



UMPQUA HEALTH ALLIANCE

2026 RIDER'S GUIDE

Non-Emergent Medical Transportation

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BAY CITIES BROKERAGE



UHA Nondiscrimination Notice

Your Rights

There are state and federal laws that protect you and your civil rights. UHA can't treat you differently because of your:

- Age
- Disability
- National origin
- Language you speak or how well you know English
- Race
- Religion
- Color
- Sex, sexual orientation, or gender identity
- Pregnancy or any health issues you have due to being pregnant
- How healthy you are or whether you need health services

Help from UHA

If you think that UHA did not treat you fairly, we want to hear from you. UHA's Section 1557 Coordinator and Customer Care teams are here to help. Here is how you can contact us to get a complaint started:

- Hours: Monday to Friday, 8 a.m.- 5 p.m.
- Phone: 541-229-4842; Toll Free: 866-672-1551; TTY: 541-440-6304 or 711
- Fax: 541-677-5881
- Mail: Umpqua Health Alliance
3031 NE Stephens St
Roseburg, OR 97470
- Website and Complaint Form: www.umpquahealth.com/appeals-and-grievances/
- Email: UHAGrievance@umpquahealth.com

If you want to know more about how UHA's complaint process works, you can give us a call or look on our website: www.umpquahealth.com/appeals-and-grievances/. You can also find this notice posted on our website: <https://www.umpquahealth.com/nondiscrimination-policy/>

If you have a disability and need help, tell us. Use the contact information above. UHA's help is free. Some of the things we can do are:

- Give you copies in Braille
- Give you large print copies
- Give you copies in another language
- Get help for you from a sign language interpreter
- Get help for you from a spoken language interpreter

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

www.umpquahealth.com

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

bca-ride.com



File a Complaint

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

Oregon Health Authority (OHA) Civil Rights

- Website: <https://www.oregon.gov/oha/ei/pages/public-civil-rights.aspx>
- Phone: 844-882-7889, 711 TTY
- Email: OHA.PublicCivilRights@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: <https://www.oregon.gov/boli/civil-rights/>
- Phone: 971-673-0764
- Email: 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
- Phone: 800-368-1019, 800-537-7697 (TDD)
- Email: 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 translations 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 <https://www.oregon.gov/oha/ei/pages/hci-program.aspx>.

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

www.umpquahealth.com

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

bca-ride.com



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).

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.

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 مجانية أو المبرقة الكاتبة. نستقبل 541-440-6304 TTY, اتصلو على 541-229-4842. 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.

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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。

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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.

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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.

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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.

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Ви можете отримати допомогу від сертифікованого та кваліфікованого медичного перекладача.

Farsi

می‌توانید این نامه را به زبان‌های دیگر، درشت‌خط، بریل یا قالب ترجمانی 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.

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

Burmese

ဤစာကို အချားဘာသာစကားမ်း၊ ပုံ့ဝိဟုလုံးဟုကီး၊ မ်ကျမဋ္ဌ်းအတြကု
ဘေးလု သို/မဟုတု သဠိမိးဝိသညး ပုံစံပုဖုး ရယူနိုင်ပါသည်။ သညး
စကားပုပန္တစဉ်းလညး တော့းဆိုင်ပါသည်။ ဤအကူအညီသည်

အခမဲ့ ဖုန်းနံပါတ် 541-229-4842 သို့မဟုတ် 541-440-6304 ကို ဖုန်းဆက်ပါ။ ထပ်မံဆက်သွယ်ရန်အတွက် ကုမ္ပဏီမှ လက်ခံပါသည်။

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သင့်သည် သင့်ဆုံးမသောလက်မှတ်ထုတ်ပေးရန်အတွက် ကုမ္ပဏီမှ ကုန်ပစ္စည်းများ စောင့်ကြည့်မှုနှင့် စကားပြောမှုလုပ်ငန်း အကူအညီရယူနိုင်ပါသည်။

Amharic

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

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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.

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

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

www.umpquahealth.com

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

bca-ride.com



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Welcome!

We want to make sure you can get to your medical appointments! That's why Umpqua Health Alliance (UHA) works with Bay Cities Brokerage (BCB). This program is called Non-Emergent Medical Transportation (NEMT). This Rider Guide will tell you how it works.

Do you need this in a different language? Would it be easier in a different format? Just let us know. Call UHA Customer Care at 541-229-4842 (TTY 711) or TTY 541-440-6304. You could also email us at UHCustomerCare@umpquahealth.com.

Need a paper copy? We can mail you a copy. We will send it fast. Within 5 business days of you asking.

Need an audio version? We can email it to you.

Need a digital version? We can email it to you. It's also on our website at <https://www.umpquahealth.com/members/benefits-programs/get-a-ride>.

Every format has the same information.

UHA Customer Care Contact Information 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: UHCustomerCare@umpquahealth.com Website: www.umpquahealth.com

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

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

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

www.umpquahealth.com

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

bca-ride.com



- Friday after Thanksgiving (11/27/26)
- Christmas (12/25/26)

BCB Customer Service Contact Information and Hours of Operation

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

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: support@bca-ride.com Website: bca-ride.com Passenger Portal (TripSpark): portal.bca-ride.com/Registration

BCB's call center is closed on these holidays:

- New Year's Day – Thursday, January 1, 2026
- Memorial Day – Monday, May 25, 2026
- Independence Day – Saturday, July 4, 2026
- Labor Day – Monday, September 7, 2026
- Veterans Day – Wednesday, November 11, 2026
- Thanksgiving Day – Thursday, November 26, 2026
- Christmas Day – Friday, December 25, 2026

How Much Do Rides Cost?

