



# UMPQUA HEALTH ALLIANCE

## 2025 RIDER'S GUIDE

Non-Emergent Medical Transportation

Powered by



**BAY CITIES BROKERAGE**



## UHA's nondiscrimination policy

Discrimination is against the law. UHA must follow state and federal civil rights laws. We cannot treat people (members or potential members) unfairly in any of our programs or activities because of a person's:

- Age
- Color
- Disability
- National origin, primary language, and proficiency of English language
- Race
- Religion
- Sex, sex characteristics, sexual orientation, gender identity, and sex stereotype
- Pregnancy and related conditions
- Health status or need for services

If you feel you were treated unfairly for any of the above reasons, you can make a complaint. This is also called filing a grievance.

To make (or file) a complaint with UHA, you can contact the following:

UHA's Appeals and Grievances Coordinator (Section 1557 coordinator) or Customer Care:

- Phone: 541-229-4842; Toll Free: 866-672-1551; TTY: 541-440-6304 or 711
- Hours: Monday to Friday, 8 a.m. - 5 p.m.
- Fax: 541-677-5881
- Mail: Umpqua Health Alliance  
3031 NE Stephens St  
Roseburg, OR 97470
- Website : [www.umpquahealth.com/appeals-and-grievances/](http://www.umpquahealth.com/appeals-and-grievances/)
- Complaint Form: <https://www.umpquahealth.com/wp-content/uploads/2020/07/oha-complaint-form.pdf>
- Email: [UHAGrievance@umpquahealth.com](mailto:UHAGrievance@umpquahealth.com)

You can read our complaint process at [www.umpquahealth.com/appeals-and-grievances](http://www.umpquahealth.com/appeals-and-grievances)

If you have a disability, UHA has these types of free help:

- Qualified sign language interpreters
- Written information in large print, audio, or other formats
- Other reasonable modifications

If you need language help, UHA has these types of free help:

- Qualified interpreters
- Written information in other languages

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**UHA Customer Care:** Toll Free 866-672-1551 | TTY 711

[www.umpquahealth.com](http://www.umpquahealth.com)

**BCB Customer Service:** Toll Free 877-324-8109 | TTY 711

[bca-ride.com](http://bca-ride.com)



Need help filing a complaint? Need language help or reasonable modifications? Call Customer Care at 541-229-4842, TTY 541-440-6304 or TTY 711. You can ask to speak with a peer wellness specialist or personal health navigator.

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

#### **Oregon Health Authority (OHA) Civil Rights**

- Website: [www.oregon.gov/OHA/EI](http://www.oregon.gov/OHA/EI)
- Phone: 844-882-7889, 711 TTY
- Email: [oha.ouubliccivilrights@odhsoha.oregon.gov](mailto:oha.ouubliccivilrights@odhsoha.oregon.gov)
- Mail: Office of Equity and Inclusion Division  
421 SW Oak St., Suite 750  
Portland, OR 97204

#### **Bureau of Labor and Industries Civil Rights Division**

- Website: [www.oregon.gov/boli/civil-rights](http://www.oregon.gov/boli/civil-rights)
- Phone: 971-673-0764
- Email: [BOLI\\_help@boli.oregon.gov](mailto:BOLI_help@boli.oregon.gov)
- Mail: Bureau of Labor and Industries Civil Rights Division  
800 NE Oregon St., Suite 1045  
Portland, OR 97232

#### **U.S. Department of Health and Human Services Office for Civil Rights (OCR)**

- Website: [ocrportal.hhs.gov/ocr/smartscreen/main.jsf](http://ocrportal.hhs.gov/ocr/smartscreen/main.jsf)
- Phone: 800-368-1019, 800-537-7697 (TDD)
- Email: [OCRComplaint@hhs.gov](mailto:OCRComplaint@hhs.gov)
- Mail: Office for Civil Rights,  
200 Independence Ave. SW, Room 509F, HHH Bldg.,  
Washington, DC 20201

## **You can have an interpreter.**

You, your representative, family members and caregivers can ask for a certified and qualified health care interpreter. You can also ask for sign language and written interpreters or auxiliary aids and services. These services are free.

Your use of benefits, complaints, appeals, or hearings will not be denied or limited based on your need for another language or format.

Tell your provider's office if you need an interpreter at your visit. Tell them what language or format you need. Learn more about certified Health Care Interpreters at [Oregon.gov/OHA/EI](http://Oregon.gov/OHA/EI).

If you need help, please call us at 541-229-4842, TTY 541-440-6304 or TTY 711 or call OHP Client Services at 800-273-0557 (TTY 711).

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**UHA Customer Care:** Toll Free 866-672-1551 | TTY 711

[www.umpquahealth.com](http://www.umpquahealth.com)

**BCB Customer Service:** Toll Free 877-324-8109 | TTY 711

[bca-ride.com](http://bca-ride.com)



If you do not get the interpreter help you need from UHA, call the state's Language Access Services Program coordinator at 844-882-7889, TTY 711 or email:

[LanguageAccess.Info@odhsoha.oregon.gov](mailto:LanguageAccess.Info@odhsoha.oregon.gov).

## English

You can get this handbook in other languages, large print, Braille or a format you prefer. You can also ask for an interpreter. This help is free. Call 541-229-4842 or TTY 541-440-6304. We accept relay calls.

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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 541-229-4842 o TTY 541-440-6304. Aceptamos todas las llamadas de retransmisión.

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

## Russian

Вы можете получить это документ 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. 541-229-4842 или ТТУ 541-440-6304. 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 541-229-4842 hoặc TTY (Đường dây Dành cho Người Khiếm thính hoặc Khuyết tật về Phát âm) 541-440-6304. Chúng tôi chấp nhận các cuộc gọi chuyển tiếp.

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

### Arabic

يمكنكم الحصول على هذا وثيقة بلغات أخرى، أو مطبوعة بخط كبير، أو مطبوعة على طريقة برايل أو حسب الصيغة المفضلة لديكم. كما يمكنكم طلب مترجم شفهي. إن هذه المساعدة . أو المبرقة الكاتبة 541-440-6304 TTY , مجانية. اتصلو على 541-229-4842 .  
نستقبل المكالمات المحولة

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يمكنكم الحصول على المساعدة من مترجم معتمد ومؤهل في مجال الرعاية 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 541-229-4842 ama TTY 541-440-6304. 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 541-229-4842 或 TTY 541-440-6304。我们会接听所有的转接来电。

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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

您可獲得本信息函的其他語言版本、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 541-229-4842 或聽障專線 541-440-6304。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

이문서는 다른 언어, 큰 활자, 점자 또는 선호하는 형식으로 받아보실 수 있습니다. 통역사를 요청하실 수도 있습니다. 무료 지원해 드립니다. 541-229-4842 또는 TTY 541-440-6304 에 전화하십시오. 저희는 중계 전화를 받습니다.

-

공인 및 자격을 갖춘 의료서비스 전문 통역사의 도움을 받으실 수 있습니다.

### 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. Kokori 541-229-4842 ika TTY 541-440-6304. Kich mi etiwa ekkewe keken relay.

-

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



## Ukrainian

Ви можете отримати цей довідник іншими мовами, крупним шрифтом, шрифтом Брайля або у форматі, якому ви надаєте перевагу. Ви також можете попросити надати послуги перекладача. Ця допомога є безкоштовною. Дзвоніть по номеру телефону 541-229-4842 або телетайпу 541-440-6304. Ми приймаємо всі дзвінки, які на нас переводять.

-

Ви можете отримати допомогу від сертифікованого та кваліфікованого медичного перекладача.

## Farsi

می‌توانید این نامه را به زبان‌های دیگر، درشت‌خط، بریل یا قالب ترجیحی دیگری دریافت کنید. 541-229-4842 می‌توانید مترجم شفاهی نیز درخواست کنید. این کمک رایگان است. با تماس بگیرید. تماس‌های رله را می‌پذیریم. 541-440-6304 یا 541-229-4842

-

می‌توانید از یک مترجم شفاهی دارای گواهی و باکفایت در زمینه بهداشت و

## Swahili

Unaweza kupata herufi hii kwa lugha zingine, kwa herufi kubwa, kwa lugha ya maandishi kwa vipofu au namna yeyote unayopendelea. Unaweza pia kuomba mkalimani. Msaada huu ni wa bure. Piga 541-229-4842 au TTY 541-440-6304. Tunakubali simu za kupitisha ujumbe.

-

Unaweza pata usaidizi kutoka kwa mkalimani wa huduma ya afya aliyeidhinishwa na aliyehitimu.

