyên về chăm sóc sức khỏe.

Arabic

> -ي_{ام}كن لمجال حصول على المساعدة منمت جم متعمد ومؤ هلف ي ماليال عاية الصحية

Somali

Waxaad heli kartaa warqadan oo ku qoran luqaddo kale, far waaweyn, farta dadka indhaha aan qabin wax ku akhriyaan ee Braille ama qaabka aad doorbidayso. Waxaad sidoo kale codsan kartaa turjubaan. Taageeradani waa lacag la'aan. Wac 1-888-788-9821 ama TTY/Oregon Relay 711. Waa aqbalnaa wicitaanada gudbinta.

Waxaad caawimaad ka heli kartaa turjubaanka daryeelka caafimaadka oo xirfad leh isla markaana la aqoonsan yahay.

Simplified Chinese

您可获取本文件的其他语言版、大字版、盲文版或您偏好的格式版本。您还可要求提供口译员服务。本帮助免费。致电1-888-788-9821 或 TTY/Oregon Relay 711。我们会接听所有的转接来电。

您可以从经过认证且合格的医疗口语翻译人员那里获得帮助。

Traditional Chinese

您可獲得本信函的其他語言版本、大字版、盲文版或您偏好的格式。 您也可申請口譯員。以上協助均為免費。請致電 1-888-788-9821 或聽 障專線 Oregon Relay 711。我們接受所有傳譯電話。

您可透過經認證的合格醫療保健口譯員取得協助。

Korean

이서신은 다른 언어, 큰 활자, 점자 또는 선호하는 형식으로 받아보실 수 있습니다. 통역사를 요청하실 수도 있습니다. 무료 지원해 드립니다. 1-888-788-9821 또는 TTY/Oregon Relay 711에 전호하십시오. 저희는 중계 전화를 받습니다.

공인및자격을갖춘의료세비스전문통역사의도움을받으실수있습니다.

Hmong

Koj txais tau tsab ntawv no ua lwm yam lus, ua ntawv loj, ua lus Braille rau neeg dig muag los sis ua lwm yam uas koj nyiam. Koj kuj thov tau kom muaj ib tug neeg pab txhais lus. Txoj kev pab no yog ua pub dawb. Hu 1-888-788-9821 los sis TTY/Oregon Relay 711. Peb txais tej kev hu xov tooj rau neeg lag ntseg. Koj yuav tau kev pab los ntawm ib tug kws txawj txhais lus rau tib neeg mob.

Marshallese

Kwomaroñ bōk leta in ilo kajin ko jet, kōn jeje ikkillep, ilo braille ak bar juon wāwein eo emmanlok ippam. Kwomaroñ kajjitōk bwe juon ri ukōt en jipañ eok. Ejjelok wōṇāān jipañ in. Kaaltok 1-888-788-9821 ak TTY/Oregon Relay 711. Kwomaroñ kaaltok in relay.

Kwomaroñ bōk jipañ jān juon ri ukōt ekōmālim im keiie āinwōt ri ukōt in ājmour.

Chuukese

En mi tongeni angei ei taropwe non pwan ew fosun fenu, mese watte mak, Braille ika pwan ew format ke mwochen. En mi tongeni pwan tingor emon chon chiaku Ei aninis ese fokkun pwan kamo. Kokori1-888-788-9821 ika TTY/Oregon Relay 711. Kich mi etiwa ekkewe keken relay.

En mi tongeni kopwe angei aninis seni emon mi certified ika qualified ren chon chiaku ren health care.

Tagalog

Makukuha mo ang liham na ito sa iba pang mga wika, malaking letra, Braille, o isang format na gusto mo. Maaari ka ring humingi ng tagapagsalin. Ang tulong na ito ay libre. Tawagan ang 1-888-788-9821 o TTY/Oregon Relay 711. Tumatanggap kami ng mga relay na tawag.

Makakakuha ka ng tulong mula sa isang sertipikado at kwalipikadong tagapagsalin ng pangangalaga sa kalusugan.

German

Sie können dieses Dokument in anderen Sprachen, in Großdruck, in Brailleschrift oder in einem von Ihnen bevorzugten Format erhalten. Sie können auch einen Dolmetscher anfordern. Diese Hilfe ist gratis. Wenden Sie sich an 1-888-788-9821 oder per Schreibtelefon an Oregon Relay/711. Wir nehmen Relaisanrufe an.

Sie können die Hilfe eines zertifizierten und qualifizierten Dolmetschers für das Gesundheitswesen in Anspruch nehmen.