NEMT rides are free for covered services. This is true even if UHA or BCB deny payment. If BCB sends you a bill, call UHA's Customer Care. We will help you get the bill cleared up.

How Do I Schedule a Ride?

- Call Toll-Free: 877-324-8109 to talk to a person in BCB Customer Service
- Go to their online portal: 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

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

www.umpquahealth.com

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

bca-ride.com



Plan ahead. You can ask BCB for a ride up to 90 days before the ride. Try to ask at least 2 business days ahead. You can schedule same day trips if needed. You can schedule more than one trip at a time.

Outside of BCB Customer Service Hours

There is a 24-hour hotline for urgent rides. When you call, you will hear a message in English and Spanish. The message will tell you to call 911 if you are having an emergency. The hotline is not for emergencies. BCB and UHA cannot plan for emergency ambulance rides. If no one answers, leave a message. Messages are checked during the night. If you leave your name and phone number, BCB will call you back. They will call by the next business day. If you don't answer, they will keep calling until you answer.

What if your need is not urgent? Call us back or use the online member portal.

Information You Will Need to Schedule a Ride

When calling BCB, please be ready with this information:

- 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?
- Do you use a wheelchair? Do you need to use a wheelchair van?
- Will you bring a service animal with you?

Authorized Representatives

Do you have a representative? This may be:

- Community Health Worker (CHW)
- Foster parent
- Parent
- Caretaker
- Authorized provider

They can schedule the ride for you. If you want to limit who can schedule rides for you, tell BCB. They will put a password in your profile. You choose the password.

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

www.umpquahealth.com

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

bca-ride.com



What Happens After I Make a Request?

We will look at what you need. We will decide if the ride is approved within 24 hours of your request. If it's approved, we will schedule the ride. Our decision will be fast enough so you make it to your appointment on time.

Ride Approvals

Once your ride is approved, BCB will tell you:

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

You get to choose how BCB tells you. You can get a phone call, an email, or a fax.

Did you ask for the ride 2 or more business days before the pick-up?

- If you did, BCB will tell you the name and telephone number of the NEMT driver or provider.
- If you didn't, BCB does not have to tell you. They will do their best to tell you.

Drivers are not allowed to change the pick-up time without BCB and you approving ahead of time.

Ride Denials

Some rides may not be approved. Some reasons for denials:

- Member wants to go to a doctor that is not in Douglas County. Member does not have a prior authorization.
- Member has had a lot of no shows. This limits the rides the member can get. See the 'Consequences of No Shows' section on page 22.

We want to make sure you get the rides you need. If a ride is denied, a second employee looks at it. If that employee thinks the ride should be denied, UHA will send out a denial letter. This letter will be mailed within 72 hours of the decision.

Did your in-network provider ask for the ride? We will let them know that the ride was denied.

Do you disagree with the denial? See the 'What If I Do Not Agree with A Decision or Have a Complaint?' section on page 27.

When Are Rides Available?

Trips for covered services are available 24 hours a day, 365 days a year.

Some rides will be harder to schedule. Please ask as soon as you can if the ride is:

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

www.umpquahealth.com

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

bca-ride.com



- After hours
- Weekends
- Holidays

Who Can Receive These Rides and for What Reasons?

Per OAR 410-141-3920:

- UHA members can get rides to and from covered Oregon Health Plan (OHP) services. You can also get rides to the pharmacy to pick up your medicine.
- Compact of Free Association (COFA) Dental Program members and Veteran Dental Program members can get rides to and from dental services.

Before your ride is scheduled, BCB checks that:

- You are active on UHA.
- The ride is for a covered service or flexible service.
- You are eligible for services.
- The transportation is a covered NEMT service.
- The transportation is within UHA's service area, or if it is not, that the covered service or flex service is only available outside of the service area

Full Benefit Dual Eligible (FBDE) Members

FBDE members can also get rides through BCB. BCB will check if Medicare covers the ride. If it will, BCB will coordinate with your Medicare provider. If Medicare will not cover the ride, UHA will cover the ride through Medicaid.

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

If you are enrolled in the Veteran Dental Program or the Compact of Free Association (COFA) Dental Program (also called OHP Dental), you can only get rides to dental appointments.

If you are not sure what benefits you have or want to check if a ride is covered, call UHA Customer Care at 541-229-4842 (TTY 711) or TTY 541-440-6304.

NEMT & Flexible Services

Flexible Services are extra services. Umpqua Health Alliance (UHA) pays for extra services to help members get healthy or stay healthy. OHP does not require these services to be covered. UHA will decide if you can get flexible services. It depends on your needs and available resources.

UHA may pay for rides to certain community services that support health and well-being. These rides may need to be approved ahead of time. See the table below.

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

www.umpquahealth.com

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

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Service	Plan Approval Needed	No Plan Approval Needed
Adult Day Care	✓	
Alcoholics/Narcotics Anonymous Meetings		✓ (May be limited. A bus pass may be provided instead if you also have other regular covered visits.)
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>	No longer covered	
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)	No longer covered	
Nutrition Program for Women, Infants and Children (WIC)		✓
Self Help Group Meetings <i>Includes Chadwick Club House</i>		✓ (May be limited or replaced by a monthly bus pass)
Vocational Rehabilitation	✓	
Weight Control Programs	No longer covered	
Chadwick House	No longer covered	

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.

Support Options

These are some ways to make it easier for you to get support.

