

Louisiana Department of Health

RFP #: 3000018038

Business and Technical Proposals

Redacted COPY

January 4, 2022



2.5 Cover Letter

January 3, 2022

Louisiana Department of Health
Bureau of Health Services Financing
628 North Fourth Street, 7th Floor
Baton Rouge, LA 70802
Attention: Ali Bagbey, RFP Coordinator

Ms. Bagbey and the LDH Evaluation Committee,

It has been our distinct privilege to work with the Louisiana Department of Health (LDH) for the last seven years. Southeastrans first partnered with LDH in 2014 to manage prior authorization services for the Department's Medicaid NEMT program. When NEMT services were carved-in to the Managed Care Organization (MCO) contracts in 2015, we assumed responsibility for all NEMT services for the Department's remaining fee-for-service beneficiaries. We are also contracted with AmeriHealth Caritas to manage NEMT services for their membership.

These relationships remain very important to us today and we continue to invest in our presence in Louisiana and service to Medicaid beneficiaries throughout the state. In fact, we opened a call center in our Baton Rouge facility on November, 1, 2021 adding 18 local call center agents and managers, in advance of HR 68's requirement to do so because we are committed to the State of Louisiana and doing our part to support economic growth within our footprint. Today, we employ 42 Louisiana residents in Baton Rouge.

Please find below, the specific information required for inclusion in this Cover Letter.

2.5.1 <i>Administrative Office:</i>	Administrative Office and Call Center 5745 Essen Lane, Suite 220 Baton Rouge, Louisiana 70802
2.5.2 <i>Corporate Principal Office Registered with the State:</i>	Corporate Headquarters 4751 Best Road, Suite 300 Atlanta, Georgia, 30337
2.5.3 <i>Name/Address for Issuing Checks/Drafts:</i>	Southeastrans, Inc. Attn: Finance 4751 Best Rd, Suite 300 Atlanta, Georgia 30337
2.5.4 <i>Ownership Status:</i>	Southeastrans is privately held by Steve R. Adams, President and Chief Executive Officer.
2.5.5 <i>Type of Legal Entity:</i>	Southeastrans is incorporated as domestic for-profit corporation under the

	laws of Georgia.
2.5.6 <i>Out of State Proposer</i>	Steve Buckner, Louisiana Director of Operations/Contract Operations Manager, located in our Baton Rouge Administrative Office and Call Center
2.5.7 <i>Louisiana State Employees</i>	Southeastrans has no plans to employ current or recent Louisiana state employees for this engagement.
2.5.8 <i>Identification Numbers</i>	FEIN #: 58-2504845
2.5.9 <i>Statement of Compliance with Contract Terms</i>	Southeastrans requests no exceptions

Over the last seven years, we have worked tirelessly to not just deliver the services our contract requires but to understand and appreciate the nuances of Louisiana, its people and culture, the transportation provider community, and above all, the beneficiaries we proudly serve. We are well prepared to manage and nurture the state's Medicaid NEMT/NEAT programs for the FFS and MCO populations statewide and to continue doing so in a transparent and honest way.

The information we have provided throughout this proposal concisely offers LDH insight into all of the things that make Southeastrans not only a good choice for Louisiana, but the best choice. We diligently manage every aspect of our programs, including call center operations, eligibility screening, scheduling, dispatching, billing, and developing an efficient and sufficient NEMT provider network. We credential local networks of commercial, non-profit, and public transportation providers, and make sure beneficiaries have access to the right level of service, when they need it. Honestly, every broker worth their salt does these very things. What makes Southeastrans different from other brokers is that we conduct our business as if we are arranging and managing transportation services for our friends, our brothers and sisters, our parents and grandparents, and our children. We take special care of the beneficiaries we serve, in an agile and innovative way and we believe our beneficiary-focused service model sets us apart from the rest.

Sincerely,



Dena Adams-McNeish
 Chief Development Officer
 Southeastrans, Inc.

Table of Contents

2.5	Cover Letter.....	1
2.6	Business Proposal.....	3
2.6.1	Mandatory Qualifications.....	4
2.6.2	Conflict of Interest.....	8
2.6.3	Financial Condition (Exempt from Page Limits)	8
2.6.4	Required Attachments (Exempt from Page Limits).....	8
2.7	Technical Proposal.....	9
2.7.1	Proposal Organization and Experience	9
2.7.2	Staff Qualifications and Training	17
2.7.3	Approach and Methodology.....	27
2.7.4	Case Scenarios	55

Appendices

- A. Certification Statement
- B. Audited Financial Statements
- C. Compliance Matrix
- D. Electronic Vendor Payment Solution
- E. Key Staff Resumes
- F. Transportation Provider Agreement
- G. Southeastrans Board Resolution for Signatures

The data contained in pages 8, 11, 12, 13, 16, 17, 18, 19, 20, 21, 22, 32, 33, 39, 42, 46, 47, 48, 51, 56, 59, and 60 of the proposal have been submitted in confidence and contain trade secrets and/or privileged or confidential information and such data shall only be disclosed for evaluation purposes, provided that if a contract is awarded to this Proposer as a result of or in connection with the submission of this proposal, the State of Louisiana shall have the right to use or disclose the data therein to the extent provided in the contract. This restriction does not limit the State of Louisiana’s right to use or disclose data obtained from any source, including the Proposer, without restrictions.

2.6. Business Proposal

2.6.1 Mandatory Qualifications

Southeastrans exceeds all mandatory qualifications outlined in the Department's RFP. Southeastrans, Inc. is a proven provider of comprehensive, non-emergency medical transportation (NEMT) management services with more than 21 years of experience, including seven years in Louisiana. Serving more than three million covered lives, Southeastrans operates under 13 NEMT contracts with 11 clients in seven states and the District of Columbia where we assure the delivery of more than 5 million trips annually.

2.6.1.1 Capacity and Willingness to Perform

Southeastrans employs over 1,000 NEMT professionals and has a contracted NEMT network of more than 1,300 transportation providers with approximately 5,300 credentialed vehicles across our book of business. Today, our Louisiana transportation network is comprised of 141 contracted transportation providers offering 303 credentialed vehicles and employing 330 credentialed drivers – not to mention numerous gas reimbursement drivers and non-contracted Council on Aging (COA) providers. We are ready and able to grow this network as beneficiary demand requires and as new a contract is awarded.

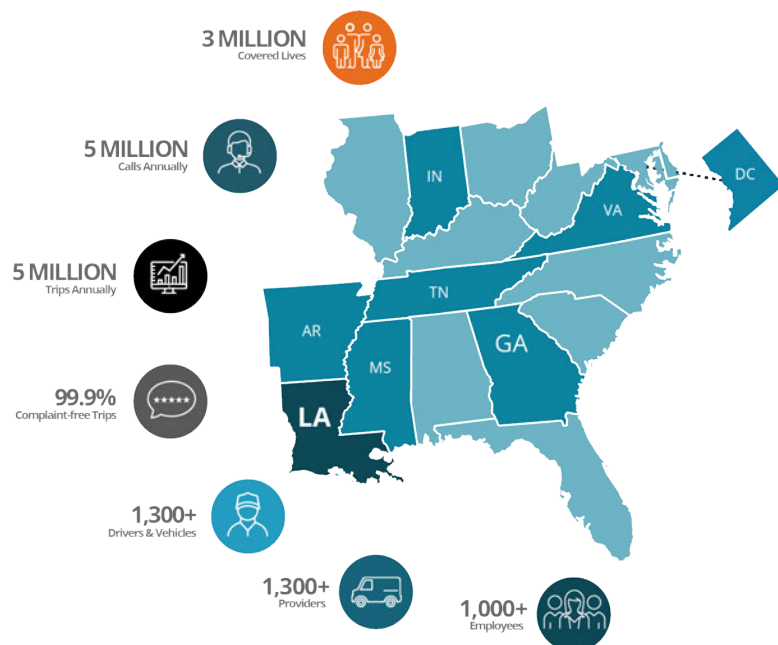


Figure 2.6.1.1: Southeastrans' Performance to Date

Southeastrans offers a full complement of NEMT broker services for LDH and Louisiana's health plans, including call center services, transportation provider network development and oversight, compliance, training, quality management, utilization review, claims administration, information technology services, and data management and reporting.

We also offer innovative solutions that add value to the NEMT programs we serve, from a beneficiary, transportation provider, LDH, and MCO perspective. There are no extra fees or contingencies associated with these solutions. They are simply included in the service we provide. We like to think of them as *lagniappe* – a little something extra. Here is a quick synopsis.



★ **No Cost Mobile Technology:** Southeastrans is the *only* broker currently providing mobile devices and an airtime service plan to each contracted transportation provider, at no cost. If a transportation provider prefers to use their own devices for NEMT, we offer a free app they can easily install. Our technology platform is at the center of our management information system architecture and integrates directly with transportation providers.



Southeastrans has provided free mobile devices and airtime to our transportation provider networks since 2011 and is the only broker to do so today.

★ **Transportation Provider Portal:** In addition to providing communication and training information, our Transportation Provider Portal helps transportation providers better manage their operations by providing secure access to claims information, claims submission, reports, trip manifests, forms, and other provider-related documentation. When providers process claims using the portal, Southeastrans grants them access to productivity reports that provide statistics pertaining to the number of trips submitted. It also enables them to run and export reports in multiple formats for integration into their business systems.

★ **Client Portal:** Our Client Portal gives LDH unprecedented online access into program activities. This technology is designed for authorized LDH staff to access information on both an individual-beneficiary basis and in aggregate. LDH personnel will see the same real-time data that our team sees through our state-of-the-art technology platform, Net InSight™. Some of the functionality available in the Client Portal includes, but is not limited to the ability to:

- Access self-service reporting of monthly, quarterly, and annual program information
- Reports on upcoming trips, by parish, provider, and date of service
- Trip history reporting
- Complaint reports
- Reports on predefined KPIs and other service metrics

The platform can generate a full set of data that are available for export or printing, in various formats (charts, graphs, tables),

★ **Beneficiary Portal & App:** In addition to scheduling and managing their trip requests, beneficiaries use our Beneficiary Portal to view provider assignments and important messaging including health reminders (e.g., flu shots) or alerts (e.g., closures or delays due to adverse weather), access to forms, educational videos, and quick access to request help.