Portuguese

Esta carta está disponível em outros idiomas, letras grandes ou braile, se preferir. Também poderá solicitar serviços de interpretação. Essa ajuda é gratuita. Ligue para 1-888-788-9821 ou use o serviço TTY/Oregon Relay 711. Aceitamos encaminhamentos de chamadas.

Você poderá obter a ajuda de intérpretes credenciados e qualificados na área de saúde.

Japanese

この書類は、他の言語に翻訳されたもの、拡大文字版、点字版、その他ご 希望の様式で入手可能です。また、通訳を依頼することも可能です。本サー ビスは無料でご利用いただけます。1-888-788-9821 または TTY/Oregon Relay 711までお電話ください。電話リレーサービスでも構いません。 -

認定または有資格の医療通訳者から支援を受けられます。

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Introduction

Eastern Oregon Coordinated Care Organization along with Oregon Health Plan (OHP Medicaid) helps members get free rides to their medical, dental and behavioral health appointments. The program that arranges this transportation for our members is called Non-Emergent Medical Transportation (NEMT).

EOCCO provides all NEMT services for our members.

For more information, refer to your Member Handbook on the Greater Oregon Behavioral Health (GOBHI) and EOCCO websites:

GOBHI – <u>https://www.gobhi.org/</u> EOCCO - <u>https://www.eocco.com/members</u>

Program Overview

Oregon Health Plan (OHP) offers members free rides to medical appointments.

You can get a ride:

- 24 hours a day
- 7 days a week
- 365 days a year

Rides or repayments are available as Covered Services under the Oregon Health Plan and EOCCO (Eastern Oregon Coordinated Care Organization). Services can include medical, behavioral health and dental appointments.

NEMT will check to see if you are eligible for free rides. We will confirm this through the Oregon Health Authority (OHA) database when you call to book a ride.

The NEMT program provides free rides to EOCCO members in the following counties:

- Baker
- Lake
- Gilliam
- Sherman
- Grant
- Umatilla
- Harney

- Union
- Hood River
- Wallowa
- Malheur
- Wasco
- Morrow
- Wheeler

We want you to call our toll-free call center to request a ride. We have local numbers and a toll-free number. You can call most of our EOCCO communities with a local number. There is a toll-free number available to you for any areas where there is not a local number. Our subcontractors also use the toll-free number. Language interpreter services are available at no cost to you.

Brokerage Toll Free	877-875-4657		
Baker City	541-249-5230	Ontario	541-216-4556
Bend	541-948-8352	Pendleton	541-304-3208
Burns	541-288-9163	The Dalles	541-298-1045
Enterprise	541-263-7636	Umatilla	541-275-8207
Hermiston	541-303-8103 541-303-8104 541-303-8110	Union	541-562-7888
Hood River	541-716-4460	Walla Walla	509-524-9058
John Day	541-620-5075	Toll Free FAX	855-541-1517
La Grande	541-624-3082	TTY/TDD relay Oregon Relay	7-1-1

Contact Information and Service Hours

EOCCO & GOBHI provides NEMT services to you in the area that you live.

Your NEMT provider may be closed on the following holidays:

- New Year's Day January 1st
- Memorial Day Last Monday in May
- Independence Day July 4th
- Labor Day First Monday in September
- Thanksgiving Day 4th Thursday in November
- Christmas Day December 25th

If our office is closed we have a recording to help you.

- It will be in English or Spanish.
- We will also give you info about our service hours
- We will also tell you to call 911 for an emergency
- We will call you back if you leave a clear message with your name and phone number
- We will call you back on the next business day.
- We will keep calling back until we talk to you.

Your Rights

As a NEMT user, you have the right to:

- Receive safe and reliable rides to and from appointments that meet your needs
- Receive free rides to the closest provider that is able to meet your needs for medical, dental or behavioral health services
- Ask for interpreter services when talking to a customer service representative
- Request any materials from your NEMT provider in a language or format that meets your needs
- Receive a written notice if a ride is denied
- If you feel your ride was denied unfairly, you can ask for a reconsideration, turn in an appeal, ask for a hearing, or ask for all
- Share concerns, complaints, and **file a grievance** with your NEMT provider, GOBHI, or EOCCO

Your Responsibilities

As a passenger, we expect that you:

- Treat drivers and other passengers with respect at all times
- Inform NEMT of any medical symptoms that may be contagious
- Call NEMT as early as possible to schedule, change, or cancel a ride
- Use seatbelt(s) and other safety equipment as required by law (example: car seats)
- Drivers can only make stops that we have approved.
- If you need to make an extra stop, such as a pharmacy or another appointment, please call NEMT before your ride.