## Burmese

ဤစာကို အချားဘာသာစကားမ်း၊ ပုံစံမတူလုံးဟုန်း၊ မ်ကျမင်းအကြံကို  
ဘေးလုံ သို့မဟုတ် သင့်မြို့စုကည့် ပုံစံပူဖုံ ရယူနိုင်ပါသည်။ သင့်ည  
စကားပူပန်စဉ်းလည့် တောင့်ဆိုင်ပါသည်။ ဤအကူအညီသည်

အခမဲ့ ဖုန်းနံပါတ် 541-229-4842 သို့မဟုတ် 541-440-6304 ကို ဖုန်းဆက်၍ ထည့်သွင်းဆုတ်ခွင့်ပေးပေးရန် ကြိုးပမ်းပါသည်။

- သင့်သို့ သင့်ဆုံးမချက်များကို အသေးစိတ် ပြောပြပါမည်။ ကံနည်းမာရ်း စောင့်ကြည့်ပါ။ စကားပြောမှုလည်း အကူအညီရယူနိုင်ပါသည်။

### Amharic

ይህንን ደብዳቤ በሌሎች ቋንቋዎች፣ በትልቅ ህትመት፣ በብሬይል ወይም እርስዎ በሚመዘገቡ መልኩ ማግኘት ይቻላል። በተጨማሪም አስተርጓሚ መጠየቅም ይቻላል። ይህ ድጋፍ የሚሰጠው በነጻ ነው። ወደ 541-229-4842 ወይም TTY 541-440-6304 ይደውሉ። የሪሴድ ጥሪዎችን እንቀበላለን።

- ፍቃድ ካለው እና ብቃት ካለው የጤና እንክብካቤ አስተርጓሚ ድጋፍ ማግኘት ይቻላል።

### Romanian

Puteți obține această scrisoare în alte limbi, cu scris cu litere majuscule, în Braille sau într-un format preferat. De asemenea, puteți solicita un interpret. Aceste servicii de asistență sunt gratuite. Sunați la 541-229-4842 sau TTY 541-440-6304. Acceptăm apeluri adaptate persoanelor surdomute.

- Puteți obține ajutor din partea unui interpret de îngrijire medicală certificat și calificat.



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## Welcome!

Umpqua Health Alliance (UHA) works with Bay Cities Brokerage (BCB) to give rides to medical appointments and other medical services. This Rider Guide is to help you understand how Non-Emergent Medical Transportation (NEMT) works. This is so you know when and how to use this service.

You can get this in paper form without charge at any time. We will mail it to you within 5 business days. You can also find this on our website at [www.umpquahealth.com/get-a-ride/](http://www.umpquahealth.com/get-a-ride/). We can provide the Rider Guide in other formats or languages. Every format has the same information. For example, you can get an audio version or digital version sent by email. You must approve getting it electronically before UHA can send it. To request a Rider Guide, please contact UHA Customer Care at 541-229-4842 (TTY 711) or TTY 541-440-6304 or email [UHCustomerCare@umpquahealth.com](mailto:UHCustomerCare@umpquahealth.com).

## UHA Customer Care Location and Hours of Operation

UHA's office is open Monday through Friday, 8:00 a.m. to 5:00 p.m.

Office location and mailing address	Contact information
Umpqua Health Alliance 3031 NE Stephens St Roseburg, OR 97470	Phone numbers: 541-229-4842, TTY 541-440-6304 or TTY 711, Toll-free: 866-672-1551. We can help you with language access. Fax: 541-677-6038 Email: <a href="mailto:UHCustomerCare@umpquahealth.com">UHCustomerCare@umpquahealth.com</a> Website: <a href="http://www.umpquahealth.com">www.umpquahealth.com</a>

Members may reach a person 24 hours a day, 7 days a week. However, UHA is closed on the following holidays:

- New Year's Day (01/01/25)
- Memorial Day (05/26/25)
- Independence Day (07/04/25)
- Labor Day (09/01/25)
- Veteran's Day (11/11/25)
- Thanksgiving (11/27/25)
- Friday after Thanksgiving (11/28/25)
- Christmas (12/25/25)

## BCB Customer Service Location and Hours of Operation

BCB's office is open Monday through Friday, 8:00 a.m. to 5:00 p.m.

**UHA Customer Care:** Toll Free 866-672-1551 | TTY 711

[www.umpquahealth.com](http://www.umpquahealth.com)

**BCB Customer Service:** Toll Free 877-324-8109 | TTY 711

[bca-ride.com](http://bca-ride.com)



Mailing address	Local office and mailing address	Contact information
Bay Cities Brokerage 3505 Ocean Blvd SE Coos Bay, OR 97420	Umpqua Valley Ambulance 1290 NE Cedar St Roseburg, OR 97470	Toll Free: 877-324-8109   TTY 711 Email: <a href="mailto:support@bca-ride.com">support@bca-ride.com</a> Website: <a href="http://bca-ride.com">bca-ride.com</a> Passenger Portal (TripSpark): <a href="http://portal.bca-ride.com/Registration">portal.bca-ride.com/Registration</a>

BCB's call center is closed on the following holidays:

- New Year's Day (01/01/25)
- Memorial Day (05/26/25)
- Independence Day (07/04/25)
- Labor Day (09/01/25)
- Veteran's Day (11/11/25)
- Thanksgiving (11/27/25)
- Christmas (12/25/25)

## Who Can Receive These Rides?

Any UHA member that is currently active can receive rides to and from covered OHP services, including any member eligible for NEMT services under OAR 410-141-3920. You can use this service to even go to the pharmacy to pick-up your medicines. No matter what plan you signed up for when you applied, UHA is responsible for providing your NEMT services at no cost to you. Prior to your ride being scheduled, BCB confirms all the following:

- That you are active on UHA.
- That the ride is for a covered service or is a health-related service.
- That you are eligible for services.
- That the transportation is a covered NEMT service.

## Full Benefit Dual Eligible (FBDE) Members

These members are also able to receive rides through BCB. They will confirm that you are able to get a ride, and that the service is covered through your Medicare plan or Medicaid plan, or directly with your Medicare provider. Rides for FBDE member must be within UHA's service area or can be outside the service area if the covered service or health related service is not available in the service area. These rides are free to FBDE members.

## Veteran and Compact of Free Association (COFA) Dental Program Members

If you are a member of the Veteran Dental Program or COFA Dental Program ("OHP Dental"), UHA only provides dental benefits and free rides to dental appointments.

OHP and UHA do not provide access to physical health or behavioral health services or free rides for these services.

**UHA Customer Care:** Toll Free 866-672-1551 | TTY 711

[www.umpquahealth.com](http://www.umpquahealth.com)

**BCB Customer Service:** Toll Free 877-324-8109 | TTY 711

[bca-ride.com](http://bca-ride.com)



If you have questions regarding coverage and what benefits are available, contact Customer Care at 541-229-4842 (TTY 711) or TTY 541-440-6304.

## Service Hours

BCB's call center is open Monday through Friday, from 8 a.m. to 5 p.m. for routine appointments. Please call them at their Toll-Free number 877-324-8109 to schedule NEMT services. You can also email them at [support@bca-ride.com](mailto:support@bca-ride.com). They have qualified multilingual staff available if you need additional help. There are oral interpretation services available by phone at no cost to members or their representatives. This includes help for hearing and speech impaired. To get this help, call BCB's call center at 877-324-8109.

A member representative can also schedule NEMT. This can be the member's Community Health Worker, foster parent, adoptive parent, or other provider given this authority.

If calling after hours, or for urgent scheduling, there is a 24-hour hotline available. When you call the hotline, there will be an after-hours message in English and Spanish. The message will provide you BCB's regular business hours and their phone number to call. For emergency services, you will be told to call 911. The after-hours line is only available to schedule trips to life sustaining services. You will be given the option to reach a live person or leave a message. If you leave your name and phone number, BCB will respond to your message within the next business day. They will continue to call you until you are reached. Messages are checked every few hours.

BCB's call center may be closed on certain holidays, such as, but not limited to, New Year's Day (01/01/25), Memorial Day (05/26/25), Independence Day (07/04/25), Labor Day (09/01/25), Thanksgiving (11/27/25), and Christmas Day (12/25/25). You can still call BCB for urgent matters when they are closed.

Trips for covered NEMT services are covered and provided 24 hours a day, 365 days a year. In accordance with OAR 410-141-3920, members can schedule:

- Same day service
- Single service up to 90 days in advance
- Multiple services at one time for multiple appointments up to 90 days in advance

After hours, weekends, or holidays may be more difficult to arrange. If you have an appointment during that time, please make sure to contact BCB ahead of time. They will need to arrange a ride for you. You can also schedule 24/7 using the online portal. See page 38 for more information about the portal.