Mirroring the functionality of the portal, our Beneficiary App functions with both Android and Apple smartphones. The app empowers beneficiaries by enabling them to manage their own transportation including the ability to easily schedule transportation with several taps on their device, as well as view, modify and cancel existing reservations, and view trip history.

- ★ **Facility Portal:** Our Facility Portal is a secure website where facilities can receive educational messages, schedule their patients' trips, and monitor transportation. They may also access documents like the Certificate of Ambulance Transport (CAT) form, renew standing orders, complete beneficiary trip verifications, cancel trips, and communicate directly with our facility liaison staff.
- ★ **Our Call Center Technology:** Our Louisiana call center is a complete call center suite that allows us to engage with beneficiaries through secure communication channels at any work location. It is built upon a cloud infrastructure, so calls can be managed no matter where Customer Service Representatives (CSRs), beneficiaries, facilities, or transportation providers are located. This is particularly important in coastal states like Louisiana where hurricanes threaten six months of the year. We are prepared to take calls in the most precarious situations. The system operates on a secure platform, including end-to-end data encryption, which safeguards protected health information (PHI), is HITECH compliant, and meets all Health Insurance Portability and Accountability Act (HIPAA) standards.
- ★ **Artificial Intelligence (AI) Call Center Tool:** Every call received in our call centers is not only recorded but analyzed using our powerful AI tool. Employing speech and natural language technologies and artificial intelligence, the tool supports our Call Center Managers and Supervisors by performing deep analysis of calls and can even detect sentiment and tone of voice. The tool helps our managers get to the root cause of customer service issues quickly so that coaching can be initiated. It also helps identify positive interactions so that top performing CSRs can be recognized.
- ★ **Beneficiary Care Program:** Because drivers may spend more time with a beneficiary than their health care provider, we designed the Beneficiary Care Program. Using this mobile technology solution, NEMT drivers can report concerns they might identify during their interactions with the beneficiary, such as loss of utilities, lack of food, neglect, abuse, or other issues the driver observes. Notifications are sent to the appropriate contacts for intervention.
- ★ **Claims Concierge:** Our Claims Concierge Service eases the burden of claims submission and certification for transportation providers and assists those with ongoing claims submission or processing issues. Our Provider Relations/Claims Teams proactively monitor claims for error trends and patterns and reach out to associated transportation providers to assist them, making certain they are paid for all eligible, clean claims in a timely way.
- ★ **NEMT Insurance:** We have witnessed the difficulty and sometimes devastating expense our NEMT providers face when acquiring and maintaining insurance. As a solution, we have partnered with a peer organization to form a captive insurance company, NEMT Insurance, LLC – strictly for the purpose of supporting the needs of our transportation providers. NEMT Insurance offers coverage exclusively to the NEMT and Paratransit industry.

2.6.1.2 Not an Excluded Individual/Entity

Southeastrans is not an excluded entity and does not employ or associate with excluded

entities or individuals as described in 42 C.F.R. §438.808. It is our policy to verify that all potential and current employees and downstream entities, including transportation providers and their employees, are not classified as an excluded individual/entity prohibited from participation in the programs we serve. Individuals and downstream entities are verified prior to starting work with Southeastrans in any capacity, and every 30 days thereafter.

Southeastrans conducts a monthly screening of the following sources to guard against hiring, employing, or working with excluded parties:

- U.S. Department of Health and Human Services (DHHS)
- Office of Inspector General (OIG)
- List of Excluded Individuals and Entities (LEIE)
- Official U.S. Government System for Award Management (SAM)
- Excluded Parties List System (EPLS)
- 43 State Exclusion Databases Prior to engagement of potential personnel and downstream entities
- Criminal Background and Registry (abuse, sexual offender) checks in accordance with state law and client policy

Parties found on any exclusion are removed from employment and/or servicing our contracts.

2.6.1.3 Minimum Years of Experience

Southeastrans exceeds the minimum experience requirements of the RFP. We have been providing Transportation Broker services for more than 21 years. Our current contractual relationships, listed below, span the last three years and beyond.

State	Contract	Service Period
Arkansas	Department of Human Services	Feb. 2013 - Present
	WellCare (Centene)	Jan. 2018 - Present
District of Columbia	Health Services for Children with Special Needs (HSCSN)	Nov. 2011 - Present
Georgia	GA Department of Community Health	Mar. 2000 - Present
	Peach State Health Plan (Centene) CHIP/MA Plans	Jul. 2006 - Present
	WellCare (Centene)	Jan. 2019 - Present
Indiana	Family and Social Services Administration	Jun. 2018 - Present
Louisiana	AmeriHealth Caritas	Apr. 2018 - Present
	Louisiana Department of Health	Apr. 2014 - Present
Mississippi	WellCare (Centene)	Oct. 2018 - Present
	Shared Health Mississippi (BlueCare)	Jan. 2020 - Present
Tennessee	Blue Care Tennessee	Sept. 2008 - Present
	WellCare	Jan. 2018 - Present
Virginia	Optima Health Plan	Jul. 2017 - Present
	Virginia Premier	Mar. 2021 - Present

2.6.2 Conflict of Interest

Southeastrans has no interests that will conflict with our performance of the required services under this RFP. This claim is supported by our fully executed version of Attachment A, Certification Statement provided in **Appendix A**.

2.6.3 Financial Condition (Exempt from Page Limits)

We are an organization that is always concerned with our ongoing financial integrity and as such, our finances are secure and our resources robust as evidenced by our financial reports provided in **Appendix B**.

2.6.4 Required Attachments (Exempt from Page Limits)

The following required forms are included in Appendix A, C, and D respectively.

- **Appendix A:** Attachment A, Certification Statement
- **Appendix C:** Proposal Compliance Matrix
- **Appendix D:** Attachment C, Electronic Vendor Payment Solution

2.7. Technical Proposal

2.7.1 Proposal Organization and Experience

2.7.1.1 History, Corporate Structure, Years Served as a Broker


History

Southeastrans, Inc. is a proven provider of comprehensive, non-emergency medical transportation (NEMT) management services. We have more than 21 years of experience delivering custom medical transportation solutions, including seven years in the state of Louisiana. Southeastrans is a privately held company with no ties or obligations to a parent organization. We currently employ over 1,000 individuals who are dedicated to coordinating and managing the delivery of Medicaid and Medicare transportation services.

Southeastrans, Inc. was incorporated as a domestic for-profit corporation under the laws of Georgia on January 27, 2000. Steve R. Adams, our President and Chief Executive Officer, founded the company after a 27-year career in the medical transportation industry. He owns and operates West Georgia Ambulance Service, an emergency and non-emergency medical transportation enterprise located in Carroll County, Georgia. Steve's personal experiences as a business owner in the medical transportation industry formed his vision for building a beneficiary focused NEMT brokerage company. He established Southeastrans knowing that an organization directed by leaders with hands-on NEMT experience would be uniquely positioned to offer exceptional customer service based on their intimate understanding of the diverse transportation needs of Medicaid beneficiaries.

In addition to Steve, our Chief Financial Officer and our Vice President of Operations came to Southeastrans with extensive experience in the emergency medical service industry. Our Chief Operating Officer's prior experience was in telecommunications and information technology, rounding out our leadership's solid foundation for the business philosophies and practices that have led to Southeastrans' growth and recognition as a respected NEMT broker.

As we chart the course into our 22nd year as an organization, the leadership team has been focused on all the attributes that have defined us as an organization. Southeastrans is a very different entity today than on January 27, 2000, when we first turned on the lights. The time has come to shine a little brighter. In the first quarter of 2022, we become **Verida, Inc.**

The Verida logo consists of an orange icon of five arches surrounding a central point, followed by the word "VERIDA" in a bold, orange, sans-serif font. **Verida's** new logo features a design of five arches surrounding the first letter 'V'. Arches in the course of history have always held significant meaning as their invention is the precursor to all modern architecture. The structure allows for a stronger foundation to create bigger and more complex buildings. Therefore, we believe there is no better representation of our five core values, that LDH can continue to rely on.

1. We are **Person Centered** – we aspire to never lose sight of each person's needs and unique circumstances.

2. We are **Compassionate** – we strive to always listen without judgment, while offering encouragement and support to our colleagues and every person we serve.
3. We are **Innovative** – we are diligent in our quest to continuously improve our processes and people focused technology to advance the wellbeing of everyone.
4. We are **Adaptable** – we employ a multifaceted workforce that is able to be flexible under a myriad of changing conditions and do so with agility and precision.
5. We are **Purpose-Driven** – we act “on purpose” to improve and grow, always striving to build a culture that engages people first, then inspires them to exceed expectations.

Local History

Southeastrans has had the privilege of working in Louisiana for the last seven years, first by partnering with the Louisiana Department of Health (LDH) in 2014 to manage prior authorization services for the Department’s Medicaid NEMT program. When NEMT services were carved-in to the Managed Care Organization (MCO) contracts in 2015, Southeastrans assumed responsibility for managing all NEMT services for the

“Southeastrans is truly a partner with us as they always strive to meet the needs of the plan and the members. The State Director for SETI and team do take a personalized approach to services in Louisiana. This personalization and attention have allowed us to address issues real-time and develop processes to prevent failures down the road.”

Javier Munez - Director NEMT Services
AmeriHealth Caritas
Baton Rouge, Louisiana

Department’s remaining fee-for-service beneficiaries. We also contract with AmeriHealth Caritas to provide NEMT services for their beneficiaries. We continue to maintain these relationships today and have already prepared our Baton Rouge facility to provide all call center services for the beneficiaries we serve in Louisiana.

Corporate Structure

Our corporate structure is designed to be simple and direct and complements our corporate values. This structure allows for autonomy, while enabling optimal control and performance at all levels. This approach provides:

- Minimal layers of management, with clear lines of authority
- Delegated authority commensurate with responsibility at each level
- Ability to draw from organizational resources to perform the functions necessary to support the immediate needs of the LDH program

The organizational chart in **Figure 2.7.1-1** shows the management structure of Southeastrans, Inc. as it relates to all our existing and future contractual relationships.