Your Privacy

NEMT providers comply with HIPAA. Information you provide will be kept private. We only tell drivers enough to provide your ride.

NEMT will only tell drivers the information that is necessary to provide your ride for you.

Medical information is only provided to drivers when needed. Drivers will not share any of your information outside of the ride except with your NEMT Provider, EOCCO, the Oregon Health Authority, or the Oregon Department of Human Services, as required or requested.

What to Expect from Your Driver

You can expect your driver to:

- Hold your safety as their highest priority
- Be friendly, courteous and professional
- Treat you with respect and dignity
- Drive safely and follow all laws and regulations
- Use a hands-free device for phones and tablets
- Tell you when they arrive by calling, knocking on your door, or by coming into the lobby of the facility
- Have completed all State required training (such as CPR, First Aid, and Defensive Driving)

If requested, drivers can:

- Help you walk up or down 1 or 2 steps
- Provide you with curb-to-curb, door-to-door, or hand-to-hand service (See page 14)
- Help you into the lobby of the health care facility Drivers cannot help you beyond that point

If you need help with the above, please let us know when you schedule your ride.

Drivers cannot:

- Enter your home or room
- Help you get ready for transport (dressing, shoes, jacket)
- Transfer you between bed and wheelchair, or wheelchair and van
- Help you with any personal needs during your ride
- Ask for or accept fares or tips
- Solicit or sell any other products or services
- Make any stops, pick up food or help run errands
- Change the arranged pick up time of rides without prior documented permission from EOCCO or GOBHI

If you need these supports or any others, you will need to provide your own caregiver to help you.

If you will need help at your appointment, such as help to eat or go to the bathroom, you will need to bring a caregiver to help you.

Who Can Get Free Rides

We follow OAR 410-141-3920 rules.

You can get free rides from your NEMT provider if:

- You are covered by EOCCO through the Oregon Health Plan (Medicaid) in Eastern Oregon
- You are traveling to an approved appointment
- The ride is a covered service
- If you have both Medicaid and Medicare (dual member) we will check your coverage to see that you can get rides to or from a covered service or other health-related service
- Rides are to the closest provider

- You are traveling to a health-related service. For more information about health-related services see your Member Handbook
- This could be inside or outside of our service area to travel to approved appointments. For example:
 - When EOCCO cannot give you a service inside our service area, we give rides outside the service area. This includes members with both Medicaid and Medicare. It also includes when EOCCO is responsible for cost-sharing.
- If you are covered by the Compact of Free Association (COFA) Dental Program or the Veteran Dental Program, we only give rides for your dental services.
 - These programs are defined in OAR chapter 410, division 200

Approval of Free Rides

If you meet the requirements for a free ride, the NEMT provider will:

- Verify that you are covered on the Oregon Health Plan through EOCCO, are eligible for services, and transportation is a covered NEMT service
- Determine the best type of ride for your needs
- Determine the best level of services for your needs
 - Curb-to-curb: Your driver will meet you at the curb of your pickup location.
 - Door-to-door: Your driver will meet you at the door or front desk of your pickup location. The driver will assist you to the door or front desk of your drop-off location.
 - Hand-to-hand: Your driver will meet you and your personal care attendant at your pickup location. Your driver will bring you all the way inside at your drop-off location. Your driver will stay with you until someone takes you the rest of the way. If you choose, a personal care attendant can help you.
- Enter the information in our system for tracking
- Make a decision to approve or deny the ride within 24 hours of receiving the request. A decision can be made before 24 hours, as needed to make sure you arrive on time for your appointment
- You will never receive a bill or be requested to pay any money to EOCCO or another company for your ride, even if the ride payment is denied

When Calling for a Ride

Ca

We will need some information from you to help schedule your ride. Please have this information available before calling NEMT

Needed information to schedule a ride:
Full name
Full street address
Phone number or contact number
Doctor /Clinic name
Doctor /Clinic street address
Doctor /Clinic phone number
Date of appointment
Time of appointment
Pick-up time after appointment
Reason for appointment

You may call to request a ride, you can also have someone else call for you:

- A Community Health Worker
- A parent, foster parent or adoptive parent
- Providers that you have given permission to request a ride for you.

You or your representative may schedule:

- Same day rides
- Rides up to 90 days ahead of time
- Multiple rides for recurring appointment up to 90 days ahead of time

We will also have a few questions. This helps us identify the supports needed for your trip:

• Do you use a walker, cane or wheelchair?