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- **Monthly Bus Passes** – We may give you a monthly bus pass. The pass can be used to get to different places. You can go on your own to the grocery store. You can go to support meetings or community programs.
- **Grocery Stops** – We want to make sure you have the food you need. You can stop at a grocery store on your way to or from an appointment. This will work if it does not add extra travel time. You have to set this up ahead of time.
- **Online Programs** – There are virtual options. These can help you stay healthy. There are online weight management classes and virtual support groups. These programs can often be done from home. These are free.

What Ride Types are Available?

We will make sure that you have the right type of ride. These are the types of rides:

- Tickets or passes for the bus or other mass transit
- Mileage refund
- Wheelchair van
- Sedan
- Secure transport
- Stretcher car

There are three levels of help a driver can give:

- **Hand-to-Hand:** Driver helps from inside the home to appointment check-in. This is for members who need full support.
- **Door-to-Door:** Driver helps from the home entrance to the facility entrance. This is for members who need a little support.
- **Curb-to-Curb:** Driver picks up and drops off at the curb. This is for members who are mostly independent.

BCB will decide what type of ride and help you need. They will follow the law (OAR 410-141-3955). Your ride will match your needs. When deciding which ride type is right for you, BCB reviews:

- Your ability to walk or if you use a walker, cane, or wheelchair.
- Your ability to move safely and perform daily activities.
- Whether you need help from an attendant.
- If your attendant meets program requirements.
- Any physical conditions that affect your ability to travel safely.
- Any mental conditions that affect your ability to travel safely.
- The level of support you need during the ride.

Are you using public transportation? Are you asking for mileage reimbursement? You need to make your own plans. BCB will not plan your ride.

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Service Modifications

The type of ride you get may be changed if your needs change. This is called a service modification. If there is going to be a change to your ride, you will get a letter telling you what is changing and why.

Some reasons your ride might change:

- You have a health problem that could be dangerous for the driver or others.
- You act in a way that threatens the driver or passengers.
- You do something that could cause harm to the driver, vehicle, or other passengers.
- You do something that makes local medical providers or clinics refuse to see you.
- You often cancel on the day of the ride or do not show up.

Secure Transports

Some members may need a special ride if they are having a mental health crisis or substance use crisis. This is for situations where someone might hurt themselves or others. UHA follows OAR 410-141-3940 and only gives this ride when no other ride is safe. make sure that members get this type of ride only when no other type of ride is safe. The ride goes to a Medicaid-approved facility that can help the member's urgent health needs.

During the ride, safety restraints may be used to keep everyone safe. If needed, an attendant may ride with the member for free. This could be a medical professional or someone required by law, such like a parent or guardian.

If you think a secure ride might be needed, call UHA or your provider right away. They will help arrange the safest ride.

What Happens on the Day of the Ride?

The Pick-Up Trip

Be ready at the pick-up time. If you are not ready, the driver will wait 15 minutes. Then the driver will tell BCB you did not show up and leave for the next passenger. You must call BCB to schedule another ride. Do NOT call the driver.

What if the driver is early? You do not have to leave before your scheduled pick-up. You can wait until your pick-up time.

What if the driver is late? The driver may arrive up to 15 minutes after your pick-up time. Plan extra time when you choose your ride time. If the driver is more than 15 minutes late, call BCB.

Can the driver make changes? Drivers cannot change the pick-up time. Only BCB or UHA can make changes.

BCB is a shared ride program. This means that other passengers may be picked up or dropped off along the way.

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Drivers cannot drop you off more than 15 minutes before a business opens. It is allowed only if you or your representative asks.

The Return Trip

If your return trip is not scheduled ahead of time:

Call BCB when you are ready to be picked up. The driver should arrive within 1 hour. If the driver does not arrive in that time, call BCB again.

If your return trip is scheduled ahead of time:

The driver should arrive at your pick-up location between 15 minutes before and 15 minutes after your scheduled time.

Pick-up rules near closing:

Drivers cannot pick you up more than 15 minutes after a business closes. It is allowed only if you or your representative asks. It may also be allowed if your appointment is expected to end within 15 minutes of it closing.

If you are not ready:

The driver will wait 15 minutes. After that, they may leave for their next pick-up. Before leaving, the driver will call BCB to tell them they are leaving. To reschedule your ride, you **MUST** call BCB. Do **NOT** call the driver.

Driver Restrictions

- Drivers cannot go in your room, unless you are leaving the hospital or moving on a stretcher.
- Drivers cannot go into the medical rooms or other areas of the building. If you need help, ask the office staff or your attendant. See the 'Attendants' section on page 20.
- Drivers cannot help move you from a bed to a wheelchair or from a wheelchair to a vehicle.
- Some drivers cannot help you go up or down stairs if you are in a wheelchair.
- Drivers cannot ask for or take cash fares or tips.

Safety Belts and Car Seats

Oregon law says everyone must wear the correct seat belt while riding in a vehicle.

If you or anyone riding with you needs a seat belt extender, tell BCB when you schedule the ride.

The law (ORS 815.055 and ORS 811.210) must be followed.

Car seats are required for :

- Children who weigh 40 pounds or less.
 - Children under 2 years old must sit in a rear-facing car seat.

Booster seats are required for:

- Children over 40 pounds who have reached the upper weight limit for their forward-facing car seat if they are under 4'9" or under the age of 8 and the adult belt fits.

A child must have an attendant go with them. The attendant can be a parent, guardian, or other adult caregiver.

The driver will not install the car seat. The attendant must bring the car seat and put it in the vehicle.

Car seats cannot be left in the driver's vehicle. This is because a different driver may pick you up from your appointment.

Attendants

An attendant can help a member during a ride if the driver cannot meet all their needs (OAR 410-141-3995). The attendant gives physical, behavioral, or emotional support during the trip.