Years of Experience as a Broker for MCO/FFS Programs

Southeastrans has over two decades of experience in the NEMT space because we are able to build and sustain relationships with our clients, our networks of transportation providers, the facilities we visit, and the beneficiaries we serve. These strong relationships are possible because Southeastrans brings a state of consistency to the programs we manage.

This experience has familiarized us with various state Medicaid and Medicare programs, how to build a reliable transportation provider network, the federal and state political systems, and how to accommodate rigorous NEMT requirements and regulations. It has also given us valuable experience managing unique transportation problems such as those related to rugged and/or rural topography, extreme weather conditions, and diverse populations.

2.7.1.1.1 Contracts of Similar Size and Scope

We manage multiple customer contracts similar in size and scope to the LDH program. We currently operate under 13 NEMT contracts with 11 clients in seven states and the District of Columbia, serving more than three million covered lives and performing nearly 5 million annual trips. Our call centers receive more than 4.9 million calls per year. We have established Transportation Provider Networks in each state totaling more than 1,300 contracted transportation providers with approximately 5,300 NEMT vehicles and drivers.

Drawing from more than 21 years of NEMT experience, we determined that our contracts in Arkansas, Georgia, and Tennessee best illustrate our capabilities to handle NEMT services of LDH's size and scope. These contracts are comparable in that they contain similar:

- Medicaid beneficiary populations
- Statewide presence
- Rural areas
- Hurricane experience
- Staffing requirements

Arkansas Contract History

Southeastrans contracted with the Arkansas Department of Human Services/Division of Medical Services as the Medicaid NEMT Broker in Regions 7 and 12 in February 2013. A sole source contract to manage Region 4 was added in July 2013 until the region could be competitively bid in the fall of 2013. Southeastrans was awarded a long-term contract in Region 4 during the re-procurement but lost Region 7 to the local Area Agency on Aging based solely on bid price.



In 2019, Southeastrans was able to complete the "rescue" implementation of four Arkansas regions in 16-days.

When the State re-procured the NEMT contracts in 2018, the regions were reconfigured and renamed Regions A, B, C, D, E, F, and G. Southeastrans was awarded Region D during the re-procurement. In January of 2019, the State of Arkansas approached us to take over Regions A, B, C, and G due to a failed implementation on the awarded broker. We took over the four additional regions within a 16-day accelerated implementation. Southeastrans continues to manage 5 of the State's 7 NEMT regions and maintains a Central Business Office and call center in Little Rock. The Arkansas operations employ a staff of 120 individuals.

Georgia Contract History

Southeastrans' first contracted with the Georgia Department of Community Health in 2000 as the Medicaid NEMT Broker in the Atlanta Region and in 2005 as the broker in the North Region. When we were awarded the Atlanta Region in 2000, it was plagued with Medicaid transportation fraud and abuse, poor service, and an excessive number of complaints from beneficiaries and healthcare providers. The previous broker had been unable to establish an effective NEMT provider network or to address problems concerning on-time performance.

Southeastrans immediately identified and addressed a wide range of deficiencies within the transportation provider network.

These contracts were competitively bid in 2006 and 2011 and were re-awarded to Southeastrans in both procurements. Southeastrans also won the Central Region contract in 2006 and served that region through the end of the contract period. The Central Region was awarded to another broker in the 2011 re-procurement based solely on their lower bid price.

Southeastrans also has experience with dealing with adverse or extreme weather. Both Hurricane Irma and Dorian were the first category five hurricanes of their seasons in 2017 and 2019. In preparation for the hurricanes, the state of Georgia declared a state of emergency.

Southeastrans jumped into action to help manage the transport of vulnerable evacuees along Georgia's southeast coast. Before Hurricane Irma made landfall, Southeastrans coordinated the transport of 50 members in evacuation efforts from areas in Savannah, Brunswick, Kingsland, and St. Mary's to safe locations in metro Atlanta and North Georgia. Following the storm, 39 ambulatory, wheelchair, and stretcher-enabled members were safely returned to their home facilities 10 days after evacuation. Before Hurricane Dorian, Southeastrans transported 51 coastal residents to inland locations including Fulton, DeKalb, Clayton, Butts, Jackson, Rockdale, Houston, Peach and Hall counties.

Southeastrans' corporate office and Central Business Office/Call Center for the Georgia contract is in Atlanta. The Atlanta operations employ a staff of 199 including corporate-level positions.

BlueCare Tennessee Contract History

BlueCare Tennessee is an authorized TennCare Medicaid health plan. Southeastrans was the first broker to contract with BlueCare to manage NEMT services for TennCare beneficiaries enrolled in the MCO's BlueCare and TennCareSelect health plans on a statewide basis and has served in that capacity ever since.

When Southeastrans first won the contract in 2008, most ambulance services across the state were opposed to participating in a broker managed NEMT provider network. In response, Southeastrans met with representatives from the Tennessee Ambulance Service Association (TASA), and successfully developed an agreement that addressed most of their concerns and established a long-term relationship with TASA based on mutual respect. An effective broker must be willing to invest time in getting to know their providers to understand their perspective and to develop strong and long-lasting relationships.

Another ambulance issue unique to Tennessee was the number of "closed county" ordinances in place in throughout the state. These ordinances were designed to prevent competition against county-based ambulance services, and they significantly limit a broker's flexibility in establishing service redundancy within the provider network. Southeastrans was able to work with key county ambulance services in "closed counties" to develop a process whereby the county ambulance service is considered the primary provider contingent upon written

acknowledgement of assigned trips on a case-by-case basis. If they are unable to provide timely service as requested, they consent to allowing Southeastrans to send in an “outside” ambulance provider to accommodate the trip. This process has been in place for the past three years and has eliminated the initial resistance we faced in working with closed “county ambulance” services.

Additionally, we also manage NEMT services for Tennessee’s Dual Special Needs Plan (DNSP). This contract was re-awarded to Southeastrans in 2014 through a competitive procurement RFP. Southeastrans operates a Central Business Office and Call Center in Chattanooga and maintains a regional office in Memphis. There are 97 employees in the Tennessee offices.

2.7.1.2 Regulatory Actions, Sanctions, and or Fines

Southeastrans has experienced no regulatory actions, sanctions, or fines imposed by any federal or Louisiana regulatory entity or regulatory entity in another state within the last three years – as specified in the RFP and clarified via the question and answer process.

2.7.1.3 Medicaid Related Litigation

Southeastrans has had only limited involvement in litigation related to the delivery of Medicaid benefits over the prior ten-year period – and has never been involved in such litigation in Louisiana. Where it occurs, such litigation generally arises from the alleged torts of third-party transportation providers, which can result in the broker being included as a party to the litigation. Examples of these actions include, but are not limited to, claims related to motor vehicle accidents, various premises liability matters, and passenger securement incidents.

2.7.1.4 Terminations for Cause

Throughout our extensive background as a broker, Southeastrans has never had a termination for cause. We pride ourselves as steadfast stewards of the NEMT programs we manage. Southeastrans is built around a work culture of providing solutions and doing what it takes to not only satisfy but enable exemplary services for beneficiaries.

2.7.1.5 Organizational Structure/Communication

Of the many advantages Southeastrans offers LDH as the incumbent NEMT broker, none is more valuable than the depth of resources and talent we have already deployed to support the administrative and functional services for the Louisiana NEMT/NEAT FFS program. Because Mr. Adams started his career as a transportation provider, Southeastrans has earned a reputation for attracting and hiring only the most qualified individuals to capably administer our Medicaid/Medicare contracts. For instance, our corporate executive team has 120 years of combined industry experience and will continue to support the objectives of the LDH program.

Although our executive team members are mainly based at our headquarters in Georgia, they are committed to the success of this program. While the local Contract Operations Manager has the autonomy of managing the day-to-day operations, members of our leadership team often travel to Louisiana to meet with program stakeholders and offer operations support.

For this contract, Southeastrans proposes using the highly capable and experienced leadership and support team depicted in the organizational chart in **Figure 2.7.1-2** to continue actively supporting the Louisiana Medicaid NEMT/NEAT program. Our organizational chart displays all administrative and operational components and the proposed positions and number of full-time equivalents (FTEs) assigned to each for this program. It also shows the lines of responsibility and authority. Our staffing calculations are based on an enrollment of 1.8 million.

2.7.2 Staff Qualifications and Training

2.7.2.1 Key Personnel - **CONFIDENTIAL**

2.7.2.2 Staffing Plan - **CONFIDENTIAL**

We have developed a staffing plan that reflects the number of leadership, call center, and operational personnel necessary to support our Baton Rouge, Louisiana Administrative Office, and Call Center. The following table reflects each position, its location, the number of individuals required for each role, and a brief description of the duties for each. This plan is designed to assure that our staff possesses complete, accurate, and current knowledge of the

Louisiana Medicaid Program. We evaluate and measure every aspect of the beneficiaries' NEMT trip experience – with our reporting capabilities our strategy is to scale our staff to the utilization demands of the program. **CONFIDENTIAL**

2.7.2.3 Staff Training Program

All Southeastrans employees receive training based upon their particular job role and must successfully complete required policy and procedural training courses. Our comprehensive training program is designed to affirm that all of our employees have a complete, accurate, and current understanding of the Louisiana Medicaid program.

Most employees come to us with little knowledge of NEMT services or the nuances of Medicaid and Medicare regulations. The foundation of our staff training program helps assure that all service personnel are fully prepared to fulfill their designated role in providing NEMT services.

- **Knowledge of LA Medicaid:** Knowledge and understanding of LA Medicaid is extensively covered in the orientation of all Louisiana Southeastrans employees, not just our Call Center Representatives and staff. As a company we require both onboarding and annual training for our employees, as well as offer supplemental training sessions throughout the year to foster a clear understanding of policy or process changes. This is to make certain our employees are always up to date on the current status of the Louisiana Medicaid Program. Additionally, Southeastrans has found that the amount of local knowledge our staff has of the region they are serving directly correlates with fewer complaints and increased timeliness of rides. Therefore, we also provide general state knowledge training for our employees to cover topics like correct pronunciation of common names, parishes, and streets, as well as general awareness of cultures and languages that are prevalent.

Our transportation providers also undergo a comprehensive training program that includes educating them on LA Medicaid rules, as explained in the Transportation Provider Training section below.