- Are there any specific needs you will have for this ride?
- Is a helper coming with you? If so, what kind of support do they provide?
- If the ride cannot be set up during the first call, we will contact you to let you know the details
 - What is the best way (phone, email, fax) and time of day to contact you?

After we decide the best type of vehicle for your ride, we will schedule the ride and confirm the details with you at the time of your call, or at least 2 days before your ride:

- The name of the Driver or Provider
- Phone number of Transport Provider
- The scheduled date and time of pick up
- The address of pick up
- Time you should be ready
- What type of vehicle

If the ride is requested less than 2 days before the pick-up time, we will provide you with our phone number, and we may be able to tell you the name and phone number of your NEMT driver or NEMT provider.

What We Need to Know

- If you will have a helper with you
- Parents or guardians must provide an attendant who is 18 years or older to ride with members age 12 and under
- Parents and guardians must provide an attendant to ride with members with special physical or developmental needs no matter their age.
- If you have a mobility aid (wheelchair, walker, or cane)
 - If you have a wheelchair is it more than 30 inches wide
 - Is it more than 48 inches long
 - Is it more than 600 pounds when occupied
- If you have a scooter
- If you have a portable oxygen tank
- If you have a service animal
- If you need any other special equipment
- If you have a health issue that changes your needs
- If you need a secured ride
- The best way to reach you (email, phone, fax) to confirm rides and tell you about changes to your schedule

Your needs will be saved in your member file with NEMT. This is to make sure you get the best ride for your needs.



- We provide rides based on specific needs of the member. EOCCO may approve exceptions to this rule in some cases
- You will need a note from your doctor if you need to travel 75 miles or more beyond the Oregon border for services

Special Conditions

When you schedule a ride, you might have a special condition that we should know about to make changes to your ride.

- If you have a behavioral health disability or physical health needs
- If you have challenges walking safely
- If your ability to make decisions is compromised
- Discuss the reason to make changes to your ride with us
- We can explore options to meet your needs
- We want to plan for health and safety concerns

We may discuss these changes with your care team or your care coordinator or CCO. You can also tell us any other person you want us to talk to.

Once the changes are in place, we will notify you and anyone involved in the changes in writing.

Secure medical transportation is required if you are in danger of harming yourself or others, according to OAR 410-141-3940:

- 1 extra attendant can go with you at no charge when appropriate. Attendants can be a parent, legal guardian, or escort. Examples of reasons for an attendant include:
 - To give you medication
 - To meet legal requirements
 - Other reasons when needed

Types of Rides

Your NEMT provider schedules the best ride to meet your needs by asking you questions when you schedule your ride.

Rides are provided in a way to keep you and the drivers safe. Your answers will help determine which type of ride will fit you best.

Here are some service providers you may encounter:

- Public transportation services
 - You must arrange local public transportation
- Private non-profit transportation services
- Public transportation that might be a shared ride
- For profit transportation services
- Volunteer drivers

Vehicle Types Can Include

- Help with the cost for you (or someone else) to drive to your appointment
- Wheelchair van
- Stretcher van
- Bus/Shuttle pass
- Car, SUV, Van
- Ambulance
- Other types, as necessary

There may be schedule changes. Heavy traffic may result in drivers running more than 15 minutes late. We will do our best to re-assign the ride or trip as quickly as possible.

Safety Belts/Seat Belts

Riders must follow all state, and federal laws regarding safety belt use. This means all riders must wear seat belts at all times while the vehicle is moving.

Riders using wheelchairs must use the lap and shoulder belt. If you refuse to wear the safety belt, your driver may decline to provide the ride.

If you need a safety belt extension, let us know when scheduling your ride.

Seat belt exemption cards must be shown to the driver before every ride.

Personal Care Attendant (Attendant)

If you need an attendant, EOCCO will make sure they meet all standards. This applies if you have special needs, regardless of age.

- EOCCO does not supply an attendant for you
- There is no charge for bringing an attendant
- An attendant may be any adult 18 years and older that is approved by the guardian
- An attendant may be a parent, legal guardian, or escort

• If adult (18+) members have a legal guardian, the guardian must approve of the attendant



Children

There is no charge for an adult attendant.

- An adult attendant must be with children age 12 and under. An attendant may be the member's mother, father, stepmother, stepfather, grandparent, or guardian. The attendant may also be any adult 18 years or older authorized by the member's parent or guardian.
- The child's parent or legal guardian must approve in writing the child's adult attendant.
- Children 13 and older may have an attendant travel with them for free.
- Drivers do not install car seats or booster seats. Car seats and booster seats are required for a person who:
 - Weighs less than 40 pounds and who is shorter than 4 feet 9 inches;
 - Is under two and must use a rear-facing child safety seat; and
 - Weighs more than 40 pounds and who is shorter than 4 feet 9 inches, unless the child is secured with a car/booster seat that meets the minimum standards established under ORS 815.055 (the rules establishing standards for safety belts, harnesses, and child safety systems)
- The child's attendant is responsible for this. A driver is not allowed to provide a ride if safety or booster seats are not provided or do not meet legal requirements.