The attendant can be:

- The member's parent, stepparent, grandparent or guardian
- The member's adult relative
- An adult chosen in writing by the parent or guardian
- A volunteer or employee of the Department of Human Services (DHS)

Rules for attendants:

- Children 12 and under must have an adult attendant
- Members with special physical or developmental needs must have an adult attendant no matter their age
- BCB does not provide an attendant. You, your parent, guardian, or caregiver must provide one. Drivers will not drive without a proper attendant.
- Children over 12 do not need an adult attendant. The provider at the appointment may require an adult signature. One adult can ride with a child at no cost.
- Only one attendant rides for free. Additional people may have to pay. If a secure transport is needed, an extra attendant may ride if needed for medical reasons.

BCB only provides the ride. They do not pay for the attendant's wages, meals, or other costs.

Wheelchair and Other Mobility Aids

BCB makes sure they have all the equipment to safely transport you. They follow all laws, including the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, and Oregon Revised Statute 659A.103.

Scooters: Three-wheeled scooters are hard to secure in the vehicle. If you use a scooter, you may be asked to sit in a vehicle seat for safety. You do not have to do this.

Walkers and canes: These must be safely stored in the vehicle once you are seated. The driver will help you secure them if needed.

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

Service Animals and Companion Animals

BCB allows trained service animals and companion animals in their vehicles. These animals help people with disabilities.

Accidents and Incidents

If there is an accident or incident, the driver will email BCB within 24 hours. They will include:

- Driver's name
- Passenger's name
- Location of the incident
- Date and time of the incident
- Description of what happened, including any injuries
- Whether anyone needed treatment and where they received it

If needed, a police report will be filed. The full report will be sent to OHA. BCB and UHA will cooperate with all investigations.

What Happens if There is a Problem?

Sometimes trips have problems. Things like bad weather or traffic can happen. BCB and UHA have plans to handle these problems.

If a delay could make you more than 15 minutes late, the driver will try to find another way for you to get there.

Bad weather may cause delays or limit rides. Bad weather includes:

- Extreme heat or cold
- Flooding
- Tornado warnings
- Heavy snow
- Icy roads

Bad weather can driving unsafe. BCB will check the weather and decide if it is safe to continue your ride. They will try to give you the right kind of ride for the weather.

If a driver cannot get to you safely, BCB will tell you. They may send another driver or use another transportation company.

Rides are still be available for critical medical care. Critical care includes, but is not limited to, renal dialysis, radiation, and chemotherapy.

How Do I Cancel or Reschedule?

If you need to cancel or change your ride, contact BCB as soon as possible. Do NOT call the driver. BCB will tell the driver and try to adjust for changes.

You can contact BCB by phone or online, 24/7.

What is a No Show?

- If you have a scheduled ride and do not cancel or change it, it is a no-show.
- If you call to cancel but the driver is already on the way, it is also a no-show.

Consequences of No Shows

It is important to cancel if you cannot go. If you have many no-shows, BCB may:

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

No shows can also affect other members.

How Does Reimbursement Work?

BCB can pay you back for some travel costs, including:

- Mileage
- Meals
- Lodging

Prior Authorization

Some trips need approval before you go. This is called prior authorization (PA). You need PA if:

- Your appointment is outside Douglas County or more than 75 miles from home
- You need a hotel stay before or after the visit
- You want us to pay for meals during travel
- Your provider says you cannot safely travel there and back in one day

If you are not sure if you need PA, call BCB at 877-324-8109 before your trip. They will tell you if PA is required and help you request it. If you do not get PA when required, we may not be able to pay you back.

Mileage Reimbursement

You can get mileage reimbursement if you can get yourself to an appointment. This involves using your own car or getting a ride from someone else.

Meal and Lodging Reimbursement

Meals: You can get money back for meals if your appointment is outside Douglas County and your travel takes at least 4 hours round-trip.

Lodging: You can get money back for a hotel if:

- Travel to your appointment starts before 5:00 am
- Travel from the appointment ends after 9:00 pm
- Your doctor says it is medically necessary

Sometimes, BCB may also pay for a hotel in special situations.

Attendants, Parents, or Guardians: If needed, an attendant can go with you and get money back for meals or lodging. This can happen if:

- You are a minor and cannot travel alone.
- Your doctor says an attendant must travel with you
- You are mentally or physically unable to travel alone.
- You cannot return home without help.

UHA may also allow refunds for extra attendants in special cases.

Steps to Receive Reimbursement

1. Get prior authorization (PA). Not all trips need PA. See the 'Prior Authorization' section on page 22.
2. Fill out the form. Complete the Reimbursement Verification Form. You can get it from <http://bca-ride.com> or call BCB Customer Service to have it mailed to you.
3. Get a signature. Have a healthcare professional sign the form. This can be a nurse, therapist, physician assistant, doctor, or nurse practitioner.
4. Send the form. Mail the completed form to BCB within 45 days of your appointment. Include all required documents.
 - If you are requesting reimbursement for multiple appointments, send the form within 45 days of the first appointment.
 - Requests received after 45 days may not be approved.

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

Reimbursement Timeline

Within 14 days after BCB gets your request, BCB will send you a check or a letter called a Notice of Action Benefit Denial (NOABD). The letter is sent if:

- Your request was denied or
- Your request was incomplete

If your request was incomplete, BCB will give you 14 more days to fix it.

Refunds under \$10:

BCB will not send a refund for less than \$10. Once your refund adds up to \$10.00 or more, BCB will send the payment.