- **Transportation Policies:** Southeastrans actively communicates changes and updates to transportation policies pertaining to the NEMT program. Call Center employees receive transportation policy updates via ongoing training sessions and through our internal messaging system. Transportation providers within our network are notified of policy changes via our Provider App or Portal, the Louisiana Provider 411 Newsletter, and/or email blasts, depending on the urgency of the change. Providers are encouraged to reach out to provider relations managers for assistance.
- **HIPAA Compliance:** Our HIPAA Confidentiality Policy is designed to enforce proper handling of beneficiary Protected Health Information (PHI). Comprehensive Compliance Training is conducted upon new employee hire and organization-wide annually. It includes an extensive HIPAA/PHI module that covers acceptable use, access, handling, etc. Information technology-specific training is also conducted throughout the year on specific topics such as the importance of encrypting emails containing PHI and how to comply with Southeastrans “clean desk” policy. IT may also push out very customized training when a specific issue is observed by our security monitoring programs. An example is avoiding the pitfalls of phishing via corporate email.

- **Policies and Procedures:** In addition to comprehensive HIPAA regulation and policy training, all employees must complete initial and annual Corporate Compliance Training that addresses Corporate Policies and Procedures, including the following key aspects of our business:

- Code of Conduct
- Compliance and Ethics Laws
- Fraud, Waste, and Abuse
- URAC Certification Overview

All Corporate Policies and Procedures are stored in a library on the company intranet site for easy access. Refresher training is available and employed for all modules on all topics covered within our training programs. Such training occurs periodically company wide and is also deployed for specific employees as a result of evaluations, call center report cards, complaints, etc.

Call Center Training

All employees performing customer service and other essential call center functions must undergo pre-employment testing to verify that they possess the appropriate data entry, technical, and customer service skills necessary to successfully perform their job functions. The results of all pre-employment testing, as well as performance assessments during the employee's orientation and training period, are documented and become part of the trainee's permanent personnel file. We employ a comprehensive staff development and training program to assure that all employees are prepared to successfully fulfill their designated roles in providing Medicaid NEMT services.

Our CSRs are expected to assist beneficiaries with dignity, respect, and courtesy. We recruit reliable staff for our call centers who strive to understand and appreciate the unique needs of each individual beneficiary, with a passion for service and care. Once hired, we apply a rigorous training program, and multiple levels of monitoring and coaching to prepare CSRs to deliver quality services and adhere to policies and procedures.

Training Curriculum

Our two-week training class includes the following modules, customized to incorporate each client's program rules, regulations, and guidelines. These modules are essentially captured in a Customer Service Call Handling Manual, developed specifically for the Department's program, and used as an ongoing reference by our personnel.

Module 1:	<ul style="list-style-type: none"> • Welcome to Southeastrans • Human Resources & You • Facility Tour (Onsight only)
Module 2:	<ul style="list-style-type: none"> • All About Non-Emergency Medical Transportation

Module 3:	<ul style="list-style-type: none"> • The Anatomy of Customer Service • Serving Beneficiaries • Key Customer Service Skills for Success <i>(tone of voice, word choice, managing dead air, placing callers on hold, transferring callers, listening to understand, empathy)</i> • Steps of Service and Script Introduction <ul style="list-style-type: none"> – Call Handling Procedures – Call Quality • Using the Contact Center Phone System
Module 4:	<ul style="list-style-type: none"> • Scheduling a Trip via Net Insight • Scheduling a Trip <ul style="list-style-type: none"> – Gas Reimbursement – Public Transportation – Hospital Discharges – Surgery – Where's My Ride? • Using Notes in Net InSight • Searching for a Trip & Identifying Standing Orders • Copying a Trip • Scheduling a Multi-Beneficiary Trip • Role-playing
Module 5:	<ul style="list-style-type: none"> • Adding a Beneficiary • Searching for a Beneficiary • Adding an Address • Manually Geo-Coding an Address • Editing a Client • Searching for a Facility • Adding an Ad Hoc Facility • Duplicate Trip Warnings • Modifying a Trip • Canceling a Trip • Canceling a Trip Leg • Denying a Trip • Entering an Inquiry (complaint) • Working with Dissatisfied Callers • Guest Lecture: Quality Assurance • Guest Lecture: Utilization Review
Module 6:	<ul style="list-style-type: none"> • Agent Self Help Tools
Module 7:	<ul style="list-style-type: none"> • Performance Excellence (Employee Scorecard)
Additional Lectures:	<ul style="list-style-type: none"> • Gas Reimbursement • Claims Overview • Internal Audit • Effective and Professional Communication
Review Sessions:	<ul style="list-style-type: none"> • Call Handling Procedures • Over 10 hours of Call Observation/ Coaching Sessions • Agent/Trip Call Reviews • Work Force Management • OIG/SAM Exclusions and Compliance
Module Assessments:	<ul style="list-style-type: none"> • All modules are assessed
Quality Assurance:	<ul style="list-style-type: none"> • Scorecard Coaching / 1:1 Sessions
Graduation	<ul style="list-style-type: none"> • Transition to Call Center Environment

The training curriculum for CSRs encompasses classroom programs, online courses, role play/job shadowing, feedback, and continuing access to job aides. When CSRs successfully complete all curriculum, they spend time in a small workgroup where they begin to take calls but are supported by team leads who provide hands on guidance for up to two additional weeks, until the CSR is confidently taking calls independently. We prepare CSRs to accept calls

through initial training programs, and then extend their knowledge through ongoing training, refresher courses, and corrective action training as needed.

Transportation Provider Training

To offer the highest quality of service to Louisiana NEMT program beneficiaries, Southeastrans provides a comprehensive training curriculum that all our Louisiana NEMT program transportation providers and drivers must complete before providing NEMT-related services. Our driver training consists of four main components:

- **NEMT Driver Training**
 - Orientation
 - Claims and iPad training
 - Behavioral Awareness
 - Transporting Children
 - Stretcher Training
- **Passenger Assistance Safety and Sensitivity (PASS):** This is our primary driver certification curriculum developed by the Community Transportation Association of America (CTAA). This best-in-class training offers assurances that our network drivers have expertise in providing safe and reliable transportation, as well as passenger assistance techniques and sensitivity skills appropriate for serving persons in the NEMT environment, especially those who are frail, elderly or have disabilities.
- **Coaching System Defensive Driving Course:** This training details best practices for reducing traffic crashes and traffic violations. Additionally, it includes instruction on training drivers to safely navigate driving a larger vehicle, such as a wheelchair van; handling visibility problems due to adverse weather conditions; applying best practices for driving on open roadways versus congested, city-like driving environments; and understanding stopping distances and blind spots.
- **Medic 1st Aid/AED/CPR Course:** This program is a combined adult first aid, automated external defibrillator (AED) and CPR certification course designed specifically for the occupational first aid provider. This extremely flexible program helps transportation providers meet OSHA and other federal and state regulatory requirements for training drivers on how to respond and care for medical emergencies at work.



Southeastrans currently employs a full-time trainer in our Louisiana facility, who is supported by our Corporate PASS Master Trainer. The Master Trainer designation is the highest level of certification offered by CTAA. Additionally, our Corporate Fleet and Training Manager earned the Master Trainer certification. During implementation, our Master Trainer will assist the local training manager, enabling Southeastrans to quickly train our new personnel who can then teach and certify drivers in the PASS program in all the regions.

Training Delivery Methods

Southeastrans has traditionally offered in-person, classroom training. In response to the COVID-19 pandemic, we have modified our training program to include a blend of virtual and in-person instruction. Our Learning Management System enables us to couple online training modules with an instructor led experience for CPR, first aid, and wheelchair securement components. Over the last year, we have trained approximately 5,000 drivers enterprise wide – 300 in Louisiana – through this hybrid model. Using a secure username and password, drivers are granted access to Southeastrans University. All training required for their region is easily accessible and navigation is intuitive. We also send out a quarterly Transportation Provider newsletter and use email, and fax blast to reinforce training.

Ongoing Training

Training is not simply “one and done” – it is an ongoing process. Refresher training is required when provider report cards indicate supplemental education is in order. Additionally, transportation complaints are stringently monitored, and training needs identified accordingly. Also, “hot topics” are covered during our townhalls and regularly scheduled provider meetings. Finally, complete retraining is required for all providers and drivers every two years.

2.7.3 Approach and Methodology

2.7.3.1 Communication Protocols

As the awarded broker, we understand how important it will be to coordinate and effectively communicate with LDH, other LDH contractors, the LDH Fiscal Intermediary (FI), and MCOs to safeguard continuity of service for Louisiana’s NEMT beneficiaries. The significance of these responsibilities does not escape us, and we will deploy a hands-on approach through employing a Communications Manager, as well as other proven strategies for building relationships to make sure the implementation of Southeastrans’ NEMT services is seamless.

Through collaboration and a detailed Communications Protocols Plan, we will look at each of the entities’ current practices, goals, and objectives and marry those needs with our technical capabilities; policies and procedures; processes; and management services to account for every detail. Our Communications Protocols Plan will include the following best practices:

- **Project Kick-Off and Regular Status Meetings:** Valorie Williams will serve as our Implementation Project Manager. After contract award, she will help finalize a work plan with clear objectives and activities that will foster open and frequent communication with all program stakeholders. Ms. Williams will schedule a project kick-off meeting to make team introductions, review the work plan in detail, and discuss the contract schedule, key deliverables, or any items identified in the contracting process. Additionally, she will schedule and facilitate reoccurring status meetings with each of the primary stakeholders to confirm key deliverables are on track to meet the associated due dates; determine methods for data transfers; and resolve questions or concerns. All members of our implementation and local management teams will participate in the weekly calls to speak

to their areas of responsibility and answer any questions. Issues identified during the week will be discussed during the meeting and an action plan created that identifies action items/tasks and a responsible owner. After the project is operating at a level approved by all parties, we will establish a mutually agreeable meeting frequency – either individually or collectively with the various program stakeholders.