## Types of Rides

BCB will work with you to provide you the best ride to fit your medical needs. The following are ride options available:

- Ticket or Passes for the bus or other mass transit
- Wheelchair Van
- Sedan

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**UHA Customer Care:** Toll Free 866-672-1551 | TTY 711

[www.umpquahealth.com](http://www.umpquahealth.com)

**BCB Customer Service:** Toll Free 877-324-8109 | TTY 711

[bca-ride.com](http://bca-ride.com)



- Secure Transport
- Stretcher Car
- Mileage Refund

They will schedule and assign the trip to an appropriate NEMT provider after approving the ride. If receiving mileage refund or using mass transit, BCB is not responsible for setting up that ride. BCB is a shared ride program. This means that other passengers may be picked up or dropped off along the way. When possible, you may also be asked to schedule multiple appointments on the same day to avoid repeat trips.

## NEMT & Flexible Services

Flexible services, also known as Health-Related Services (HRS), are extra services UHA offers. These services are not covered by OHP but are offered by UHA as an addition to covered benefits. HRS helps improve overall member and community health and well-being. They are support for items or services to help members become or stay healthy. UHA covers rides/transportation to and from community benefits and services that aren't covered under Oregon's Medicaid plan but will improve a person's health. Some rides that may be covered are:

Service	Plan Approval Needed	No Plan Approval Needed
Adult Day Care	✓	
Alcoholics/Narcotics Anonymous Meetings		✓
Community Advisory Council (CAC) Meetings for UHA		✓
Consulate	✓	
Court Appearances <i>Covered for purposes of attending for the Member's own mental health commitment-related proceedings</i>		✓
DHS or ADP Appointment		✓
Wellness Center <i>Includes the YMCA</i>		✓
Food Resource <i>Limited to 2 round trips per month. Includes Grocery Store and Farmer's Market.</i>		✓
Hospital Visitation	✓	
Lamaze Classes (Or similar birthing class)		✓
Nutrition Program for Women, Infants and Children (WIC)		✓

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Self Help Group Meetings <i>Includes Chadwick Club House</i>		✓
Vocational Rehabilitation	✓	
Weight Control Programs	✓	

**The table above is not a full list of flexible services.** If you have questions, please call UHA Customer Care at 541-229-4842 (TTY 711) or TTY 541-440-6304 or BCB Customer Service at 877-324-8109.

## Secure Transports

In accordance with OAR 410-141-3940, secure transport is provided to members who are unable to be transported by any other means due to a mental health crisis. This can be for someone who is in a crisis or at immediate risk of harming themselves or others due to a mental or emotional problem or substance abuse. This type of transportation means that members may need to be restrained during the transport. Secure transports are for transport to a Medicaid facility that is recognized as being able to treat the urgent medical or behavioral health care need of the member in crisis. An attendant may go with the member, at no charge, when medically appropriate such as to give medicine in-route or to satisfy legal requirements that include but aren't limited to, when a parent or legal guardian, or escort is required during the transport.

## Mode of Transport and Level of Service

UHA will make service modifications if you have special conditions or needs, including behavioral health or physical disabilities. A service modification sets special conditions and reasonable restrictions on future rides. If you are put on a service modification, you will receive a letter of explanation. BCB will make all determinations of the mode of ride and the proper level of service in accordance with OAR 141-410-3955. The mode of the ride is the way in which you are driven one place to another. Some types of modes are a wheelchair van or sedan. BCB will review the following about each rider to determine the mode of ride and choose the right NEMT provider:

- Ability to walk, and if they need a walker, cane, or wheelchair.
- Ability to move or be moved. Ability to carry out activities of daily living.
- Need for assistance and if they have an attendant, they meet the attendant requirements.
- Special conditions or needs including physical or behavioral health conditions. This includes health and safety needs.
- Level of service to fit needs (curb-to-curb, door-to-door, or hand-to-hand, or both).

The following may also cause changes to your ride services:

- A member has a health condition that is a direct threat to the driver or others in the vehicle.
- A member threatens harm to the driver or others in the vehicle.
- A member engages in behavior or creates situations that puts the driver or others in the vehicle at risk of harm.
- A member engages in behavior that, in UHA's eyes, causes local medical providers or facilities to refuse to provide covered services to you.

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[bca-ride.com](http://bca-ride.com)



- A member frequently cancels or does not show up for scheduled services on the day they are scheduled.

## Scheduling A Ride

To get a ride with BCB:

- Call Toll-Free: 877-324-8109 to talk directly to a person in BCB Customer Service
- Go to their online portal: [portal.bca-ride.com](https://portal.bca-ride.com)

You can use these contact options to:

- Schedule a ride
- Make changes to a ride
- Check on a ride
- Cancel a ride

BCB prefers NEMT services be scheduled at least 2 business days ahead. However, they may be scheduled up to 90 days ahead of time. They will also schedule same day NEMT trips if needed. You can schedule more than one trip at a time for all your appointments.

Your ride will be approved and scheduled, or denied, within 24 hours of the request. The timeframe can be reduced as needed to make sure that you get to your appointment with enough time to check in and prepare for your appointment. Trips affected by unplanned events require BCB to reassign the ride to another NEMT provider when needed. BCB will make all efforts for members to have access to NEMT services 24 hours a day. BCB is not responsible for scheduling rides when you use public transportation or when you or another person gets mileage reimbursement.

You can contact BCB 24 hours a day, 7 days a week, 365 days a year. For Emergency Room Trips, please call 911. When calling BCB, please be ready to answer the following questions. This is so they can make sure your ride fits your needs:

- Your Name:
- Your UHA ID number:
- Your pick-up address:
- Your phone number:
- Provider and office's name and address:
- Provider and office's phone number:
- Date and time of your appointment:
- Return pick-up time and date after appointment:
- Reason for the appointment:
- Directions to get to your home or appointment:
- Do you use a cane or walker?
- Do you use any devices that help with mobility?
- Do you have any special physical or behavioral health needs?
- Can you get in and out of a car unassisted?

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[bca-ride.com](https://bca-ride.com)



- Do you use a wheelchair? Do you need to use a wheelchair van?

If you are over the age of 18 and have a member representative, they can schedule the ride for you. This can include a Community Health Worker (CHW), foster parent, parent, caretaker, or any other delegated provider. If you want to limit who can schedule rides for you, please let BCB know. They will put in your profile a special password set by you.

UHA sometimes provides rides for services that UHA and OHP do not cover. These are Health Related Services (formerly called flexible services). UHA may pay for times when members need rides to the grocery store, or to groups like Alcoholics Anonymous.

NEMT services are also available outside of UHA's service area if covered services are not available within our service area.

## Ride Status

You will receive information from BCB about your NEMT ride. This will give you information that must, at a minimum, include the name and phone number of the driver or NEMT provider. It also confirms:

- The scheduled pick-up date.
- Scheduled pick-up time.
- The pick-up address; and
- The address of the destination.

If BCB cannot provide this information when you first call, you will receive this information 2 days before your scheduled ride in a way you choose (phone call, email, fax). If the ride requested is less than 2 business days prior to the scheduled pick-up time, BCB may, but is not required to, give you the name and telephone number of the NEMT driver or NEMT provider.

## When to Be Ready

It's very important to make sure you are ready for your appointment. When you schedule your ride, the representative will give you the time when your driver will arrive. The transportation driver may arrive 15 minutes before, or no more than 15 minutes after, your scheduled pick-up time. Please make sure to give yourself enough time when scheduling to allow for this extra time.

If your driver arrives before your scheduled pick-up, you do not have to leave early. You are not required to enter the transportation vehicle until your scheduled pick-up time. If you are not ready when the driver arrives, they will wait 15 minutes past the scheduled pick-up time. The driver may then call BCB dispatch to tell them they are leaving your location to go to their next scheduled pick-up. You will have to reschedule BCB to reschedule. Do NOT call the driver to reschedule.

When scheduling your ride, BCB cannot require you to arrive more than 1 hour before the scheduled appointment. If your driver does not arrive in that timeframe, please call BCB right away. BCB does not allow drivers to change the pre-scheduled pick-up time. Any changes require documented permission from BCB or UHA.

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Once you are done with your appointment, a return trip must be provided without excessive delay. Your driver should arrive at the scheduled pick-up location 15 minutes before, or 15 minutes after that time. For return trips that are not pre-scheduled, once you call BCB to let them know you're ready to be picked up, they will meet you within 1 hour. If they do not pick you up in that timeframe, please call BCB right away.