Reimbursement Rates

- Private Car Mileage:
 - \$0.49 a mile
- Member Meals – \$34.00 per day
 - Breakfast: \$9.00 – *Travel must start before 6:00 am.*
 - Lunch: \$10.00 – *Travel must cover 11:30 am to 1:30 pm.*
 - Dinner: \$15.00 – *Travel must end after 6:30 pm.*
 - Attendant Meals – \$34.00 per day
 - Breakfast: \$9.00
 - Lunch: \$10.00
 - Dinner: \$15.00
 - You do NOT need to send receipts for meals.
- Lodging – \$110.00 per night
 - *Travel starts before 5:00 am or ends after 9:00 pm, or your health care provider says it's medically needed.*
 - Attendant lodging: \$110.00 per night (if in a separate room)
 - Lodging is not reimbursed if the trip can be done in one day, unless your doctor says it is medically needed.
 - Lodging is not reimbursed if appointments are scheduled on different days when it is possible to schedule on the same day.

If someone other than the member or a parent or guardian of a minor provides the ride, BCB may reimburse them.

Overpayments

Sometimes BCB may pay too much. This can happen if:

- BCB or another provider paid for mileage, meals, or lodging and someone else also paid for it
- You got a refund but didn't actually use the service

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- Mileage for a shared ride was paid to more than one member
- You sell or give away public transit tickets or passes

If BCB overpays you, you may be asked to return the overpayment.

Questions about Reimbursement

For more information about BCB Reimbursement Policy, rates, or prior authorization, please contact BCB Customer Service at 877-324-8109.

What If I Do Not Agree with A Decision or Have a Complaint?

How to File a Complaint, Appeal or Fair Hearing

You have the right to file a complaint (also called a grievance), an appeal, or request a fair hearing. We want to make it easy for you to do this and can help you at any step.

We can also show examples of the letters we send when we make a decision about your care. These include letters for:

- Approvals
- Denials
- Reductions or ending services

You can ask for copies of these letters anytime.

To file a complaint, appeal, or get more information, 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: www.umpquahealth.com/appeals-and-grievances/	Umpqua Health Alliance Attn: Grievance and Appeals 3031 NE Stephens St Roseburg, OR 97470 UHAGrievance@umpquahealth.com

We can help you complete forms and other steps to file a complaint, appeal, or request a hearing. Help can include:

- A qualified community health worker, including a peer specialist, personal navigator
- Care coordination services
- Interpreter services
- Helpful aids or services
- Letters in another language or format
- An explanation of the complaint, appeal, or hearing process
- Copies of policies or documents

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Filing a Complaint

If you are unhappy with BCB or UHA, you can file a complaint. We will try to fix the problem. You can file a complaint about anything, except an NOABD letter. For that, you must file an appeal.

You might file a complaint if:

- You have problems making appointments or getting a ride
- NEMT providers or drivers were rude, denied services, or violated your rights
- You didn't feel respected or understood by providers, staff, drivers, or UHA
- You received care you weren't sure about
- You got bills for services you didn't agree to pay
- You disagree with UHA extension requests to make decisions
- Driver or vehicle safety is a concern
- The service you got was low quality

You can submit a complaint by:

1. Calling UHA's Customer Care and asking us to file a complaint for you.
2. Calling UHA's Customer Care and asking for a form to mail back.
3. Mailing UHA Customer Care a letter about what happened.

Call our UHA 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: www.umpquahealth.com/appeals-and-grievances/	Umpqua Health Alliance Attn: Grievance and Appeals 3031 NE Stephens St. Roseburg, OR 97470 UHAGrievance@umpquahealth.com

You or someone you authorize can file a complaint at any time. Your medical provider or medical facility can also file a complaint for you, if you agree. Complaints can be sent to BCB, UHA, or both. UHA will keep a record, respond to, and work to solve all member complaints, no matter who receives them.

How UHA Handles a Complaint

When UHA gets your complaint, we will document it. The Appeals and Grievances team will review it and decide what can be done. We will do this as quickly as your health requires.

- Usually, the process takes 5 business days or less.
- If more time is needed, we will send a letter within 5 business days explaining why. We only ask for more time if it's in your best interest.
- You will get a letter within 30 days explaining how we will handle your complaint.
- The letter will be in the language you choose.

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Filing an Appeal

If a service is denied, you will get a letter called a Notice of Adverse Benefit Determination (NOABD). The letter explains:

- Why the service was denied
- Your right to ask for the decision to be changed. This is called an appeal.

Important:

- You must ask for an appeal within 60 days of letter's date.
- You cannot appeal until you get the letter. If you do not have the letter, (lost in the mail or never received), you can ask UHA for one.

Your rights in an Appeal:

- You can give information and testimony in person or in writing.
- You can make legal and factual arguments in person or in writing.
- You must do this within appeal deadlines.

UHA will document, respond to, and resolve all member appeals.

Learn More About the Steps to Ask for an Appeal or Hearing:

Step 1	<p>Ask for an appeal.</p> <p>You must ask within 60 days of the date of the denial letter (NOABD). Call UHA Customer Care at 866-672-1551 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 bit.ly/request2review.</p> <p>You can also mail the form or written request to UHA:</p> <p>Umpqua Health Alliance 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>Who can ask for an appeal?</p> <p>You or someone with written permission to speak for you. That could be your doctor or an authorized representative.</p>
Step 2	<p>Receiving a reply.</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.</p> <p>To support your appeal, you have the right to:</p> <ul style="list-style-type: none"> • Give information and testimony in person or in writing.