- **Transition Management:** Our Implementation Team along with our local Director of Operations (Contract Operations Manager), Steve Buckner, will work with LDH, the MCOs, and their outgoing contractors prior to the Operational Start Date to obtain all relevant trip data. This will include, but will not be limited to, beneficiaries and their established level of service, future scheduled trips, active standing orders, active Certification of Ambulance Transportation forms, healthcare provider and destination data, transportation provider data, and any other information needed to safeguard uninterrupted continuity of services. Our team will also verify other program data, review assumptions, and confirm network adequacy to minimize disruption to the beneficiaries.
- **Electronic Communication Protocols:** We will use a variety of electronic communication delivery methods (e.g., website and portals, mobile application, email, texting, secure file transfer protocols (SFTP), or system interfaces) to create an effective and tailored communication strategy. Our Net InSight transportation management system offers interfaces that optimize the exchange of information among stakeholders to streamline eligibility, online trip reservations, trip management, messaging, claims processing, benefits configuration, and reporting capabilities. Our implementation process includes testing synchronization of all client files within our systems and confirming program rules comply with contract requirements.
- **Review, Update, and Distribute Written Materials and Business Rules:** We will send LDH drafts of manuals and written materials for review and approval before circulating or using the materials in our training. This includes working with LDH to finalize communications to update beneficiaries, healthcare providers, transportation providers, and facilities regarding changes to the non-emergency transportation services.
- **Readiness Reviews:** Our implementation team and local managers will meet with LDH, MCOs, and other program stakeholders throughout the readiness review period, including during all scheduled readiness review meetings. For these meetings, we will present an overview and/or status of our work plan, as well as live demonstrations of our technologies that support our processes and procedures, such as call center management, provider portal, and beneficiary portal functions, as required by the contract.

Establishing clear communication with all program stakeholders is vital for instilling trust and confidence in our ability to provide comprehensive NEMT/NEAT services throughout Louisiana for both the FFS population and the Louisiana MCOs that elect to contract with Southeastrans.

2.7.3.2 Determining Size/Vehicle Capacity

We currently provide NEMT/NEAT services for Medicaid beneficiaries in all 64 Louisiana parishes, through contracts with 141 transportation providers as well as numerous Counsels on Aging and Gas Reimbursement drivers. Our current network includes vehicles that support various levels of service, including ambulatory and wheelchair, as indicated in the adjacent table. For basic life support, and advanced life support transportation, we work with 13 EMS companies statewide, which are not confined to operating in specific regions.

Service Region	Current Ambulatory Vehicles	Current Wheelchair Vehicles
1	30	20
2	45	20
3	27	8
4	29	0
5	8	18
6	25	21
7	25	41
8	42	23
9	27	14
Total	258	165

To build upon our existing network, we will use a systematic methodology for determining the size and vehicle capacity of the transportation network, by level of service and region. Through our network development algorithms, we can predict the number of trips per month by day. To assure continuous network coverage, our operations team analyzes past trip data to establish utilization patterns based on the following:

- Data provided by the Department as part of the RFP
- Anticipated Medicaid enrollment (based on FFS population and MCO participation)
- Mobility type and seating capacity
- Number of vehicle types (ambulatory, wheelchair, or stretcher)
- Geographic information by city, parish, and zip codes
- Chronological trip history to determine the need for transportation provider resources
- GPS availability within the regions/parishes for tracking and recording trips
- Number of medical facilities/offices in an area

Using expected trip volume, we will calculate the number of providers needed by mode. We will continue to build out the network with additional providers as needed to safeguard that Louisiana beneficiaries in all programs do not miss vital transportation. Based upon our knowledge of the state today and the data provided by LDH as part of this procurement, our preliminary estimate for network need is outlined in the adjacent table.

Project Vehicle Needs	
Ambulatory	512
Wheelchair	114
ALS/BLS	24

Expanding our Transportation Provider Network

The success of the program rests on the ability to identify and build a network of reliable and safe transportation providers for all medical and non-emergency ambulance transportation requests. For the LDH program, we understand how important it will be to coordinate with the current broker(s), program stakeholders (e.g., MCOs, third-party affiliates, and LDH) to safeguard continuity of service for LDH FFS and MCO beneficiaries.

Our highest priority will be to use the current transportation providers that meet LDH’s and Southeastrans’ contractual requirements, and who are interested in continuing to provide NEMT/NEAT services in the state of Louisiana. We understand that NEMT simply does not happen without a solid transportation provider network. In our experience, contracting with current transportation providers creates the smoothest transition for beneficiaries and the facilities. It also sustains the numerous small, local businesses that comprise our transportation network – a network of people and families that we care about. After hurricane Ida, Southeastrans stepped in to assist 13 of our displaced transportation providers with housing costs and other expenses until they could get back on their feet.

Finally, we will leverage the federal NPI registry (NPPES) to identify untapped state and local transportation resources. We will also search for local resources by:

- Gathering a list from the exiting broker(s), the MCOs, and the facilities
- Working with the local NEMT coalitions
- Hosting town hall meetings in the local community. We run ads in local papers, place radio ads, and publicize on various websites
- Visiting medical communities to identify transportation resources and to speak with the facility staff to gain a better understanding of their needs and recommendations
- Continuing to leverage the Hudson and Veteran’s Initiative vendor lists
- Reviewing the Department’s list of approved transportation providers via LA Wallet

We will also identify underutilized resources such as non-profit community resources, regional public transit agencies, and expand the use of these resources where applicable. Furthermore, we will develop solutions to address transportation needs in underserved areas prior to go-live.

Figure 2.7.3.2 is an overview of our methodology for building a transportation network.

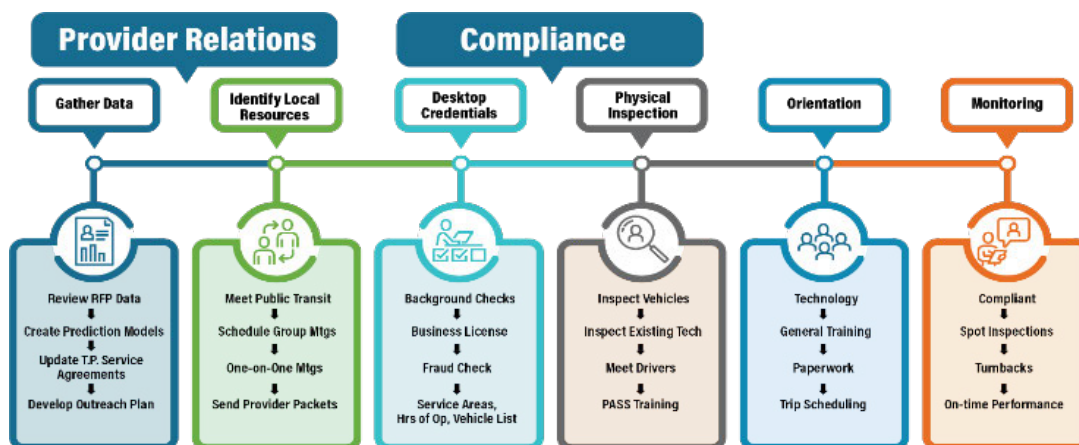


Figure 2.7.3.2: Design and development workflow for the network development process.

2.7.3.3 Work Plan for Transportation Network Development

In anticipation of this RFP, we have been on the ground in Louisiana developing relationships to further expand our network across all regions to accommodate rides provided to beneficiaries to and/or from a Medicaid Covered Service or Value-Added Benefit (VAB) under this contract.

Upon award, our implementation project manager, Valorie Williams, will oversee a team of knowledgeable and experienced regional managers who are well versed on how to successfully recruit NEMT/NEAT transportation providers. Their efforts will be guided by our detailed work plan that includes strategies and a timeline for scaling up our transportation provider network by the operational start date. Tasks on our detailed work plan include:

Over the last seven years, we have come to understand the complexities of navigating the Bayou State's 52,378 square miles and we know that our responsibility to beneficiaries reaches far beyond the more populous and urban cities of Baton Rouge, New Orleans, Shreveport, Lafayette, and Lake Charles. We have a duty to serve those beneficiaries residing in every parish and small town from Cocodrie to Natchitoches to Tallulah and beyond. We understand that federally designated Primary Care Health Provider Shortage Areas exist in all but one Louisiana Parish and impact the transportation needs of the beneficiaries¹. Assuring adequate NEMT/NEAT transportation services can be a challenge during the best of times, when parades are rolling during Mardi Gras season and the Second Line is in no hurry to move along, to the devastatingly bad times when hurricane winds and flood waters threaten both coastal and inland parishes. Southeastrans is committed to quality and compassionate services for LDH beneficiaries all of the time.

During our ongoing recruitment activities, our Network Development and Provider Relations Teams will meet face-to-face with existing commercial, public, and nonprofit transportation providers throughout the state. During these meetings, we will share information about our collaborative approach to managing transportation provider networks. We will also develop an

¹ [Primary Care HPSAs .pdf \(la.gov\)](#), accessed 12/11/21

even greater understanding of the needs, issues, and challenges facing transportation providers in the area. Transportation providers will have the opportunity to ask questions and view demonstrations of the software tools that will become available to them upon the execution of a contract with Southeastrans.

Our Provider Relations Managers continually assess the adequacy of our provider network in each region/parish we serve. By carefully examining trip request volume, on-time performance, service complaints, send-back trends, missed trips, and transportation provider management issues, our experienced network team knows when it is time to add transportation providers to the current network, shift trips to another transportation provider or, if necessary, stop using a transportation provider altogether. This process is streamlined with our sophisticated transportation management platform, Net InSight. This technology gives us the ability to look deep into our network's fleets, service areas, credentialing, and performance status; project future beneficiary transportation needs; and mitigate risk by responding to potential network coverage problems, often before they even occur.

2.7.3.4 Timeline for Establishing Louisiana Call Center

Southeastrans currently operates an administrative office and call center in Baton Rouge, Louisiana at 5745 Essen Lane. This facility is comprised of 5,114 square feet with the capacity for 50 call center workstations. There is an adjoining suite with 4,806 square feet where we will expand to accommodate the additional call center workstations needed under a new contract. The timeline for expanding workspace capacity and hiring additional staff for our existing Louisiana-based call center to comply with call center performance standards under this new contract should take approximately 90 days.

The most critical tasks for call center expansion, time allocated for completion, the implementation team member responsible for each task and their location (local or out of state), are tabled below.