BCB drivers are not permitted to drop you off more than 15 minutes of the business opening or closing. However, this may be allowed if requested by you, your parent or guardian, or your representative. This may also be allowed if your appointment is not expected to end within 15 minutes of closing.

If you miss your scheduled ride, you **MUST** call BCB. Do **NOT** call the transportation driver to reschedule. If you are not ready when the driver arrives, they will wait 15 minutes. After 15 minutes, the driver may go to their next scheduled pick-up, and you will need to reschedule with BCB. Before the driver leaves, they will call BCB dispatch and let them know they are leaving your location.

## What to Expect from Your Driver

When your transportation driver arrives, they may come to the door of your home or the main entrance to your doctor's office to let you know that they have arrived.

BCB's transportation drivers are there to help you get to your appointments, Hand-to-Hand, Door-to-Door, and Curb-to-Curb. If needed, they can assist you into or out of the vehicle. The driver may also help you into the main entrance to your doctor's office.

**Hand-to-Hand:** Driver assists from inside the home to appointment check-in, ideal for members needing full support.

**Door-to-Door:** Driver helps from home entrance to facility entrance, suited for members needing moderate assistance.

**Curb-to-Curb:** Driver picks up and drops off at the curb, for members who are largely independent.

However, they cannot assist you into the medical rooms or any other areas of the building. If you require further assistance, you may ask the office staff for help. If you have a personal care attendant, they can also help you. For more information about a personal care attendant, please see page 28 of this guide.

The transportation drivers are not allowed to enter your room, except for hospital discharges or stretcher transports.

These drivers do not help transfer you between a bed to a wheelchair or wheelchair to vehicles. Some drivers will not be able to help you up or down stairs if you are in a wheelchair. If you use a wheelchair, please inform BCB when you schedule your ride of any special requirements you may have. This is to ensure that an appropriate driver is scheduled for you.

Drivers are not allowed to ask for or accept cash fares or tips for your ride.

## Cancellations, Rescheduling, or No Shows

If you need to cancel or reschedule your ride, contact BCB as soon as you can. This is so the driver can be notified. Do NOT call the driver directly. BCB will do their best to adjust to any sudden schedule changes.

You can cancel or make changes to your ride by phone or web. These are available 24/7.

If you have a ride scheduled, and do not cancel or reschedule it, it will be marked as a no-show.

If you call BCB to cancel your ride and the driver is on their way, this will also be treated as a no-show.

Many no-shows may end up in BCB refusing rides. It is very important that you make every effort to cancel your ride. Please do this within a reasonable time before the scheduled pick-up. Failure to do so can result in the lack of available rides to other customers.

The following service changes can happen if you keep no showing:

- Limiting the number of rides you can schedule at a time
- Limiting how far ahead you can schedule rides
- Limit you to a specific NEMT provider
- Only allow you to use mileage reimbursement

## Urgent Rides

If you have an emergency, call 911. BCB and UHA cannot arrange emergency ambulance rides. If you need to go to the Urgent Care and be seen right away, urgent rides can be set up if available. If you need an urgent ride, please contact BCB.

## Contingency Plan for Peak & Bad Weather Transportation

If there are delays that could cause you to be more than 15 minutes late for your appointment, your driver will work to plan another way for you to get there. Traffic and weather can affect how long it takes to drive to your appointment. BCB has plans in place to make sure drivers are able to give you a ride. Bad weather may cause rides to be late or limited in what kinds of rides can be scheduled. This weather could be:

- Extreme heat
- Extreme cold
- Flooding
- Tornado warnings
- Heavy snowfall
- Icy roads.

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These conditions might make it unsafe to drive you to your appointment.

When bad weather hits, BCB will keep up with the weather. They will see if it is safe to continue with your ride. BCB will make every effort to make sure you have the right kind of ride for the weather. They will work with you and your provider to change ride plans if the weather is not safe to travel in.

If the drivers are not able to take you because the roads are not safe for travel, BCB will contact you to let you know. When necessary, they will work with another NEMT provider to ensure timely reassignment of the affected trip. If you need critical medical care, you can still receive rides. This includes, but is not limited to, renal dialysis, radiation, and chemotherapy.

## Ride Denials

Some rides may not be covered because UHA has not approved it. For example: You want to go to a doctor that is not in Douglas County. UHA needs an approved prior authorization (PA) before a ride can be approved. To find out if you have an approved PA, you can call your doctor or UHA's Customer Care.

You may also get a ride denial if you have been put on a limited ride policy because of too many no shows. See pages 18-19 to learn about the no show policy. BCB will either approve and schedule or deny your ride within 24 hours of receiving the request. If your ride is denied, you will receive a Notice of Action Benefit Denial (NOABD) letter.

Before mailing out your NOABD, UHA must provide a second review by another employee when the first reviewer denies the ride. UHA will send out the NOABD within 72 hours of the denial. This letter will go out to you, and the provider or other third party you were scheduled to see.

## Complaints, Appeals and Fair Hearings

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

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 by request. To file a grievance or appeal, or if you would like more information beyond what is in this guide, contact UHA at:

Call our Customer Care team	Write or email
Monday – Friday, 8:00AM – 5:00PM Phone: 541-229-4842 Toll free: 866-672-1551 TTY: 541-440-6304 or TTY 711 Website: <a href="http://www.umpquahealth.com/appeals-and-grievances/">www.umpquahealth.com/appeals-and-grievances/</a>	Umpqua Health Alliance Attn: Grievance and Appeals 3031 NE Stephens St Roseburg, OR 97470 <a href="mailto:UHAGrievance@umpquahealth.com">UHAGrievance@umpquahealth.com</a>

We will provide you with help to complete forms and other steps needed to file a grievance (complaint), appeal, or hearing. This could be:

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[www.umpquahealth.com](http://www.umpquahealth.com)

**BCB Customer Service:** Toll Free 877-324-8109 | TTY 711

[bca-ride.com](http://bca-ride.com)





- Help from a qualified community health worker (i.e., peer specialist or personal navigator) or care coordination services.
- Interpreter services or auxiliary (added help or support) aids and services.
- A letter in a different language or format.
- Explaining the grievance (complaint), appeals, and hearings process or providing policies or documents.

UHA directs members (and passengers) to follow the grievance and appeal system for NEMT services which can include:

- Denial of NEMT services in full or in part
- Quality of services
- Appropriateness of services
- Access to services

Appeals and complaints include those received from you, your authorized representative, medical providers, or facilities, with member consent. A complaint may be filed at any time. Complaints and appeals are recorded within UHA and reviewed by the Appeals and Grievances team.

If UHA delegates its NEMT services to another company, like a taxi service, you can still file a complaint with either or both companies. UHA will document, respond to, and resolve all member complaints and appeals submitted to UHA or BCB.

## Filing a Complaint (Grievance)

If you are unhappy with BCB or UHA, whether that includes your driver, their vehicle safety, quality of services, or interaction with your NEMT provider or NEMT driver (like they were rude, you were unable to access services, or your rights were violated), you are encouraged to file a complaint or grievance. You can file a complaint about any matter other than a notice of denial (NOABD) and at any time orally or in writing. We will try to make it right. Just call UHA's Customer Care at 1-866-672-1551 to have us file a complaint on your behalf. You can request a complaint form to be mailed to you. You can also send us a letter letting us know about what has happened.

Please send these letters to:

Umpqua Health Alliance  
Attn: Complaint (Grievance) and Appeal Resolutions  
3031 NE Stephens Street  
Roseburg, OR 97470

## Examples of Reasons a Complaint May be Filed

You can file a complaint about any matter other than a notice of denial and at any time orally or in writing. Some examples of reasons you may file a complaint are:

- Problems making appointments or getting a ride.
- NEMT providers or NEMT drivers were rude, denied access to services, or violated your rights.
- Not feeling respected or understood by providers, provider staff, drivers or UHA.
- Care you were not sure about but got anyway.

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- Bills for services you did not agree to pay.
- Disputes on UHA extension proposals to make approval decisions.
- Driver or vehicle safety
- Quality of the service you received

A representative or your provider may make (file) a complaint on your behalf, with your written permission to do so. If you are unhappy about a denied service, you may file an appeal through UHA.

Complaints are tracked based on their nature. This includes any known provider involved. UHA 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'll notify you within 5 business days, explaining why. We only request more time if it's in your best interest. All letters will be in your preferred language, and we'll send an update within 30 days explaining how we'll handle your complaint.

