NEMT Behavior Contract

Date:

Member’s full name
Member’s mailing address

Dear

Please read the following behavior contract completely prior to signing and returning to your local transportation provider.

The purpose of this contract is to ensure that you are utilizing the Medicaid Non-Emergency Medical Transportation (NEMT) benefit correctly and in a safe manner. NEMT is a statewide service for providing transportation for eligible people to and from necessary, non-emergency medical services. NEMT is provided through Personal Service Contracts between Vermont Public Transportation Association (VPTA) and local public transit providers (brokers).

Under the Medicaid NEMT program, our staff must verify information about a member’s request for transportation. This information includes verifying a member’s Medicaid eligibility, verifying that the trip is to a medical service or appointment and verify that the service or appointment is provided by a health care practitioner enrolled as a Medicaid provider. We may contact the provider to verify that the appointment is scheduled for the dates and times requested by the client. Once this information is obtained, we are required to coordinate all requests and ensure the least costly mode of transportation is being utilized. We may deliver a client to an appointment up to one hour before their scheduled appointment start time, and we may pick-up a client up to one hour after their appointment has ended. It is our responsibility to ensure all clients and staff are treated with respect and are free from physical, verbal or emotional harm.

As a NEMT program member you must comply with the following terms and conditions in order to receive transportation services:

- Rides are only available for members who are currently active on Medicaid and have no other way to get to their appointments (family, friends or public transportation).
- Rides are for Medicaid-billable medical/behavioral health appointments, VCCI case manager appointments, Blueprint-sponsored self-management courses and/or pharmacy trips only.
- You must call to schedule your ride two business days in advance. You are responsible for scheduling your own rides, and are not allowed to schedule rides for other members.
- You must have the following information available before calling to schedule a ride:
  - Your doctor’s name and address
  - Time of your appointment
● How long you think the appointment will last

Please keep in mind that we may not be able to make changes to the time and or destinations with less than 2 business days notice. Please make sure you call your transportation provider as soon as possible if there are any changes to your appointment.

● You must show up and be on time for all scheduled rides.

● You may only get on and off the vehicle where your scheduled destination permits. You may not leave the vehicle at another member’s stop.

● If a provider is located more than 60 miles away from your home address, the referring provider will need to submit a transportation Physician Referral Form directly to DVHA for prior approval. This request must be sent with as much advance notice as possible so the transportation provider can schedule your ride.

● Absolutely no additional riders are allowed (including children) unless pre-approved by DVHA.

● You are expected to act in a respectful and safe manner in accordance with your local transportation provider’s code of conduct to ensure safe and reliable transportation for all members.

● You must refrain from using hostile, threatening, antagonizing, vulgar, or otherwise offensive language/behavior towards, drivers, provider staff and other members.

● At no point in time are you allowed to bring weapons or illegal substances aboard.

● You may not distract the driver in any way.

● Any stop to use the restroom while in route will be limited to emergencies only. Only the member requesting an emergency restroom break may exit the vehicle and are prohibited from deviating to other facilities.

● You may report any complaints to VPTA at 833-387-7200 or info@vptaride.org

Failure to comply with any of the above conditions will jeopardize a member’s ability to utilize NEMT services.

By signing this document, I understand that I am agreeing to the terms and conditions of the behavior contract. I accept that by violating the terms and conditions of this document, I will be held responsible for my behavior and actions and that I will jeopardize my ability to receive rides in the future. Any action or violation to the terms and conditions of this contract will result in a suspension of your transportation privileges.

Please sign and return this document within business 15 days ____________.

Member’s Full Name: ______________________________________________________________

Member’s Signature: ______________________________________________________________

Date: __________________________________________________________________________

Please return to your local transportation provider or VPTA @ 160 Benmont Avenue Suite 11, Bennington, VT 05201