As an incumbent broker in Louisiana, Southeastrans is uniquely positioned to provide seamless NEMT/NEAT service for the Department, MCOs and NEMT program beneficiaries throughout the state. With an established call center in place, our local CSRs are already familiar with our technology, LDH program requirements, LDH's call script, beneficiary demographics, and the geography of the state. These experienced CSRs will help train new staff in providing prompt, courteous, and professional services for all program calls.

Furthermore, we understand the Louisiana political system, and are familiar with the structure of Louisiana transportation regulations. Our tenure has given us valuable experience managing unique Louisiana transportation problems such as those experienced during Mardi Gras and extreme weather conditions. Our established presence in the state allows us to leverage existing operations and transportation network while we expand to meet the extra demand expected from the addition of the MCO beneficiaries.

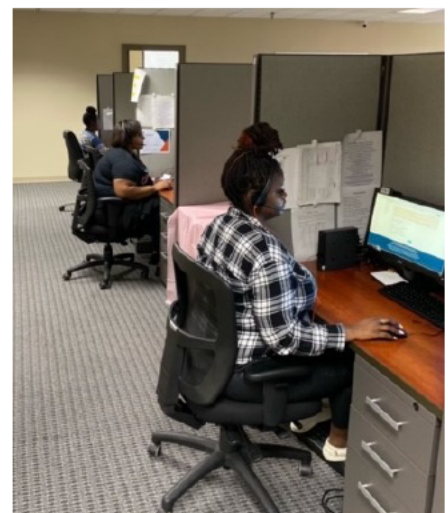


Figure 2.7.3.4: Our Baton Rouge Call Center is staffed with local customer service professionals, with a seating capacity of 50 and space to expand.

2.7.3.5 Receiving and Processing Requests for Transportation

Methodology for Receiving Requests

Communication is a vital aspect of a successful NEMT/NEAT program, so Southeastrans provides multiple ways for beneficiaries and facilities to submit transportation requests. We

offer traditional methods for scheduling via phone, fax, and email. Additionally, we maintain web portals for facilities and beneficiaries that support online NEMT scheduling. Also, we offer a free beneficiary app that empowers users to efficiently make reservations and manage their NEMT benefit from the convenience of their smartphone or tablet. Our goal is to enhance the experience of program stakeholders, and to provide them with greater flexibility and control over scheduling.

Methodology for Processing Requests

We process requests for transportation in accordance with LDH contract requirements. Using Net InSight, our scheduling staff receives and electronically records each transportation request to include the LDH approved Medicaid Beneficiary Intake Data elements and other pertinent information. Our scheduling staff is available 24 hours a day, seven days a week, which exceeds LDH's requirement of Monday through Friday, 8:00 A.M. to 5:00 P.M., Central Time.

Transportation requests follow a standardized process, as described below:

- **Routing Requests:** Callers contacting Southeastrans to schedule transportation are presented with a simple menu of Interactive Voice Response (IVR) choices that direct them to the appropriate call center queue. Callers are assisted by our CSRs or Special Services Representatives (SSRs). CSRs are responsible for processing requests for routine NEMT demand trips, while SSRs manage facility requests for standing orders, nursing home transports, and requests for repetitive type services. We have a specialized group of CSRs to manage urgent care and other special trips. Trips requested online are vetted by a member of the call center team as part of our gatekeeping process.

We have managed NEMT services in the Bayou State for more than seven years and understand that the majority of the population in the state's nine Medicaid regions live in East Baton Rouge, Jefferson, Orleans, Caddo, St. Tammany, and Lafayette parishes. Except for Caddo parish, the other more populated parishes are in the southeastern part of the state. That means many of the 64 parishes in the state are rural, and beneficiaries residing in those areas may have to travel longer distances for medical appointments. We take the logistical circumstances of rural residents into consideration when routing.

- **Confirming Eligibility:** Our call center personnel are trained to use a customized LDH-approved call script that safeguards a thorough reservation process so that eligible beneficiaries have access to transportation services. The script follows the Net InSight screens, and guides CSRs in:
 - Collecting relevant information from the Medicaid beneficiary or their representative for entry into Net InSight.
 - Verifying beneficiary eligibility by referencing LDH's Medicaid website (www.lamedicaid.com) to verify eligibility – our Net InSight systems is also able to work with eligibility and enrollment files should that become an option.
 - Identifying the availability of transportation resources.

- Determining the most appropriate, least costly mode of transportation for a beneficiary's physical or cognitive needs.
- Confirming that the transportation is to a Medicaid covered service.
- Assigning each trip request a unique authorization number.
- **Determining Best Mode of Transportation:** The Southeastrans' Net InSight system helps the CSR select the best mode of transportation through features designed to determine the most appropriate choice based on responses provided during the gatekeeping process. The beneficiary's medical, physical, and cognitive abilities are the decisive factors when assigning the mode of transportation after the trip request has met criteria for approval. For instance, our process helps the agent determine the beneficiary's current level of mobility, functional independence, and any special transport requirements (e.g., medically fragile, physical limitations).
- **Generating Reservations:** Southeastrans' priority is to enable safe and comfortable transportation for Louisiana's eligible NEMT/NEAT beneficiaries using the lowest cost transportation that meets the beneficiary's varied needs. To that end, we will schedule all approved trips, including fixed route, continuous transport, and same day requests (urgent care) within the timeframes required by the contract, and generate reservations. When processing standing orders, we work to assign beneficiaries to the same transportation provider for continuity of care. We will accommodate requests for standing orders in accordance with the MCO Manual and Medicaid Services Manual.

2.7.3.5.1 Technology and Efficiencies

Medical care does not have regular hours. Patients' transport needs can be unpredictable especially when they are discharged from the hospital or are dealing with an urgent situation. All beneficiaries need to know that they will have access to transportation to and from their homes and facilities. That is why Southeastrans has staff available to assist 24 hours a day, seven days a week for urgent issues, which greatly enhances service delivery, predictability, and safety of the beneficiaries.

Whether in print, via phone, or the web, we assure those who are disabled, or visually or hearing-impaired, have access to information about our services. Here are highlights of the technologies and efficiencies we employ:

- **Multilingual Staff:** With Louisiana's large immigrant population, many of whom do not speak English, we know that language can be a significant barrier to accessibility. When staffing call centers, we focus on hiring CSRs who can speak English and other prevalent languages and stagger scheduling for our bilingual CSRs to maximize availability.
- **Interpretation or Translation Services:** Through a partnership with a HIPAA-compliant third-party subcontractor, interpreters provide over-the-phone translation services in more than 140 languages. This service is available to beneficiaries and their

representatives at no charge, whenever they are needed, with no limit on the number of times a beneficiary can use the service. Employing an interpretation service is an easy process that does not require multiple calls. During initial contact, the caller is connected to an experienced interpreter who will listen to the caller, analyze the message, and accurately convey the beneficiary's need to our CSR. The CSR's response will likewise be translated and relayed to the caller by the interpreter.

- **Accommodations for Beneficiaries with Speech and Hearing Difficulties:** Our call centers also work with Louisiana Relay that offers reliable, full telephone accessibility to everyone, including individuals who are deaf, deaf-blind, hard of hearing or have difficulty speaking. Louisiana Relay is available 24 hours a day, 365 days a year. With relay services, specially trained communication assistants complete all calls and stay on the line to relay messages either electronically over a telecommunications device, teletypewriter (TDD/TTY), or verbally to Southeastrans' CSRs.



- **Urgent Care Request via Web Portal:** To simplify the process for medical facilities placing a request for discharge transportation, the health care provider can use our Urgent Care Request section of the Facility Web Portal that enables requests to be made online using a secure log-in and password. This portal allows medical facilities to receive confirmation emails and periodic ETA (Estimated Time of Arrival) updates. In addition to the web portal access, each facility will have a dedicated SSR agent and direct access to their SSR via a toll-free number and extension. SSRs are specifically trained to work with medical facilities and receive additional training to understand the importance of handling specialty cases, such as urgent trips.

By increasing the number of secure, ADA-compliant communication avenues available to all beneficiaries, we help reduce barriers and enhance the level of service and accessibility.

2.7.3.5.2 Verifying Eligibility

Our Call Center professionals access the LDH Medicaid website to verify the beneficiary's eligibility and that the requested transportation is to a Medicaid Covered Service or Value-Added Benefit (VAB) prior to every trip. Alternatively, Southeastrans does have the capability to exchange eligibility and enrollment information accurately and timely via an electronic process. We can load eligibility files the same day they are received. Doing so would allow our Net InSight transportation management system to automatically verify eligibility without the CSR needing to access the LDH website. This is the process we employ in most of our MCO contracts and is an available option, should the Department so desire.

Additionally, our Net InSight platform is highly configurable to set up contract specific business rules and restrictions around covered services. When a reservation is requested by phone or online, the platform immediately references the most current beneficiary eligibility information on file. Net InSight captures answers for the following questions:

- Is the beneficiary eligible for NEMT/NEAT on the date of service?
- Is the trip to and from an eligible Medicaid-covered service or VAB?
- Is the health care provider and location enrolled in Medicaid?
- Does the beneficiary have any other means of transportation available?
- What is the least costly, appropriate mode of transportation?
- Is the beneficiary using the closest, appropriate provider?

With every reservation call, the CSR accesses the Department's site to confirm beneficiary eligibility. Then, the CSR uses an LDH-approved call script to obtain the required information. Because business rules are configured in the system, the Net InSight screens follow the script and guide the CSR through the gatekeeping process. Initially, the caller will be asked to provide their name, Medicaid ID number, and their home address and phone number to verify the CSR is speaking to the appropriate person. Once eligibility is confirmed, the CSR moves to the next step in the process and obtains the needed information to schedule appropriate transportation.

2.7.3.5.3 Approving, Rejecting, or Modifying a Trip

Our process and timeline for approving, rejecting, or modifying the trip and communicating the result to the requestor will depend on several factors.