### **UHA, its contractors, subcontractors, and participating providers cannot:**

- Stop a member from using any part of the complaint and appeal system process or encourage the withdrawal of a complaint, appeal, or hearing already filed.
- Take punitive action against a provider who asks for an expedited result or supports a member's appeal.
- Use the filing or result of a complaint, appeal, or hearing as a reason to react against a member or to request member disenrollment.
- Stop members from filing a grievance with UHA if the same grievance was already filed with BCB and the member is unhappy with BCB's response

## **You can ask to change a decision that was made. This is called an appeal.**

There are times when requests for NEMT will be denied. Members have the right to file a grievance, appeal or contested hearing about anything related to their services. All members will be provided a letter if their ride is denied. You must ask for an appeal within 60 days of the date of the denial letter. You can let us know that you are unhappy about the denial of a service, full or in part, by using UHA's appeal process.

You must get a denial letter before you can ask for an appeal. If you did not receive a letter, or your provider says you cannot have a service or that you will have to pay for a service, you can ask UHA for a denial letter (NOABD). Once you have the denial letter, you can ask for an appeal.

To support your appeal, you have the right to:

- Give information and testimony in person or in writing.
- Make legal and factual arguments in person or in writing.

You must do these things within appeal timeframes.

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## Learn more about the steps to ask for an appeal or hearing:

<b>Step 1</b>	<p><b>Ask for an appeal.</b></p> <p>You must ask within 60 days of the date of the denial letter (NOABD). Call BCB Customer Service 877-324-8109 or TTY 711 or use the Request to Review a Health Care Decision form. The form will be sent with the denial letter. You can also get it at <a href="http://bit.ly/request2review">bit.ly/request2review</a>.</p> <p>You can also mail the form or written request to UHA:</p> <p><b>Umpqua Health Alliance</b>          Attn: Grievance and Appeals          3031 NE Stephens St          Roseburg, OR 97470</p> <p>You can also fax the form or written request to 541-677-5881.</p> <p><b>Who can ask for an appeal?</b></p> <p>You or someone with written permission to speak for you. That could be your doctor or an authorized representative.</p>
<b>Step 2</b>	<p><b>Receiving a reply.</b></p> <p>Once we get your request, we will look at the original decision. A new reviewer will look at your ride request to see if we followed the rules correctly. You can give us any more information you think would help us review the decision. To support your appeal, you have the right to:</p> <ul style="list-style-type: none"> <li>• Give information and testimony in person or in writing.</li> <li>• Make legal and factual arguments in person or in writing.</li> </ul> <p>You must do these things within the appeal timeframes listed below.</p> <p><b>How long do you get to review my appeal?</b></p> <p>We will review your request and respond within 16 days. If additional time is needed, you will receive a letter, and the timeframe may be extended by up to 14 days. You will receive a letter with the final outcome.</p> <p><b>What if I need a faster reply?</b></p> <p>You can ask for a fast appeal. This is also called an expedited appeal. Call us or fax the request form. The form will be sent with the denial letter. You can also get it at <a href="http://bit.ly/request2review">bit.ly/request2review</a>. 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.</p>

	<p><b>How long does a fast appeal take?</b></p> <p>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.</p> <p>If your request for a fast appeal is denied or more time is needed, we will call you and you will receive written notice within 2 days. A denied fast appeal will automatically become a standard appeal. We will resolve the appeal within 16 days, unless more time is needed. The extension won't be more than 14 days.</p> <p>If you don't agree with a decision to extend the appeal time frame or if a fast appeal is denied, you have the right to file a complaint.</p>
<b>Step 3</b>	<p><b>Getting a decision.</b></p> <p>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.</p>
<b>Step 4</b>	<p><b>Asking for a hearing.</b></p> <p>After the appeal, if you still do not agree with the outcome or if UHA went beyond the timeframe allowed for the appeal, you have the right to ask the state to review the appeal decision. This is called asking for a hearing. You must ask for a hearing within 120 days of the date of the appeal decision letter (NOAR).</p> <p><b>What if I need a faster hearing?</b></p> <p>You can ask for a fast hearing. This is also called an expedited hearing. Use the online hearing form at <a href="http://bit.ly/ohp-hearing-form">bit.ly/ohp-hearing-form</a> to ask for a normal hearing or a faster hearing.</p> <p>You can also call the state at 800-273-0557 (TTY 711) or use the request form that will be sent with the letter. Get the form at <a href="http://bit.ly/request2review">bit.ly/request2review</a>. You can send the form to:</p> <p>OHA Medical Hearings 500 Summer St NE E49 Salem, OR 97301 Fax: 503-945-6035</p> <p>The state will decide if you can have a fast hearing 2 working days after getting your request.</p> <p><b>Who can ask for a hearing?</b></p> <p>You or someone with written permission to speak for you. That could be your doctor or an authorized representative.</p>

**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.

**Can I have representation at my 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 1-800-520-5292; TTY 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.org/](http://oregonlawhelp.org/).

**Continued benefits during a hearing:**

If you were getting the services we denied prior to the denial, you have the right to keep getting them during your hearing process. You must ask for benefits to continue within 10 days of the date on the denial letter (NOABD) or by the date this decision is effective, whichever is later.

You may have to pay for services received during the appeal or hearing if the decision is not in your favor.

## Mileage, Meals, and Lodging Reimbursements

BCB provides reimbursements for the following services:

- Mileage Reimbursement
- Meals
- Lodging

**Mileage reimbursement** is available if you can get yourself to an appointment. This includes using your own car or getting a ride from someone else.

If you have an appointment that is outside of Douglas County, you may be eligible for meals and/or lodging reimbursement.

**Meal Reimbursements** are received if you travel for a minimum of four (4) hours round-trip.

**Lodging Reimbursements** are available if the travel time begins before 5:00 am to reach your appointment, if the travel from your appointment would end after 9:00 pm, or your doctor documents it's medically necessary. BCB may provide lodging refunds in special situations. You and your attendant, parent, or guardian may go with you if medically necessary and receive a refund for meals and lodging. This is allowed if any of the following apply:

- The member is a minor child and unable to travel alone.
- Your doctor gives a signed statement saying that an attendant must travel with you.
- You are mentally or physically unable to get to your appointment without help.

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- You would be unable to return home without help.

Additional attendants may be refunded for meals and lodging under special situations if necessary. This is at UHA's discretion.

### How It Works:

BCB has a Reimbursement Verification Form that you must fill out to receive reimbursement. You can find this form on their website: <http://bca-ride.com>, or you can call BCB Customer Service and request one be mailed to you.

The day before, or the day of your appointment, you must call BCB Customer Service. You can call or go online schedule your ride. Please note that BCB is not responsible for setting up any rides that are eligible to receive mileage reimbursements.

Any healthcare professional at the facility must sign the Reimbursement Verification Form. This includes nurses, therapists, physicians' assistants, or nurse practitioners. It does not have to be the doctor.

For mileage, meals, and lodging reimbursements, you may need prior approval or proof of your visit for covered health services. Once you complete your Reimbursement Verification Form, send it to BCB within 45 days of your first appointment. UHA may not approve your request if it's received after 45 days:

#### By Mail:

Bay Cities Brokerage  
3505 Ocean Blvd SE  
Coos Bay OR 97420

#### Drop off at the local office:

1290 NE Cedar St  
Roseburg, OR 97470

Prior to receiving reimbursement, you must return all required documents to UHA or BCB. BCB may hold refunds if the amount is less than \$10.00 until the members refund reaches \$10.00.

You will be reimbursed within 14 days after BCB receives your reimbursement request. You will receive a Notice of Action Benefit Denial (NOABD) letter within 14 days if:

- Your reimbursement request is denied.
- Your reimbursement request is incomplete.
  - BCB will take an extra 14 days to help you complete the reimbursement request.

## Reimbursement Rates

The reimbursement rates are calculated as followed:

- Private Car Mileage Refund:
  - \$0.46 a mile
- Member Meal Refund – \$34.00 per day
  - Breakfast: \$9.00 – *Travel must begin before 6:00 am.*
  - Lunch: \$10.00 – *Travel must span the entire period from 11:30 am to 1:30 pm.*
  - Dinner: \$15.00 – *Travel ends after 6:30 pm.*

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- Attendant Meals – \$34.00 per day
  - Breakfast: \$9.00
  - Lunch: \$10.00
  - Dinner: \$15.00
- You do NOT need to submit receipts for your meals.
- Lodging Refund:
  - Lodging amount: \$110.00 per night – *Travel begins before 5:00 am or ends after 9:00 pm or your health care provider documents a medical need.*
  - Attendant lodging: \$110.00 per night (if staying in a separate room)
  - Lodging will not be reimbursed if the trip can be made in one day. Also, for multiple appointments on different days when they can be scheduled on the same day. This is unless your provider says it's medically necessary to stay overnight or for other reasons at UHA's discretion.