Service Animals

- Service animals are allowed on rides.
- Let us know ahead of time if you plan to bring a service animal.

Travel Costs

We can pay for rides by someone other than you. If the rider is under 18, we can pay for someone who is not their guardian. If someone other than you or

a minor member's parent/guardian provides a ride, that person can be paid. EOCCO does not arrange for this ride.

• Please call us at 877-875-4657 or TTY/Oregon Relay 711 before your scheduled appointment for details on how to get mileage cost help.

At times, we can help with mileage, meals, and lodging. <u>You should ask for</u> <u>this ahead of time if:</u>

- You are required to begin travel before 6AM and
- You are traveling from an appointment after 9PM or
- Your healthcare provider has documented a medical need requiring lodging
- Additional circumstances upon EOCCO approval
- We can also help with meals, which you must ask for ahead of time unless you are traveling for more than 4 hours round trip.

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We can also help with mileage, meals, and lodging costs for 1 attendant to ride with you for any of these reasons:

- The rider/member is a minor child and cannot travel without an attendant
- Your medical provider signs a statement showing the need for you to ride with an attendant
- You are unable to reach your appointment without help for medical reasons
- You would be unable to return home without help after your appointment
- Additional circumstances upon EOCCO approval

Please keep all receipts, as we will need them to repay you. You will need to fill out a repayments form and have the staff at the medical clinic you visit sign it.

- You have up to 45 days to give us the form and receipt
- We will review your form and receipt
- We will send you a check within 14 days once approved
- We will contact you if your request needs more information
 We have 14 extra days to help you finish an incomplete request.
- We may hold your payment until your repayment amount reaches \$10

If your reimbursement request is denied for any reason:

- We will give you a Notice of Adverse Benefit Determination (NOABD)
- This will be sent to you within 14 days.

The current payment rates are:

- \$0.46 cents per mile
- Up to \$34.00 a day for meals for you and up to an additional \$34.00 for your attendant's meals
 - Breakfast (travel before 6AM): \$9.00
 - Lunch (travel must span 11:30AM through 1:30PM): \$10.00
 - Dinner (travel ends after 6:30PM): \$15.00
- \$110.00 per night for client lodging
- \$110.00 per night for attendant lodging

If EOCCO over pays, we may recover those funds. This can happen when EOCCO pays you:

- For mileage, meals, and lodging:
 - When another resource also paid you or
 - Paid for the ride, meal, or lodging provider directly
- When you did not use the money for that purpose, If you did not attend the appointment, or if you shared the ride with another EOCCO member who was paid
- For public transportation passes, and you sold or transferred them to another person

Cancellations

No-shows and canceled rides can result in providers refusing to take your trip:

- If you cancel your trip(s) frequently
- If you cancel at the door when the driver arrives
- If you are not home to take the ride

Ride Modifications

The types of rides available to you may change if:

- You have a health condition that can affect the health and/or safety of the driver or other riders
- You travel with an attendant
- You may use public transportation
- You drive or have someone drive you and receive mileage reimbursement
- You use a specific transportation provider
- You threaten to harm the driver or other riders

- You act in a way that may cause providers to refuse to see you, unless the problem could be avoided with changes to your type of ride
- You have frequent no-shows or cancellations
- We will notify you the day of or the day before your ride if there are any changes
- You will get a written response if there are any changes to your service

Bad Weather

We will stay open during bad weather if:

- We have special equipment
- It is safe to travel

Examples of bad weather are very hot or cold, flooding, tornado warnings, heavy snowfall, icy roads, etc.

Some rides may need to be canceled due to bad weather, dangerous or closed roads.

We will continue to provide rides for critical care needs such as renal dialysis and chemotherapy

Infection / Disease

In times of health risk, infection or disease we may ask you more questions about your health. We may require riders to wear safety gear (gloves, mask, etc.) during transport. If asked, this equipment will be required.

If a member has a health issue that could affect the driver or others their ride may be changed. We will let you know if this is the case (OAR 410-141-3955).

Denial of Rides

We may deny a request for a ride based on program rules. If we do, we will call you and give you denial information over the phone.

All denials are also reviewed by a manager.