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	<ul style="list-style-type: none"> • Make legal and factual arguments in person or in writing. <p>You must do these things within the appeal timeframes listed below.</p> <p>How long do you get to review my appeal? 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>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 will be sent with the denial letter. You can also get it at 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.</p> <p>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.</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>
Step 3	<p>Getting a 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.</p>
Step 4	<p>Asking for a hearing. 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>What if I need a faster hearing? You can ask for a fast hearing. This is also called an expedited hearing. Use the online hearing form at bit.ly/ohp-hearing-form to ask for a normal hearing or a faster hearing.</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 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 written permission to speak for you. That could be your doctor or an authorized representative.

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/.

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.

Protections

When you file a complaint, appeal, or hearing, you have protections. UHA, its contractors, subcontractors, and providers cannot:

- Stop you from using the complaint or appeal process.
- Ask you to withdraw a complaint, appeal, or hearing you already filed.
- Punish a provider who asks for a faster result or supports your appeal.

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- Use your complaint, appeal, or hearing as a reason to punish you or try to remove you from the program.
- Stop you from filing a complaint with UHA if you already filed one with BCB and are unhappy with their response.

Member Rights and Responsibilities

Your Rights as an OHP Member

Access to Services

- You can get services during the same office hours as everyone else.
 - Priority populations have rights.
 - People using IV drugs or those with Opioid Use Disorder have the right to:
 - Assessment within 72 hours
 - Entry to services within 72 hours
 - Residential treatment within 14 days of referral
 - Members on Medication Assisted Treatment get:
 - Assessment within 72 hours
 - Entry to services within 72 hours
- You can get emergency and urgent care 24/7 without prior approval.
- You can access behavioral health services when you need them.
- You have the right to needed and reasonable services to diagnose your current health problem.
- You can choose a diverse provider, if available within the network, in any settings and that is easy for you to reach.
- You should be treated with dignity and respect, the same as anyone not on OHP.
- You have the right to get information about your condition, treatments, and options, even if it costs more. This helps you make informed choices.
- You can get community-based care, including 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.
- You can get help with addiction to cigarettes, covered behavioral health, substance use disorder treatment, family planning, or related services without a referral.
- You can get a referral to a specialist for covered services.
- You can get referral or a second opinion at no cost to you, if UHA's policies are followed.
- You can receive care at places that offer equal access to males and females under 18, including services through human services and juvenile corrections programs provided by or funded by the State of Oregon (ORS 417.270).
- You can have direct access to a women's health specialist.
- You will be informed of your rights under Title VI of the Civil Rights Act and ORS Chapter 659A.

Care

- You can choose a Primary Care Provider (PCP) and change providers according to UHA's policies.
- You have the right to be told if your appointment is canceled in a timely manner.

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- You can help make decisions about your health care, including agreeing to care or refusing care, unless a court orders otherwise. You will be told what happens if you refuse care.
- You have the right to one source of person-centered care that respects your choices, independence, dignity, and medical needs and that meet the standards of medical care.
- You should have regular contact with a care team who manages your care.
- You can get help accessing health care, local supports, and statewide services, including cultural and language supports. This may include:
 - Certified or qualified health care interpreters
 - Certified traditional health workers, such as:
 - Community health workers
 - Peer wellness or support specialists
 - Doulas
 - Personal health navigators.
- You can actively participate in your treatment plan.
- You have a right to your clinical records, which include your conditions, services, and referrals. You can:
 - Access your health records, unless restricted by law.
 - Request corrections to your health record.
 - Transfer, or have UHA transfer, your records to another provider.
 - Request copies of records from providers or UHA
- You can create an Advance Directive to accept or refuse medical, surgical, or behavioral treatment, and execute powers of attorney for health care under ORS 127.
- You can create a Declaration of Mental Health Treatment (ORS 127.703), and file a complaint if not followed.
- You have the right to covered preventive services.
- You have the right to needed covered services, even from an out-of-network provider if UHA's network cannot provide them in a timely way.

Support

- You have the right to services and supports that fit your cultural and language needs and are close to where you live.
 - You can get services in non-traditional settings such as online.
 - If you choose telehealth services, you can get it in the language you need.
 - You can also choose in-person visits, not just telehealth.
- You have the right to providers and facilities that meet your physical access needs, provide reasonable accommodations, and have accessible equipment.
 - Let your provider know what your needs are so you can get these services.
- You have the right to written materials that clearly explain:
 - Your rights and responsibilities
 - Your benefits
 - How to access services
 - What to do in an emergency.
- You can bring a friend, family member, representative or advocate to appointments and other times as allowed by clinical rules.
- Written materials must be explained in a way that you understand, including how coordinated care works and how to get services in the coordinated health care system.

- You have the right to free certified or qualified health care interpreter services.
 - Information must be given in a way that works for you, including:
 - Other languages
 - Braille
 - Large print
 - Electronic, audio, or video formats
 - Use of other auxiliary aids.
 - This ensures that people with disabilities can access health information as required by law (Section 1557 of the PPACA).
- You have the right to receive information about your plan (42CFR438.10):
 - Within 30 days of enrollment
 - Within the timeframe Medicare requires if you are an FBDE members.
 - You have the right to get this information at least once a year.
- UHA will make sure that staff who interact with potential members are fully trained. Training includes:
 - Enrollment and disenrollment
 - Fraud, Waste and Abuse
 - Grievances and Appeals
 - Advance Directives.
 - How to access interpreter services and in-network bilingual providers or staff.