If someone other than the member or a parent or guardian of a minor provides the ride, BCB may reimburse them. For more information about BCB Reimbursement Policy and rates, and to request prior authorization, please contact BCB Customer Service at 877-324-8109.

## Overpayments

If BCB overpays you, we may ask for any over payment back. Overpayments happen when BCB or other transportation services paid for:

- Mileage, meals, and lodging, but another provider also paid for the services to:
  - The member
  - The provider who gave the ride, meals, or lodging
- Reimbursement money that was provided when services were not used (like you didn't go to your appointment but received a refund anyways).
- A refund request that was received for mileage and the ride was shared with another member who also received mileage refunds.
- Public transit (bus) tickets or passes that were issued and the tickets or passes were sold or given to someone else.

## Member Billing

UHA members do not have to pay for covered services even if UHA or its contracted transportation provider denied reimbursement for the transportation service. This includes getting a ride through BCB. If BCB sends you a bill, please contact UHA's Customer Care and we will help you get the bill cleared up. UHA does not have any cost-sharing for NEMT services.

## Safety Belts and Car Seats

Per Oregon State law, it is required that all people wear an appropriate restraint while riding in a moving vehicle. If you or anyone riding with you requires a seat belt extender, you must notify BCB at the time you schedule the ride.

A member's parent, guardian, or adult caregiver will provide and install child safety seats for a person who:

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- Is under 2 years old. They must sit in a rear-facing car seat.
- Weighs less than 40 pounds and who is 4 feet, 9 inches or shorter.
- Weighs more than 40 pounds and who is 4 feet, 9 inches.
  - Unless the child is properly secured with a child safety system that meets the minimum standards and specifications established by the department under ORS 815.055 (Rules establishing standards for safety belts, harnesses and child safety systems) for child safety systems designed for children weighing more than 40 pounds.
- A driver can transport a child only with the proper car seat and an attendant.

A member's parent, guardian, or adult caregiver are required to bring their own car seat or booster seat and install it in the seat. Your driver cannot install the seat for you. These cannot be left in the driver's vehicle. This is because you may not have the same driver picking you up from your appointment. An NEMT driver may not transport a member if a parent or guardian fails to provide a safety seat that complies with state law.

## Attendants

If you need more help than your driver can provide, an attendant (Member Representative) must come with you. You, your guardian, or your caregiver are responsible for providing an attendant when needed. The attendant must meet the requirements under OAR 410-141-3935. They can be your mother, father, stepmother, stepfather, grandparent, or guardian. An attendant may also be any adult 18 years or older authorized by a member's parent or guardian.

One attendant can travel with you at no cost. Extra riders may have to pay a fare or a shared ride cost. An additional attendant may accompany you with secured transport if it is needed. BCB only provides the ride, they are not responsible for the cost of bringing an attendant along. This includes their wages, meals, or other costs they may charge.

## Children

Minors (children ages 12 and under) and members with special physical or developmental needs regardless of age are required to always have an adult attendant with them. BCB will decide if the member needs assistance and if the attendant meets the requirements to be an attendant. The attendant must be one of the following:

- The member's mother, father, stepmother, stepfather, grandparent, or guardian
- Adult relative
- An adult 18 years or older expressly identified in writing by the parent or guardian as an attendant.
- A volunteer or employee of the Department of Human Services (DHS)

An adult attendant can ride with the child at no cost. If your child is over 12, it is not required that they have an adult attendant. However, one adult may go with a child up to the age 18 at no cost. Most providers require an adult signature for most procedures for any child under 18 years of age.

Oregon State law requires children be in car seats or booster seats. Please see the section above for the policy.

## Wheelchair and Other Mobility Aids

If you use a wheelchair, power wheelchair, scooter, or other mobility aids, please let BCB know when scheduling your ride. This is to make sure that the right vehicle is scheduled for you.

If you use a non-standard or oversized wheelchair, you must inform BCB when scheduling your ride so that an appropriate vehicle can be sent. An oversized wheelchair is the following:

- Larger than 30 inches wide
- 48 inches long
- Weighs more than 600 pounds when occupied

Three-wheeled scooters are difficult to secure once in the vehicle. If you use a scooter, you will likely be asked to secure yourself into a vehicle seat for your safety. You are not required to do so.

If you use a walker or cane, they will need to be safely stowed in the vehicle once you are seated. The driver will help you secure your equipment if needed.

Oxygen tanks must be secured in a carrier used for mobility.

BCB makes sure they have all equipment necessary to securely transport you in accordance with the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, and Oregon Revised Statute 659A.103.

## Service Animals and Companion Animals

BCB allows all trained service animals in their vehicles. These animals are to help people with disabilities. You must let BCB know when scheduling your ride if you are bringing a service animal with you. You also must let BCB know if you are bringing a companion animal.

## Privacy Policy

UHA and BCB's employees and drivers are not allowed to talk about, or share Oregon Health Plan (OHP) information, except for normal business reasons.

A law called the Health Insurance Probability and Accountability Act (HIPAA) protects your medical records and keeps them private. We will not discuss the reason for your appointment where others can hear.

State and Federal laws protect members' privacy, and UHA and our providers will not release your health care information without your approval, except in an emergency or when required by State and Federal regulation. However, your clinical records may be reviewed by the State or Federal government to see if we gave you the best possible care.

## NEMT Policies

UHA requires that all drivers do not change the assigned pick-up time without prior, noted consent from BCB and you. BCB will give you information about your scheduled ride no later than 2 days prior to the scheduled pick-up time. This information includes:

- The name and telephone number of the driver
- The scheduled time and address of pick-up
- The name and address of the provider you are scheduled with

The driver is responsible for confirming if the scheduled ride has happened. When scheduling a ride, UHA or BCB must let members know about the ride details. They will ask how you want to be contacted (by call, email, or fax) and what time is best for you. UHA or BCB will share the ride information as soon as they have it and will tell you before the ride date.

BCB will make sure that they provide updated information to the drivers. They will monitor the driver's location and they will fix any pick-up or drop off. Drivers are not permitted to drop you off for an appointment more than 15 minutes before the offices open, or 15 minutes after the offices close for the day. This may be allowed if your appointment is not expected to end within 15 minutes after closing. This also may be allowed if requested by you, your parent or guardian, or your representative.

In the event of an accident or incident, the driver will send an email notice to BCB within 24 hours. In this notice, they will include the following information:

- Name of driver
- Name of passenger
- Location of the incident
- Date and time of incident
- Description of the incident including any injuries that were caused by the incident
- Where the driver or passenger required treatment if at a hospital

If needed, there will be a police report filed. This report will have an Administrative Notice. The full report will be sent to OHA. BCB and UHA will cooperate with all investigations related to any incident or accident.

If you would like to see UHA's NEMT policies, please visit our website at [www.umpquahealth.com](http://www.umpquahealth.com) and go to the OHP Member's section.

## How UHA Makes Sure You Are Safe

UHA does a Readiness Review of our NEMT providers before contracting with them. This means that we ensure that all the providers and drivers go through background checks. They are subject to the Participating Provider Credentialing Requirements laid out in Oregon Administrative Ruling (OAR) 410-141-3925. This means they have undergone verification of State Driver's license with any required endorsements, been screened for exclusion from participation in federal programs, and gone through any required background checks. This is done before giving rides to our members. Once the driver and vehicle pass the requirements, they will be able to schedule and give rides to our members. Vehicle requirements set forth in OAR 410-141-3925 include:

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- The inside of the vehicle will be clean and free from any debris that would stop you from riding comfortably.
- All vehicles adhere to the no smoking, aerosolizing, or vaporizing of inhalant policies.
- Compliance with all relevant local, state, and federal transportation laws regarding vehicle and passenger safety standards and comfort.

All vehicles shall include, without limitation, the following safety equipment:

- Safety belts for all passengers if the vehicle is legally required to provide safety belts
- First aid kit
- Fire extinguisher
- Roadside reflective or warning devices
- Flashlight
- Tire traction devices, when appropriate
- Disposable gloves; and
- All equipment needed to securely transport members using wheelchairs or stretchers. For more information about these rides, see pages 28-29.

All vehicles must be in good operating condition and shall include, but is not limited to, the following equipment:

- Side and rearview mirrors
- Horn
- Heating, air conditioning and ventilation system
- Working turn signals, headlights, taillights, and windshield wipers

UHA will track pick-up and drop off times and report it to the Oregon Health Authority (OHA) when asked. This is to ensure that members are not being dropped off prior to one hour before their scheduled appointment.