Then we will mail you a denial letter. It is also called a Notice of Adverse Benefit Determination (NOABD). We will send it within 72 hours of the denial. We will mail the letter to:

- You and your network provider if they requested your ride; and
- The letter will explain the rules and the reason for the denial.

Complaints, Appeals and Fair Hearings

EOCCO makes sure all members have access to a grievance system (complaints, appeals and hearings). We try to make it easy for members, representatives, and providers to file a complaint or appeal and get info on how to file a hearing with the Oregon Health Authority. This is your right.

Let us know if you need help with any part of the complaint, appeal, and/or hearings process. We can also give you more information about how we handle complaints and appeals. Copies of our notice template are also available. If you need help or would like more information beyond what is in the rider guide contact us at:

> EOCCO Customer Service 888-788-9821 TTY/Oregon Relay 711 Hours: Monday-Friday, 7:30 a.m. to 5:30 p.m. Pacific Time Unit 601 SW Second Ave. Portland, OR 97204 Fax: 503-412-4003

Get information in another language or format.

You or your representative can get member materials like this ride guide in other languages, large print, Braille or any format you prefer. You will get materials within 5 days of your request. This help is free. Every format has the same information.

You can make a complaint, also called a grievance

If you are not happy with EOCCO, NEMT services, your healthcare services, or your provider, you can complain or file a grievance. You have a right to make a complaint if you are not satisfied with any part of your care. We will try to make things better. Just call EOCCO Customer Service at 888-788-9821 (TTY/Oregon Relay 711), or:

Write:

EOCCO Attn: Appeal Unit Unit 601 SW Second Ave. Portland, OR 97204 Fax: 503-412-4003 You may also find a complaint form here:

- English: www.eocco.com/-/media/ EOCCO/PDFs/complaint_form.pdf
- Spanish: www.eocco.com/-/media/ EOCCO/PDFs/Member/Resources/ complaint_formSpanish.pdf

You can file a complaint about any matter other than a notice of denial (NOABD) and at any time orally or in writing.

Examples of reasons you may file a complaint or grievance are:

- Problems making appointments or getting a ride
- Problems finding a provider near where you live
- Not feeling respected or understood by providers, provider staff, drivers or EOCCO
- Care you were not sure about, but got anyway
- Bills for services you did not agree to pay
- Disputes on EOCCO extension proposals to make approval decisions
- Driver or vehicle safety
- Quality of the service you received
- Problems getting services you want or need
- Problems about your rights

A representative or your provider may make (file) a complaint on your behalf, with your written permission to do so.

We will look into your complaint and let you know what can be done as quickly as your health requires. This will be done within 5 business days from the day we got your complaint.

If we need more time, we will send you a letter within 5 business days. We will tell you why we need more time. We will only ask for more time if it's in your best interest. All letters will be written in your preferred language. We will send you a letter within 30 days of when we got the complaint explaining how we will address it.

If you are unhappy with how we handled your complaint or grievance, you can share that with the Oregon Health Authority's Client Services Unit at 800-273-0557 or please reach out to the OHA Ombuds Program. The Ombuds are advocates for OHP members and they will do their best to help you. Please email OHA.OmbudsOffice@dhsoha.state.or.us or leave a message at 877-642-0450.

Another resource for support and services in your community is 211 Info. Call 2-1-1 or go to the 211 Info website for help.

EOCCO, its contractors, subcontractors, and participating providers cannot:

- Stop a member from using any part of the grievance and appeal system process or take punitive action against a provider who ask for an expedited result or supports a member's appeal.
- Encourage the withdrawal of a grievance, appeal, or hearing already filed; or
- Use the filing or result of a grievance, appeal, or hearing as a reason to react against a member or to request member disenrollment.

If you are unhappy, you may also submit the same grievance to both EOCCO and GOBHI NEMT.

You can ask us to change a decision we made.

This is called an appeal.

If we deny, stop, or reduce a medical, dental or behavioral health service, we will send you a denial letter that tells you about our decision. This denial letter is also called a Notice of Adverse Benefit Determination (NOABD). We will also let your provider know about our decision.

If you disagree with our decision, you have the right to ask us to change it. This is called an appeal because you are appealing our decision.

Follow these steps if you do not agree with our decision:

Step 1	Ask for an appeal. You must ask within 60 days of the date of the denial letter (NOABD).
	Call us at 888-788-9821 (TTY/Oregon Relay 711) or use the Request to Review a Health Care Decision form. The form was sent with the denial letter. You can also get it at https://bit.ly/request2review.
	You can also fax the form to 503-412-4003.
	EOCCO can also help you write your appeal.
	Who can ask for an appeal?