Rights to Dignity, Respect, and Privacy

- You have the right to be treated with respect and dignity, and your privacy should be protected.
- You cannot be restrained or locked away to punish you, force you to do something you don't want, or just because it's easier to care for you.
- Using your rights will not change how UHA, your providers, or the State Medicaid agency treats you.
- You can report if your rights are not being respected, your health information isn't protected, or if you are treated unfairly. You can:
 - 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.
 - Ask for a written copy of UHA's policy about not discriminating.
 - Ask for information about how UHA or any doctor incentive programs work.
- Know how to file a complaint or appeal and get a response.
- Ask for a hearing if you disagree with a decision.
- Get help to appeal if a service is denied or changed.
- Receive a Notice of Adverse Benefit Determination (NOABD) if a service is denied or changed.
- Your medical records are private, except when the law allows sharing.
- You have the right to get a notice explaining how your health information may be used or shared.
- You can decide if you want to give permission before certain health information is used or shared.
- Kids and teens can use all of their health care rights. Sometimes, someone under 18 may need or want to get health care on their own.
- To learn more about the rights of minors, you can visit:
 - sharedsystems.dhsoha.state.or.us/DHSForms/Served/le9541.pdf.

Your Responsibilities as an OHP Member

Getting Care

- Find a doctor or other provider you can work with and share all your health information.
- Go to regular check-ups and preventive care at your PCP or clinic.
- Use your PCP or clinic for tests and treatments, unless it's an emergency.
- Get a referral from your PCP before seeing a specialist, unless self-referral is allowed.
- Use urgent and emergency services only when needed. Tell your PCP within 72 hours if you went to the ER.
- Help your provider get records from other providers. You may need to sign a Release of Information.
- Give correct information for your medical records.
- Help make a treatment plan and follow it. Be involved in your health care.
- Follow your provider's instructions or ask about other options.
- Bring your medical ID cards to appointments. Tell providers about OHP or any other insurance. Let them know if you were in an accident.
- Ask questions if you don't understand your condition or treatment.
- Be on time for appointments. Call at least one day ahead if you can't make it.
- Treat UHA, providers, and staff with respect.
- Tell UHA about any problems or complaints.

Reporting Changes to OHP

- New address or phone number.
- If you become pregnant and when your child is born.
- If someone moves in or out of your household.
- If you have any other health insurance.

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.
- 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
- 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 Might Have to Pay for

- You might have to pay for services that OHP does not cover. There are rules (OAR 410-120-1200) that list these services. If you agree to a service that is not covered, there is a rule that lets providers bill you (OAR 410-120-1280).
- You might have to pay if you miss an appointment without telling the provider.

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- You might need to pay your OHP premium on time, if you have one.
- You might need to pay UHA back if you get money from another insurance for an accident that also paid for your medical bills.

Your Rights and Responsibilities as a Rider

Your rights:

- Get a safe and dependable ride that meets your needs.
- Be treated with respect.
- Ask for help with translation or interpretation when talking to customer service.
- Get materials in a language or format that works for you.
- Get a written notice if your ride is denied.
- File a complaint if your ride experience was not good.
- Ask for an appeal.
- Ask for a hearing.

Your responsibilities:

- Treat drivers and other passengers with respect.
- Call as early as possible to schedule, change, or cancel a ride.
- Use seatbelts and safety equipment as required by law.
- Ask in advance if you need extra stops, like going to the pharmacy. Drivers can only make stops approved by BCB.

UHA and BCB's Privacy Policy

State and Federal laws protect members' privacy. UHA has to follow a law called the Health Insurance Probability and Accountability Act (HIPAA). We protect your medical records and keep them private.

- UHA and BCB's employees and drivers cannot share your Oregon Health Plan (OHP) information, unless it is needed for their normal work.
- We will not release your health care information without your approval, except in an emergency or if the law requires it.
- We will not talk about your appointments where other people can hear.
- Sometimes, the state or federal government may review your medical records to make sure you got the best care.

How UHA Keeps You Safe

UHA checks all Non-Emergent Medical Transportation (NEMT) providers before they give riders to members. This check is called a Readiness Review. It makes sure that every driver and vehicle is safe and that drivers have the right training and background.

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Driver Rules

UHA follows safety rules under OAR 410-141-3925. Drivers must pass background checks and meet all requirements before giving rides. Drivers must:

- Have a valid driver's license with any needed endorsements
- Be checked to make sure they are allowed to work in federal programs
- Pass all background checks

Vehicle Rules

Vehicles must follow certain rules to keep passengers safe and comfortable. The rules under OAR 410-141-3925 include:

- The inside of the vehicle must be clean with no trash.
- No smoking, vaping, or using aerosol sprays in the vehicle.
- Vehicles must follow all local, state, and federal laws for passenger safety.

Safety equipment in each vehicle:

- Seat belts that work for all passengers (if required by law)
- First aid kit
- Fire extinguisher
- Reflective or warning devices for roadside safety
- Flashlight
- Tire traction tools, when needed
- Disposable gloves
- Equipment to safely secure wheelchairs or stretchers

Vehicles must also be in good working condition, including:

- Side and rearview mirrors
- A working horn
- Heating, air conditioning, and ventilation
- Turn signals, headlights, taillights, and windshield wipers that work

Trip Tracking

UHA keeps basic information about each trip, such as:

- The date and time of the ride
- The member's ID number
- Where the member is going
- Why the member needs the ride
- If the member or driver did not show up

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BCB and UHA use this information to make sure members get to their appointments.

If a driver misses a pick-up, BCB will call the member. They will check to make sure the member is safe. Then BCB will try to send another driver if there is still time. If it is too late, BCB can help the member reschedule the appointment. BCB will take action with the driver if needed.

The state also checks to make sure members are getting the services they need. UHA gives trip information to the Oregon Health Authority (OHA) when they ask for it.

NEMT Policies

If you want to see UHA's rules for Non-Emergency Medical Transportation (NEMT), go to our website at www.umpquahealth.com and look in the OHP Member section.