- **Approving a Trip:** As long as the CSR can confirm all eligibility criteria, the timeline for approving a transportation request is immediate. Details of scheduled trips are confirmed at the time the reservation is made. Once necessary information is entered into Net InSight, the CSR verifies accuracy with the caller and saves the reservation. A confirmation number is automatically assigned to each reservation, which the CSR communicates to the beneficiary or caller before ending the call.
- **Rejecting a Trip:** If an appointment is NOT for a covered service or VAB, or the request for NEMT/NEAT service falls under one or more rejection reasons based on the criteria of the LDH contract, the CSR will reject the trip request. If this happens while the beneficiary is on the telephone with the CSR, they will verbally explain the reason for the rejection and politely end the call. Depending upon the circumstances, we will send the beneficiary a written notice about the rejection and the appeals process.

If the rejection decision occurs as a result of an online request, or after the call has ended, we will communicate the decision in writing. A daily Net InSight report will generate a rejection letter, which will be sent to the beneficiary no later than the next business day following the trip rejection. The letter will list the specific reason for the rejection of service, explain the appeals process, and provide the contact information required for appealing the rejection. A copy of the rejection will be maintained electronically in the beneficiary's file in the Net InSight system.

- **Modifying a Trip:** Our free beneficiary mobile application and web portals are available 24 hours a day, seven days a week, and enable beneficiaries and facility representatives

to modify a scheduled trip request, among other things, directly through our platform using a smartphone, tablet, or computer. Our platform is designed to empower beneficiaries by giving them more control over their transportation benefit. Of course, beneficiaries are also welcomed to contact our call center to modify a trip request.

2.7.3.5.4 Dispatching Trips

What sets Southeastrans apart from other NEMT brokers is Net InSight, our proprietary, HIPAA-compliant, transportation management system. Our platform uses algorithms based on transportation provider details recorded in Net InSight to assign the most cost effective, yet appropriate transportation provider. Always being mindful of our fiduciary responsibilities related to Medicaid dollars, Southeastrans configured the Net InSight platform to take into consideration the providers' vehicle fleet, geographic service areas (e.g., specific parish/region), days and hours of service availability and their rates. This level of automation enables our network providers to optimize their routes and schedules, reduce late and missed trips, and consistently meet on-time performance standards, while enabling us to manage costs. Other key functionality includes:

- **Auto Dispatch:** Auto dispatch is based on algorithms that select the most economical and efficient transportation provider for a beneficiary's trip. Algorithms also geographically restrict transportation providers to the region in which they are authorized to transport. The platform offers a simple dashboard for dispatchers to manage incoming ride requests. Our transportation providers have complete control over whether to "Accept" or "Reject" a ride from their pending queue. This functionality enables our transportation routers to quickly know where there are gaps and to proactively find alternative transporters.
- **Net Notes:** Our technology platform combines web and mobile technologies to present users with a comprehensive fleet management console. The console uses GPS-enabled technology, to accurately document and capture pick-up and drop-off times and geo-coded locations for each leg of a trip. During the course of the trip, our platform captures GPS coordinates to verify the pickup and drop off locations were within 1/2 mile of what was recorded at the time of booking. If these points do not match, the ride is flagged and sent to an exception queue and the transportation provider is contacted to submit additional documentation.

Trips are scheduled and dispatched to confirm that the average waiting time for scheduled pick-ups does not exceed 15 minutes. We require transportation providers to pick-up the beneficiary within one hour of the notification for "will call" returns and within three hours from the time we are notified of a hospital discharge.

Using the maps feature of Net Notes (**Figure 2.7.3.5.4-1**), our Transportation Management Team can quickly locate another vehicle in the area to recover a ride due to a no show or a late running trip. By clicking on the vehicle, Net Notes will identify the driver, if there is a passenger on board, and the details of their trip in real time.

Approach for Maximizing Use of Public Transits

Public transit – including local and regional transit authorities/regional commissions – play a key role in all our Medicaid contracts to control costs and maximize beneficiary independence. Southeastrans drives the use of public transit options right from the start, during the reservation process. Applying our gatekeeping procedures, the CSR uses a customized LDH-approved call script to determine the least costly, most appropriate mode of transportation. If a beneficiary cannot travel with a family member or friend not residing with the beneficiary, the next option is public transit, if it is available and appropriate for the beneficiary's condition.

Our Net InSight platform assists the CSR by displaying a popup message once the (A) leg is created if the trip is on a public transit route(s). That is because we have the capability to upload and integrate actual transit stops and routes in Net InSight to help our CSRs plan trips. Once the trip is scheduled, our Public Transit Coordinator is responsible for making sure the appropriate fare is received by the beneficiary before the date of their appointment.

Working with Fixed Route Transit Companies

Currently, we partner with six local and regional transit agencies to coordinate travel for beneficiaries who meet the eligibility criteria for fixed route services.

1. RPTA/River Parishes Transit Authority - La Place, LA
2. Alexandria Transit - Alexandria, LA
3. Good Earth Transit - Terrebonne Parish
4. Monroe Public Transit – Monroe, LA

5. Sportrans - Shreveport, LA
6. CATS - Baton Rouge, LA
7. NORTA/New Orleans Regional Transit - New Orleans, LA

To better support the larger LDH population, we will further develop our working relationships with all the public transit agencies in Louisiana through our membership in the Louisiana Public Transit Association. As we establish partnerships, we will include bus stop and route information within our Net InSight platform to maximize the use of public transit services.

Working with Deviated Route Transit Companies

To control costs and accommodate the needs of older beneficiaries, we are building relationships with the 64 Parish Councils on Aging (COA). Currently, we use the deviated route services available through the following COAs.

- | | |
|-------------------------------------|---------------------------------|
| 1. Acadia Parish COA | 9. Red River COA |
| 2. Allen COA | 10. Sabine COA |
| 3. Avoyelles Council on Aging, Inc. | 11. Smile Iberia (COA) |
| 4. Bossier COA | 12. St. Helena Council on Aging |
| 5. Caldwell COA | 13. St. Martin COA, Inc. |
| 6. Jeff Davis COA | 14. Vernon COA |
| 7. Madison Voluntary COA | 15. Winn Parish COA, Inc |
| 8. Pointe Coupee COA | |

These partnerships enable us to augment our network in these areas. Because these relationships have been successful, we are in the process of conducting COA outreach meetings to expand our relationships across the state.

For Rural Public Transits (5311s) that do not operate fixed route schedules but instead operate in a demand response fashion, we reach out to each of these agencies and walk them through the process and procedure of contracting with Southeastrans. We may enter a contractual arrangement similar to that of any private provider and effectively coordinate our efforts on the same level as that of the larger metropolitan transit systems. These small and rural systems have always been an important transportation component of any broker model and will continue to be in the future in Louisiana.

Level of Service

Our CSRs capture the answers to a series of LDH-approved questions during the gatekeeping process. Meanwhile, our platform uses algorithms to assist the CSR in determining the most appropriate level of service for the individual beneficiary. The platform also helps assure the transportation is the least costly and most medically appropriate. In Louisiana, Southeastrans arranges transportation via various levels of service, including:

- **Ambulatory:** This transportation is arranged for beneficiaries who can walk to the vehicle by themselves or with minor assistance — including those who use walkers.

- **Wheelchair:** This transportation is arranged for beneficiaries who need a wheelchair and have their own wheelchair for transport.
- **Transfer:** This transportation is provided to a beneficiary requiring a move from one facility to another (e.g., admittance or overnight care to a fully licensed and certified hospital following a surgical procedure).
- **Basic Life Support (BLS):** This transportation is arranged for beneficiaries who cannot be transported in a wheelchair and require a stretcher. This transportation is limited to emergency medical care administered to the emergency medical technician's basic scope of practice.
- **Advanced Life Support (ALS):** This transportation is arranged for beneficiaries who cannot be transported in a wheelchair and require a stretcher. This level of service provides emergency medical care administered to at least the level of an emergency medical technician-paramedic's scope of practice.

We make sure the transportation provider accommodates the level of service required to safely transport the beneficiary based on that beneficiary's mobility and functionality. When possible, consideration is given to the beneficiary's choice of transportation provider. However, we promote the use of public transportation where appropriate, unless a beneficiary has specific needs that require other modes of transportation.

2.7.3.5.5 Trip Completion and Claim Submission

To minimize the administrative burden on transportation providers, we have developed innovative strategies to streamline the process for transportation providers to complete the trip and submit the claim for payment. For instance, we are the **only** non-emergency transportation broker that offers free mobile technology devices (tablets) and service plans to our contracted transportation providers.

The tablets are pre-loaded with our Southeastrans Mobile and Net Notes driver apps, which are integrated with our Net InSight transportation management platform. Net InSight facilitates the "life-cycle" of a trip, including provider credentialing, beneficiary file maintenance, trip scheduling and dispatching, and reconciliation. Each of these components includes quality mechanisms to check the integrity of the entered data. This level of data integrity is critical to claims processing.

Once a trip is authorized by Southeastrans, Net InSight determines the mileage to be paid based on geo-coordinated calculations in association with the provider's negotiated rate, including any applicable deadhead mileage and/or wait time compensation that is allowed by contract. Rates are stored in Net InSight and simply applied to the scheduled trip. Providers know how much they will be paid for a trip at the time it is assigned to them.

Net Notes allows trips to be dispatched and tracked in real-time. Meaning, NEMT drivers document beneficiary pick-ups and drop-offs on their mobile device as trips occur. The application automatically timestamps and geo-codes the location of each encounter. They also

capture the beneficiary's signature at the conclusion of each trip. This eliminates the need for transportation providers to maintain manual trip logs and improves data quality regarding on-time performance and claims submission. Each trip record becomes an electronic claim submitted by the driver app to the provider portal for certification and payment.

Currently, every claim must be certified by the transportation provider before processing can occur. Net InSight automatically conducts checks of the elements required for a claim to be considered "clean" and eligible for processing, such as pick-up and drop-off time, mobility method, mileage, procedure code, etc. Claims with no issues are shown in the provider portal with a green icon (Figure 2.7.3.5.5).

This signals the transportation provider that those claims are considered clean and ready for certification. If the Net InSight system identifies an issue with a claim, the icon will be yellow, alerting the transportation provider that they need to examine the claim and make corrections. Each transportation provider is assigned a Claims Analyst who is available to assist them with claim issues or questions. If a transportation provider is not sure how to address a claim with a red alert, they are always able to reach out to their assigned analyst for help.