 Step 2 Wait for our reply. Once we get your request, we will look at the original decision. A new doctor will look at your medical records and the service request to see if we followed the rules correctly. You can give us any more information you think would help us review the decision. How long do you get to review my appeal? We have 16 days to review your request and reply. If we need more time, we will send you a letter. We have up to 14 more days to reply. What if I need a faster reply? You can ask for a fast appeal. This is also called an expedited appeal. Call us or fax the request form. The form was sent with the denial letter. You can also get it at https://bit.ly/request2review. Ask for a fast appeal if waiting for the regular appeal could put your life, health or ability to function in danger. We will call you and send you a letter, within 1 business day, to let you know we have received your request for a fast appeal. How long does a fast appeal take? If you get a fast appeal, we will make our decision as quickly as your health requires, no more than 72 hours from when the fast appeal request was received. We will do our best to reach you and your provider by phone to let you know our decision. You will also get a letter. 		 You or someone with written permission to speak for you. That could be your doctor or an authorized representative. To help your appeal, you have the right to: In person or in writing: Share information and testimony Give legal and fact-based arguments Within the appeal timeline
	Step 2	Once we get your request, we will look at the original decision. A new doctor will look at your medical records and the service request to see if we followed the rules correctly. You can give us any more information you think would help us review the decision. How long do you get to review my appeal? We have 16 days to review your request and reply. If we need more time, we will send you a letter. We have up to 14 more days to reply. What if I need a faster reply? You can ask for a fast appeal. This is also called an expedited appeal. Call us or fax the request form. The form was sent with the denial letter. You can also get it at https://bit.ly/request2review. Ask for a fast appeal if waiting for the regular appeal could put your life, health or ability to function in danger. We will call you and send you a letter, within 1 business day, to let you know we have received your request for a fast appeal. How long does a fast appeal take? If you get a fast appeal, we will make our decision as quickly as your health requires, no more than 72 hours from when the fast appeal request was received. We will do our best to reach you and your provider by phone to let you know our decision. You will also

	At your request or if we need more time, we may extend the timeframe for up to 14 days. If a fast appeal is denied or more time is needed, we will call you and you will reacive written notice within 2 days.
	and you will receive written notice within 2 days. A denied fast appeal request will become a standard appeal and needs to be resolved in 16 days or possibly be extended 14 more days.
Step 3	 Read our decision. We will send you a letter with our appeal decision. This appeal decision letter is also called a Notice of Appeal Resolution (NOAR). If you agree with the decision, you do not have to do anything.
	Still don't agree? Ask for a hearing. If we took too long or our appeal decision is harmful to you, it is your right to ask the state to review the appeal decision. This is called asking for a hearing. It is your right to ask for a hearing. You must ask for a hearing within 120 days of the date of the appeal decision letter (NOAR).
	What if I need a faster hearing? You can ask for a fast hearing. This is also called an expedited hearing.
	To ask for a normal hearing or a faster hearing, call the state at 800-273-0557 (TTY/Oregon Relay 711) or use the request form that was sent with the letter. Get the form at https://bit.ly/request2review. You can send the form to: OHA Medical Hearings 500 Summer St NE E49 Salem, OR 97301 Fax: 503-945-6035
	The state will decide if you can have a fast hearing 2 working days after getting your request.

Who can ask for a hearing?

You or someone with permission to speak for you. That could be your doctor or an authorized representative. They don't need permission in writing.

What happens at a hearing?

At the hearing, you can tell the Oregon Administrative Law judge why you do not agree with our decision about your appeal. The judge will make the final decision.

Questions and answers about appeals and hearings:

What if I don't get a denial letter? Can I still ask for an appeal?

You have to get a denial letter before you can ask for an appeal.

If your provider says that you cannot have a service or that you will have to pay for a service, you can ask us for a denial letter (NOABD). Once you have the denial letter, you can ask for an appeal.

What if EOCCO doesn't meet the appeal timeline?

If we take longer than 30 days to reply, you can ask the state for a review. This is called a hearing. To ask for a hearing, call the state at 800-273-0557 (TTY/Oregon Relay 711) or use the request form that was sent with the denial letter (NOABD). Get the form at https://bit.ly/request2review.

Can someone else represent me or help me in a hearing?

You have the right to have another person of your choosing represent you in the hearing. This could be anyone, like a friend, family member, lawyer, or your provider. You also have the right to represent yourself if you choose. If you hire a lawyer, you must pay their fees.