Using the BCB TripSpark Member Portal

About the Online Portal

The BCB TripSpark website lets you manage your rides without calling BCB.

With BCB TripSpark, you can:

- Ask for a ride.
- See your scheduled rides.
- Cancel a ride.
- Update your contact information.
- Ask for a ride home using the "I am ready" button.



How to Get to BCB TripSpark:

Getting started is easy:

1. Go to <https://portal.bca-ride.com/Registration>
2. Sign up with your medical ID number and an email address.
3. Log in and start using the portal.

Who Can Get an Account

Only members who qualify for NEMT services can use the BCB TripSpark website. This helps keep your information safe.

To set up your account, enter the same information you use with your health plan. You will need your first and last name, medical ID number, phone number, and ZIP code. BCB will check this information with your health plan.

You will also need an email address to sign up. After you register, you will get an email with your client ID. This ID is not the same as your UHA ID. Then you will be asked to create a new password. Be sure to check your spam folder if you don't see the email.

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Once your account is set up, you can use the portal to schedule rides.

The portal lets you or someone helping you – like a family member or caregiver - request a ride, see your schedule, and make updates. You can also track your driver on a map as they get close.

You can get notifications about your rides and make changes in real time. You can book or cancel rides 24 hours a day, 7 days a week.

How to Get Technical Assistance

BCB's Customer Service is ready to help. They can answer questions about the TripSpark portal. They can help you book a ride. You can call Bay Cities Brokerage (BCB) at 877-324-8109. You can also email them at support@bca-ride.com.

Frequently Asked Questions

How do I schedule a ride?

Call BCB Customer Service. They are open 24 hours a day, 7 days a week. You can also schedule a ride on their website. For more details, see the section 'How do I Schedule a Ride?' on page 12.

Who can get rides?

You must be a UHA member to get rides to health care appointments. These rides are for people who do not have another way to get to their appointment.

Who can set up a ride for me?

You can schedule your own ride. A family member, guardian, caregiver, or someone who works where you live can also schedule a ride for you. They will need basic information about you, such as your name, date of birth, phone number, or member ID number. They must call BCB Customer Service.

What if I need an ambulance?

If you have an emergency, call 911.

BCB only gives rides for non-emergencies. If you need an ambulance but it is not an emergency, call BCB. Tell them about your medical needs so they can schedule the right type of ride.

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

Sometimes you can't plan ahead. If you are leaving the hospital, going to urgent care, or need a ride for chemotherapy or dialysis, you can still get a last-minute ride. Just call BCB.

How much does a ride cost?

Rides are free for UHA members. If you get a bill from BCB, call UHA Customer Care.

What happens if my ride request is denied?

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If your ride is denied, you have the right to appeal the decision. To learn more, see the section 'What If I Do Not Agree with A Decision or Have a Complaint?' on page 27. You may still be able to get mileage reimbursement if a ride is denied.

Will BCB give my child a car seat or booster?

No, BCB does not provide car seats or boosters. By law, children must be in an approved car seat or booster if they:

- Are under 8 years old
- Are shorter than 4'9"
- Weigh less than 40 pounds

Please have the correct seat ready when the driver arrives.

Words to Know

Appeal: When you ask your plan to look again at a decision they made about your care. You can do this if you disagree with their decision.

Attendant: A person who helps someone during a ride or appointment.

Bad Weather: Very hot or very cold weather, flooding, tornado warnings, heavy snow, or icy roads.

BCB (Bay Cities Brokerage): The company UHA uses to schedule and provide NEMT rides.

CCO: Coordinated Care Organization. A group of local health care providers – like doctors, nurses, dentists, and counselors – who work together to help OHP members stay healthy

CFR: Code of Federal Regulations. A list of national rules and laws.

Complaint: When you say you are not happy about your plan, provider, or clinic. The CCO must respond.

Corrective Action Plan: A written plan that explains how a problem will be fixed.

Denial: When a request for a ride or refund is not approved, is stopped, or is reduced.

Emergency: A serious illness or injury that needs care right now – for example, heavy bleeding, a broken bone, feeling out of control, or wanting to hurt yourself.

Emergency Medical Transportation: An ambulance ride or emergency flight you get when you call 911. EMTs give you care during the ride.

FBDE (Full Benefit Dual Eligible): Members who have both Medicare and Medicaid.

Grievance: Another word for complaint about your plan, provider, or clinic.

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In-network Providers: Providers who have agreed to provide services to UHA members.

Mass Transit: Public transportation, like buses or trains.

Medically Necessary: Services or supplies that a doctor says you need to stay healthy, prevent problems, or treat a condition.

Member: A person who can get UHA or NEMT services.

NEMT (Non-Emergent Medical Transportation): Rides for medical care that is not an emergency.

No-Show: When you miss a scheduled ride or cancel after the driver is already on the way.

Oregon Administration Rules (OAR): Official rules made by the State of Oregon.

Oregon Health Authority (OHA): The state agency that runs OHP and other health programs.

Oregon Health Plan (OHP): Oregon's health coverage program for people with low incomes.

Passenger: Someone riding in a vehicle who is not the driver.

Policy: A rule or plan a company follows.

Preapproval (Preauthorization, PA, or Prior Authorization): Permission you must get before getting certain services so the plan will pay for them.

Refund: Money paid back to you.

Secure Transport: A special type of ride for people who may hurt themselves or others.

Transportation Driver: A trained person who drives you to and from appointments.

Trip: One ride from where you are picked up to where you are dropped off.

Umpqua Health Alliance: The health plan for OHP members in Douglas County.

Urgent: Care you need the same day, such as for strong pain or when waiting could make you much sicker.



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