UHA collects information of each service given. This includes:

- Each trip
- Member ID
- Destination
- Reason for the ride, and
- Any events of no shows on the part of the member or driver

If a driver does not pick you up for your appointment, BCB will follow up with you. They will decide whether you suffered any harm because of the failure to give the ride. BCB will see if whether rescheduling your appointment is necessary. Also, whether any other recourse or Corrective Action Plan with the driver is needed.

UHA requires BCB to have backup plans for sudden high demand in transportation. This includes cases where a vehicle is very late or can't provide the scheduled ride.

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These plans include rules, staff training, notification methods, and member education.

UHA also has contingency plans for events that could affect your ride, such as peak demand causing your driver to be over 15 minutes late or unavailable.

## Member Rights and Responsibilities

### Your rights as an OHP member.

#### Access

- To have access to covered services during the same office hours as everyone else.
  - Priority population members have the right to immediate assessment and entry.
  - IV drug users including heroin and members that have Opioid Use Disorder have the right to access:
    - Immediate assessment(s) within 72 hours
    - Immediate entry to services within 72 hours
    - Residential treatment within 14 days of referral
  - Members who are on Medication Assisted Treatment have to receive services as soon as possible:
    - Assessment(s) within 72 hours
    - Entry to services within 72 hours
- Get emergency and urgent care 24 hours a day, 7 days a week without a prior authorization.
- Access behavioral health services when you need them.
- To have needed and reasonable services to diagnose the current problem.
- To choose a diverse provider, if available within the network, in any settings. One that is also easy for families to access.
- To be treated by in-network providers with the same dignity and respect as other people who get care, not on OHP.
- Get information about your condition, treatments, and alternatives, what is covered and what is not covered. This is no matter the cost or benefit coverage. This is to allow you to make informed choices about your care.
- To get community-based care that includes oversight, care coordination, transition, and discharge planning by UHA in a way that works with your culture and language. This is in hopes of keeping you out of a hospital or facility.
- Get help with addiction to cigarettes, covered behavioral health, substance use disorder treatment, family planning, or related services without a referral.
- Get a referral to a specialist for covered services as explained in UHA's policies.
- To get a referral or a second opinion at no cost to you, with UHA's policies followed.
- To receive care at places that offer equal access to males and females under the age of 18. This includes services and care available through human services and the juvenile corrections program provided by or funded by the State of Oregon (ORS 417.270).
- To have direct access to a women's health specialist for females.
- Be made aware of your rights under Title VI of the Civil Rights Act and ORS Chapter 659A.

#### Care

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- To choose a Primary Care Provider (PCP) and be able to change your provider as allowed by UHA's policies.
- To get notice of canceled appointments in a timely manner.
- Help make decisions about your health care. This includes agreeing to care and refusing care, except when court ordered. To be told what happens if you say no to getting care.
- To have one source of person-centered care and services that give you choices, independence, dignity, and that meet the standards of medical care and fitting to your medical needs.
- To have regular contact with a care team. They are responsible for managing your care.
- To have help getting health care, local and social support services, and statewide services. Get cultural and language help in making decisions about your care and services. This could be from:
  - Certified or qualified health care interpreters
  - Certified traditional health workers. These include:
    - Community health workers
    - Peer wellness specialists
    - Peer support specialists
    - Doulas
    - Personal health navigators.
- Actively help make a treatment plan.
- To have a clinical record that notes conditions, services you got, and referrals made. You can:
  - Have access to your health records, unless restricted by law.
  - Have corrections made to your health record.
  - Transfer, or have UHA transfer, a copy of your records to another provider
  - Ask for a copy of your records including, but not limited to:
    - Medical records from your provider
    - Dental records from your dental care provider
    - Records from UHA
- To execute a statement of wishes for treatment like an Advance Directive. This includes the right to accept or refuse medical, surgical, or behavioral health treatment and the right to execute directives and powers of attorney for health care established under ORS 127.
- To execute a Declaration of Mental Health Treatment in accordance with ORS 127.703, and to file a complaint if a Declaration of Mental Health Treatment is not followed.
- To get covered preventative services.
- To get needed covered services.
  - If UHA's provider network is unable to provide these services, UHA will, in a timely manner, cover services to an out of network provider until our network can provide them.

## Support

- To get services and supports that fit your cultural and language needs and are close to where you live. If available, you can get services in non-traditional settings such as online.
  - If you choose telehealth services, you can get them in the language you need.
  - You can get in-person visits, not just telehealth visits.
- To have providers that make sure you will have physical access, reasonable accommodations, and accessible equipment.
  - To get these services, please let your provider know what your needs are.

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- To get written materials that tell you:
  - Your rights and responsibilities
  - Benefits available
  - How to access services
  - What to do in an emergency.
- Have a friend, family member, representative or advocate come to your appointments and other times as allowed by clinical rules.
- To have written materials explained in a way that you understand. This includes how coordinated care works and how to get services in the coordinated health care system.
- To get free certified or qualified health care interpreter services, and to have information given to you in a way that works for you. This includes the use of auxiliary aids. For example, you can get information in other languages, in Braille, in large print, or other formats such as electronic, audio, or video. This is to help those with disabilities get access to health information as required by law (Section 1557 of the PPACA).
- To get information according to the law (42CFR438.10) within 30 days after your enrollment and within the timeframe Medicare requires for FBDE members. You have the right to get this information at least once a year.
- UHA will make sure staff who have contact with potential members are fully trained on plan policies. The training will include the policies on Enrollment, Disenrollment, Fraud, Waste and Abuse, Grievances and Appeals, and Advance Directives. Also including the Certified and Qualified Health Care Interpreter services available and the in-network medical practices and facilities who have bilingual providers or staff.

## **Nondiscrimination**

- To be treated with dignity, respect, and consideration for your privacy.
- To be free from any form of restraint or seclusion because it would be easier to:
  - Care for you
  - Punish you or
  - Get you to do something you don't want to do
- To freely exercise your rights. The exercising of those rights will not change the way UHA, our network providers, or the State Medicaid agency treats you.
- The ability to make a report if you believe your rights are being denied, your health information isn't being protected, or you feel that you have been discriminated against. You may do one or more of the following:
  - File a complaint with UHA, the Client Services Unit for the Oregon Health Plan, the Bureau of Labor and Industries, or the Office of Civil Rights. See pages 2-3 for more information about filing a report.
  - Get written notice of UHA's nondiscrimination policy and process.
  - Ask for and get information on the structure and operation of UHA or any physician incentive plan.
- To know how make a complaint or appeal with UHA and receive a response.
- To request a hearing.
- To get information and help to appeal denials and ask for a hearing.
- Get a Notice of Adverse Benefit Determination (NOABD) letter if you are denied a service or there is a change in service level.

- To know that your medical record is confidential, with exceptions determined by law. To get a notice that tells you how your health information may be used and shared. With the right to decide if you want to give permission before your health information can be used or shared for certain purposes.
- To exercise all rights, even if the member is a child, as defined by OARs. There are times when people under age 18 may want or need to get health care services on their own. To learn more about the rights of a minor, please go here:  
[sharedsystems.dhsoha.state.or.us/DHSForms/Served/Ie9541.pdf](https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/Ie9541.pdf).

## Your responsibilities as an OHP member

### Getting Care

- Find a doctor or other provider you can work with. Tell them all about your health.
- Go for regular check-ups and preventive care at your PCP or clinic.
- Use your PCP or clinic for tests and other treatments, except in an emergency.
- Get a referral to a specialist from your PCP or clinic before going to a specialist, unless a self-referral to the specialist is allowed.
- Use urgent and emergency services appropriately and tell your PCP or clinic that you were seen in the ER within 72 hours.
- Help the provider or clinic get clinical records from other providers. This may include signing a Release of Information.
- Give accurate information to your provider for your medical records.
- Help make a treatment plan with your provider and follow the agreed upon plan. Be actively engaged in your health care.
- Follow directions from your providers or ask for another option.
- Bring your medical ID cards to appointments. Tell providers you are covered under OHP and any other health insurance before you see them. Let them know if you were hurt in an accident.
- Ask questions about conditions, treatments, and other issues related to care that you do not understand.
- Be on time for appointments. Call your provider at least one day before if you can't make it to an appointment.
- Treat UHA, providers, and clinic staff members with respect.
- Tell UHA about any issues, complaints, or grievances.

### Report this information to OHP

- A change in address or phone number.
- If you become pregnant and when your child is born.
- If any family members move in or out of the household.
- If you have any other insurances.