For advice and possible no-cost representation, call the Public Benefits Hotline at 800-520-5292; TTY/Oregon Relay 711. The hotline is a partnership between Legal Aid of Oregon and the Oregon Law Center. Information about free legal help can also be found at OregonLawHelp.com

Can I still get the benefit or service while I'm waiting for an appeal or hearing decision?

If you have been getting the benefit or service that was reduced or denied and we stopped providing it, you can ask us to continue it. This is your right to ask.

You need to:

- Ask for this within 10 days of the date of the denial letter (NOABD) or by the date this decision is effective, whichever is later.
- Use the Request to Review a Health Care Decision form. The form was sent with the letter. You can also get it at https://bit.ly/request2review.
- Answer "yes" to the question about continuing services on box 8 on page 4 on the Request to Review a Health Care Decision form.

Do I have to pay for the continued service?

If you choose to still get the denied benefit or service, you may have to pay for it. If we change our decision during the appeal, or if the judge agrees with you at the hearing, you will not have to pay.

If we change our decision and you were not receiving the service or benefit, we will approve or provide the service or benefit as quickly as your health requires. We will take no more than 72 hours from the day we get notice that our decision was reversed.

What if I also have Medicare? Do I have more appeal rights?

If you have both EOCCO and Medicare, you may have more appeal rights than those listed above. Call Customer Service at 888-788-9821 (TTY/Oregon Relay 711) for more information. You can also call Medicare at 800-633-4227 to find out more on your appeal rights.



Need help with our Grievance and Appeal System?

Contact EOCCO Customer Service at 888-788-9821 or TTY/Oregon Relay 711 for more info about our Grievance and Appeal System and related:

- Policies and Procedures
- Notice Letters
- Forms

Frequently Asked Questions

When do I call for a ride?

- It is best to book a ride ahead of time.
- Call us 2 or more working days before your appointment.
- You can schedule a ride up to 90 days in advance.
- Repeat appointments (dialysis, therapy) can be set up 6 months at a time

What if I need a same day ride?

- For short notice same day rides, call right away.
- For immediate ride need, call right away
- We will make every effort to get you a ride

How do I schedule a ride?

• Call the Free Ride Program 877-875-4657

How do I cancel a ride request?

- Call the Free Ride Program and speak with a Call Taker.
- The earlier you tell the program of a canceled ride, the better

What if I need ambulance transportation?

- If you have an **emergency, call 9-1-1**. We do not offer emergent rides.
- Ambulance rides can be arranged.
- Secure transport can also be arranged

Things to know for my trip

• Drivers will make their presence known once they arrive, and will wait at least 15 minutes

- There is a 30-minute scheduled window to pick you up
- If your driver arrives after your scheduled pickup time, the driver is considered late
- You do not need to board the vehicle before your pick up time
- Your pick up time allows for enough travel time to get you there on time to check-in and prepare for your appointment
- You do not have to arrive at your appointment more than 1 hour before your appointment time
- You will not have to wait more than 15 minutes for pickup
- You will be dropped off at the time you need, and at least 15 minutes before your appointment time
- You may be dropped off more than 15 minutes before a building opens if you or your guardian, representative, or parent requests it
- No pick up more than 15 minutes after a building closes unless the appointment is not going to end within 15 minutes of closing, or you or your guardian, or parent, or representative make a request
- All appointments have pre-arranged times for pick up
- If an appointment goes long or did not have an end pick up you can call and be picked up within the hour
- The driver will wait at least 15 minutes past the pick-up time. The driver must call dispatch prior to leaving
- Drivers will drop you off 15 minutes or more before your appointment time to avoid a late drop off

Backup Plans

We will arrange for another driver, another company, or public transportation vehicles if:

- The driver is more than 15 minutes late
- The type of ride you need is not available

NEMT Driver and Vehicle Standards

All drivers will have a valid Driver License. They will also complete the prehire process, screenings, and background checks. They will receive safety training before they can drive.

You can expect the vehicle:

- To be clean and free of debris
- To be smoke, aerosolizer, and vaporizer free
- To be serviced and inspected annually
- To have a first aid kit

- To have a fire extinguisher
- To have seatbelts for all riders
- To have roadside reflective or warning devices
- To have a flashlight
- To have tire traction devices when appropriate
- To have disposable gloves
- To have a hands-free mobile phone or tablet
- To have all items needed to transport members with wheelchairs or stretchers
- To meet all local licensing and permit requirements
- To be in good working condition, and to have:
 - Side and rear view mirrors
 - A horn
 - Heating and air conditioning
 - Working turn signals, headlights, tail lights, and windshield wipers