You can report changes in one of these ways:

- Use your ONE online account at [One.Oregon.gov](https://One.Oregon.gov) to report changes online.

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- Visit any Oregon Department of Human Services Office in Oregon. You can find a list of offices at: [www.oregon.gov/odhs/Pages/office-finder.aspx](http://www.oregon.gov/odhs/Pages/office-finder.aspx)
- Contact a local OHP-certified community partner. You can find a community partner at: <https://healthcare.oregon.gov/Pages/find-help.aspx>
- Call OHP Customer Service weekdays at 800-699-9075.
- Fax to 503-378-5628
- Mail to ONE Customer Service Center, PO Box 14015, Salem, OR 97309

### Things You May Have to Pay for

- To pay for services not covered by OHP described in OAR 410-120-1200 (Excluded Services and Limitations) and 410-120-1280 (Billing).
- To pay your monthly OHP premium on time if you have one.
- To help UHA find any third-party coverage you have. Pay UHA back for benefits we paid, for an injury or any recovery you may have gotten due to that injury.

## Your rights and responsibilities as an NEMT rider:

### You have the right to:

- Get a safe and reliable ride that meets your needs.
- Be treated with respect.
- Ask for interpretation services when talking to customer service.
- Get materials in a language or format that meets your needs.
- Get a written notice when a ride is denied.
- File a complaint about your ride experience.
- Ask for appeals and hearings if you have been denied rides unfairly

### Your responsibilities are to:

- Treat drivers and other passengers with respect.
- Call us as early as possible to schedule, change, or cancel a ride.
- Use seatbelts and other safety equipment as required by law.
- Ask for any additional stops, like the pharmacy, in advance. Drivers are only allowed to make stops that BCB has approved.

## Frequently Asked Questions

### How do I schedule a ride?

Call BCB Customer Service. They are available 24 hours a day, 7 days a week. You can also schedule a ride by going on their website. If you would like to know more, see pages 16-17 and page 38 for details.

### Who can get rides?

To get rides to health care appointments, you must be a UHA member. These services help you when you have no other way to get to your health care appointment.

### Who can set up a ride for me?

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[bca-ride.com](http://bca-ride.com)



You, a relative or guardian, caregiver, or someone who works where you live. They will need to know your personal information like your name, date of birth, phone number, or member ID number. They will need to call BCB Customer Service.

### **What if I need an ambulance?**

If you have an emergency, you must call 911. BCB only provides non-emergent rides. If you need an ambulance for a non-emergent ride, call BCB and let them know your medical needs. They will schedule an appropriate transportation vehicle.

### **What if I can't call 2 business days before my appointment?**

If you are leaving the hospital, going to urgent care, or need to get to or from a chemotherapy or dialysis appointment, call BCB and they will set up a ride for you.

### **How much does it cost to get a ride?**

Rides are covered by UHA free of charge. If you receive a bill from BCB, call UHA's Customer Care right away.

### **What if I get denied for a ride?**

If your ride request is denied, you have the right to appeal. For more details, refer to the "Appeals and Ride Denials" section on page 21 of this guide. A denial may indicate eligibility for mileage reimbursement instead of a ride.

### **Will a car seat/booster seat be provided for my child?**

No, Bay Cities Brokerage (BCB) does not provide car seats or boosters. By law, children under 8 years old, shorter than 4'9", or weighing less than 40 pounds must ride in an approved car seat or booster. Please have the appropriate seat ready for installation when your driver arrives.

### **Online Portal Platform Overview**

BCB's TripSpark website lets members manage their non-emergency medical transportation (NEMT) rides without calling BCB.

### **BCB TripSpark lets you:**

- Ask for rides covered under your NEMT benefit.
- View scheduled rides.
- Cancel rides.
- Update your contact information and preferences.
- Request a return ride with an "I am ready" button.



### **Accessing BCB TripSpark:**

- Starting with BCB TripSpark is simple!
- Go to <https://portal.bca-ride.com/Registration>
- Register with your medical ID number and an email address
- Log in and get started!

## **Using the BCB TripSpark Member Portal**

### **Registering for an Account**

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[bca-ride.com](http://bca-ride.com)



Only members who are eligible to receive NEMT benefits from BCB can access the BCB TripSpark member website. This keeps member data safe!

To set up your account, fill out the registration fields with the same information that you use with your health plan. We need your first and last name, medical ID number, phone number, and ZIP code. BCB checks this information with your health plan.

Your email address is also required to register for the Passenger Portal. When you register, you will receive an email with your “client ID”. This is different than your member ID with UHA. After you receive this email, you will be required to update your password. You may need to check your spam folder for this message. After you register, you will have full access to the TripSpark portal to schedule your rides.

BCB TripSpark’s portal lets you, your representative, family member or caregiver request a ride and see and update your schedule. You can also track your driver as they approach on a map.

You can get notifications about upcoming rides and update your ride in real-time. You can book or cancel a ride 24 hours a day, 7 days a week on the portal.

## Accessing Technical Assistance

If you have questions about the TripSpark portal or need assistance booking a ride, our Customer Service Representatives are available to help. You can reach Bay Cities Brokerage (BCB) at 877-324-8109. Alternatively, you can email them at [support@bca-ride.com](mailto:support@bca-ride.com) for further assistance.

## Words to Know

**Appeal:** When you ask your plan to review a decision the plan made about covering a health care service. If you do not agree with a decision the plan made, you can appeal it and ask to have the decision reviewed.

**Attendant:** Someone whose job it is to help others.

**Bad Weather:** Severe heat or severe cold. Flooding or tornado warnings. Heavy snow or icy roads.

**CCO:** Coordinated Care Organization. A local group of health care providers. They are doctors, counselors, nurses, dentists, and others who work together in your community. CCOs help make sure OHP members stay healthy.

**CFR:** Code of Federal Regulations. Published list of the general rules and laws.

**Complaint:** A statement of dislike about a plan, provider, or clinic. The law says CCOs must respond to each complaint.

**Corrective Action Plan:** A document telling how a specific situation will be changed. This is to better meet the goals of a company.

**Denial:** A PA request that is denied, stopped, or reduced.

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**UHA Customer Care:** Toll Free 866-672-1551 | TTY 711

[www.umpquahealth.com](http://www.umpquahealth.com)

**BCB Customer Service:** Toll Free 877-324-8109 | TTY 711

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**Emergency:** An illness or injury that needs care right now. A physical health example is bleeding that won't stop or a broken bone. A mental health example is feeling out of control or feeling like hurting yourself.

**Emergency Medical Transportation:** Using an ambulance to get to care. Emergency medical technicians (EMT) give you care during the ride or flight. This happens when you call 911.

**FBDE:** Full Benefit Dual Eligible. Members who are eligible for Medicare and Medicaid.

**Grievance:** A complaint about a plan, provider, or clinic. CCOs must respond to each complaint.

**Mass Transit:** Public transport. Like buses and subway trains.

**Medically Necessary:** Services and supplies that your doctor says you need. You need them to prevent, diagnose, or treat a condition or its symptoms. It can mean services that a provider accepts as standard treatment.

**Member:** Someone eligible for UHA or NEMT services.

**BCB: Bay Cities Brokerage.** UHA's contracted Non-Emergent Transportation (NEMT) provider.

**NEMT:** Non-Emergent Medical Transportation. Rides given for medical situations that are not an emergency.

**No-Show:** When you do not show up, or cancel, a scheduled ride.

**Oregon Administration Rules (OAR):** Official rules set by Oregon state laws.

**Oregon Health Authority (OHA):** The state agency that is in charge of OHP and other health services in Oregon.

**Oregon Health Plan (OHP):** Oregon's medical assistance program. It helps people with low incomes get access to care.

**Participating Providers:** Transport providers, or transport drivers.

**Passenger:** Person who travels in a vehicle who is not the driver.

**Policy:** A plan of action followed by a business.

**Preapproval (Preauthorization, PA, or Prior Authorization):** Permission for a service. This is usually a document that says your plan will pay for a service. Some plans and services require this before you get the care.

**Refund:** The act of paying back. The money that is paid back.

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**Secure Transport:** NEMT services for the involuntary ride of members who are in danger of harming themselves or others.

**Transportation Driver:** The person who is hired to drive you to your appointments and back home.

**Trip:** Transport from point of pick-up to the drop off point.

**Umpqua Health Alliance:** A managed care plan for the Oregon Health Plan that serves Douglas County.

**Urgent:** Care that you need the same day. It could be for serious pain, to keep you from feeling much worse, or to avoid losing function in part of your body.

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