Net InSight automatically populates most of the data fields required in a claim. Therefore, there are very few elements within a claim that a provider can modify, and any errors made are likely something as simple as an incorrect trip ID due to a user entry error. For this reason, providers are able to bulk certify most of their claims.



Claims Concierge Service

Southeastrans understands and appreciates the intricacies of running a NEMT business, from fleet management and maintenance, to driver coordination, to trip routing, to all of the day-to-day tasks associated with simply owning a business. We are always thinking of ways to streamline our part of the NEMT process in ways that will help our transportation network to be more efficient and thrive. To that end, we are implementing a Claims Concierge Service to ease the burden of submission and certification.

One-on-One Claims Assistance

There are many reasons why a transportation provider might encounter difficulties with clean claim submission. To help address such problems, we have a way to help. Using denial rates, as well as the trends and patterns associated with denial reasons, we will identify transportation providers who are encountering obstacles to submitting clean claims. On a weekly basis, the Provider Relations Manager will call those providers directly to alert them to the issues with their claims and determine how Southeastrans might assist them. In some cases, providers may simply need a better understanding of the process for using the provider portal or their drivers may require additional training on proper use of their mobile devices. In such cases, the Provider Relations Manager can quickly assist them. If the issue requires claims expertise, the Provider Relations Manager will quickly facilitate a consultation with a claims analyst who will work with the provider to correct their flagged claims and resubmit them for payment. This collaboration will help transportation providers take full advantage of the technology and tools available to them and assure they are paid as timely as possible.

Automatic Certification and Payment

Net InSight will automatically certify, and process claims without the transportation provider needing to perform a single mouse click. By contract startup, our system will automatically generate and email each provider with a daily summary of their trips. It will list all that were automatically certified and submitted for payment, as well as any that could not be certified and were flagged for issues. The email will contain a link to the provider portal, where the transportation provider can review, correct, and submit their flagged claims for payment. Even with this automated process, we will continue to proactively monitor claims and reach out to providers with identified claims issues.

Southeastrans meets Louisiana's payment requirements because we pay NEMT providers weekly, no matter what. Southeastrans believes that our strong relationships with our network providers are due, in part, to our fair and timely payment practices. We currently pay clean claims in our Louisiana contracts in nine business days, significantly less than the 15 business days required by the Louisiana Department of Health.

2.7.3.6 Complying with HR68

In compliance with House Resolution 68, Southeastrans already manages Louisiana call center services out of our existing Baton Rouge facility. We completed this transition on November 1, 2021, well in advance of the effective date of January 1, 2022.

Additionally, our network of transportation providers already complies with the requirement to operate within the region where they are domiciled. Our methodology for safeguarding compliance rests with the Louisiana business rules programmed in our Net InSight system.

We welcome the opportunity to expand our knowledge and experience with LDH as it explores ways to foster quality improvement in its Medicaid NEMT program. Our experienced people, proprietary technology, and effective processes enable us to tailor each program to meet the

specific needs of each client. Our NEMT program capabilities have provided our clients with fully integrated management solutions that enable efficient operations, reduced costs, and improved service. If awarded this contract, we will further develop our partnership with LDH, and any affiliated association, to accomplish the following:

1. Promote uniformity in the non-emergency, non-ambulance medical transportation industry.
2. Set standards that elevate quality and promote trusted service.
3. Provide opportunities for training and business counseling.
4. Maintain a vetted, updated list of active nonemergency, non-ambulance medical transportation providers.
5. Develop a platform for all who work within the nonemergency, non-ambulance medical transportation industry or use nonemergency medical transportation services to receive the latest news and trends affecting the nonemergency, non-ambulance medical transportation industry.

As the incumbent broker for seven years, we possess a clear understanding of the needs of Louisiana's Medicaid beneficiaries, the unique transportation network challenges of the state, and the available opportunities to improve the service and value delivered to LDH.

2.7.3.7 Transportation Network Compliance

Our Corporate Compliance Team makes sure all transportation providers complete a comprehensive credentialing process, which includes collecting extensive information about their business, drivers, vehicles, insurance, attendant licensure, driving record, background checks, experience, training, etc. The Compliance Team manages this process through our Credentialing Portal, which allows transportation providers to login and submit their credentialing information, eliminating the paper process. During the on-boarding process, each transportation provider receives an email that includes a list of all required documents along with a unique link to our secure credentialing portal. This is where they will enter information about their company, all drivers, and any vehicle planned for use, and upload supporting credentialing documents.

As transportation providers submit their information, our Compliance Team validates and verifies their credentials and tracks each transportation provider's progress, confirming that those who are not appropriate for our network are eliminated before ever placing a single vehicle into service.

We comply with the following Louisiana credentialing standards:

- Evidence of up-to-date business filings with the Secretary of State
- CPNC Licensing or Jefferson Parish Permits for vehicles operating in Jefferson or Orleans parishes
- Proper registration to the transportation provider

- Inspection is valid and current
- Vehicle is owned or leased legally with all required documentation

These metrics are already included in our Louisiana Transportation Provider Agreement.

Maintaining Compliance

Once information and documentation are correctly entered in the credentialing portal, the system digitally stores the electronic credentialing files, where expiration and renewal dates for time-sensitive required documents (e.g., insurance certification, driver's license, and background checks) are tracked. Our system automatically notifies our network staff of any credentials that are expiring. Transportation providers are given appropriate advance notice at 60 days, 45 days, 30 days, 15 days, and 10 days that credentials are expiring. Our inspection and monitoring system validates that all drivers and attendants comply with the requirements contained in the Transportation Provider Agreement throughout the term of their agreement with Southeastrans. At a minimum, we will confirm:

- Driver licenses for all drivers remain current
- Each driver has an updated criminal background and motor vehicle record check
- All drivers and attendants complete random drug screenings
- All drivers and attendants maintain current First Aid and CPR certifications
- Driver and attendants complete required training and education sessions

The Compliance Team also employs a real time license monitoring and fleet safety management solution called SuperVision, which is a service we use throughout our enterprise. The application continuously monitors drivers' motor vehicle records and alerts us, in real time, of any violations that occur such as speeding, license suspensions, DUIs, and at-fault accidents. Southeastrans has made a significant investment in this product because it elevates the beneficiaries' experience and provides a safer network of drivers. With that said, in Louisiana, we will additionally use LA Wallet, as required by LDH.

2.7.3.8 Beneficiary Surveys

In compliance with Section 4.4.4 of the RFP, we will conduct surveys of beneficiaries for whom transportation services were authorized to assess the delivery and quality of services as directed by LDH. To verify that riders always experience a safe, timely, and respectful ride to their destinations, we will use a post-ride survey after every ride. The beneficiary will receive a link to the survey on their smartphone or via email. **Figure 2.7.3.8-1** illustrates this as well as the five questions the beneficiary is asked. Additionally, we will have a link to the survey available on our Beneficiary website. The post-ride survey enables the beneficiary to select a 1 to 5 score; with one being the worst and five being the best. Anything lower than a five prompts them to specify why, such as driver conduct, driver assistance, safe operation,

condition of the vehicle or timeliness. prompts them to specify why, such as driver conduct, driver assistance, safe operation, condition of the vehicle or timeliness. Our QA Team uses the data to resolve complaints, monitor quality assurance, and to detect possible fraud, waste, or abuse. Our Transportation Team uses the feedback to rank transportation providers when developing their Performance Scorecard.

All survey results are reviewed by the Quality Management Committee (QMC) to identify any systemic issues that need to be addressed through corrective actions or quality improvement activities. The QMC can simultaneously monitor the correlating actions at the operational level. A survey subcommittee meets monthly to dissect the previous month's surveys. This analysis was a feature of our 2020 Utilization Review Accreditation Commission (URAC) certification.



2.7.3.9 Adjudicating Claims/Submitting Encounter Data

Our technology platform helped completely revolutionize the adjudication process, enabling us to increase the accuracy and speed in which we pay transportation providers. Because of our sophisticated technology, transportation providers no longer have to submit a piece of paper or claims file to us. Transportation providers know upfront the trip distance, the rates, and what we will be paying for the trip. This information is readily available due to GPS technology to track vehicle locations, monitor pickup and drop-off times, and streamline our claims adjudication process. The GPS data links directly with Net InSight, enabling real-time adjudication of claims with increased accuracy, efficiency, auditing, and payment. Claims information includes a time stamp as well as the exact longitude and latitude of both pick-up and drop-off addresses safeguarding accuracy of trip information. This eliminates the need for transportation providers to submit



We receive over **70%** of Louisiana claims electronically because our app makes it easy for transportation providers and processing is quick.

claims, which will not only reduce their workload but also reduce the number of claims related complaints and disputes.

We still accept paper claims for situations where the transportation provider's electronic system will not interface with our platform, or they are unwilling or unable to interface with our systems. In these cases, transportation providers mail all paper claims and supporting documentation, including their trip log, to the claims processing center in Atlanta, Georgia. Once received, our claims processors manually enter the claims into Net InSight and implement the verification process. Manual claims are paid on a two-week cycle.

Our Encounter Data Information Team produces encounter data files for all adjudicated claims in accordance with contract requirements and specifications and currently has a **99 percent** acceptance rate. Southeastrans typically transmits 837 files via an encrypted SFTP process. We have extensive experience extracting, transmitting, and receiving data files in various secure formats, including HIPAA 837, 834, 270, 271 and CMS/HCFA 1500. Our data processing tools enable us to generate text delimited files, comma separated value files, position-based files, .xml documents, and other common file types.

Figure 2.7.3.9-1 depicts the claims process, while 2.7.3.9-2 depicts the encounter data process.

2.7.3.10 Identify/Prevent Fraud, Waste, and Abuse

For more than seven years, we have provided Louisiana Medicaid beneficiaries with access to reliable NEMT services while protecting the ethical and fiscal integrity of the NEMT program. We have done this by operating an anti-fraud, waste, and abuse (FWA) program that includes a Program Integrity Plan and best practices for prevention, detection, reporting and corrective action. During our tenure, our Program Integrity Plan has been refined as we continue to implement proactive or innovative approaches to identify and minimize NEMT FWA.

Program Integrity Plan

Our Program Integrity Plan is designed to clearly identify, define, and coordinate all internal procedures and processes used to prevent, detect, investigate, and report cases of fraud, waste, and abuse.

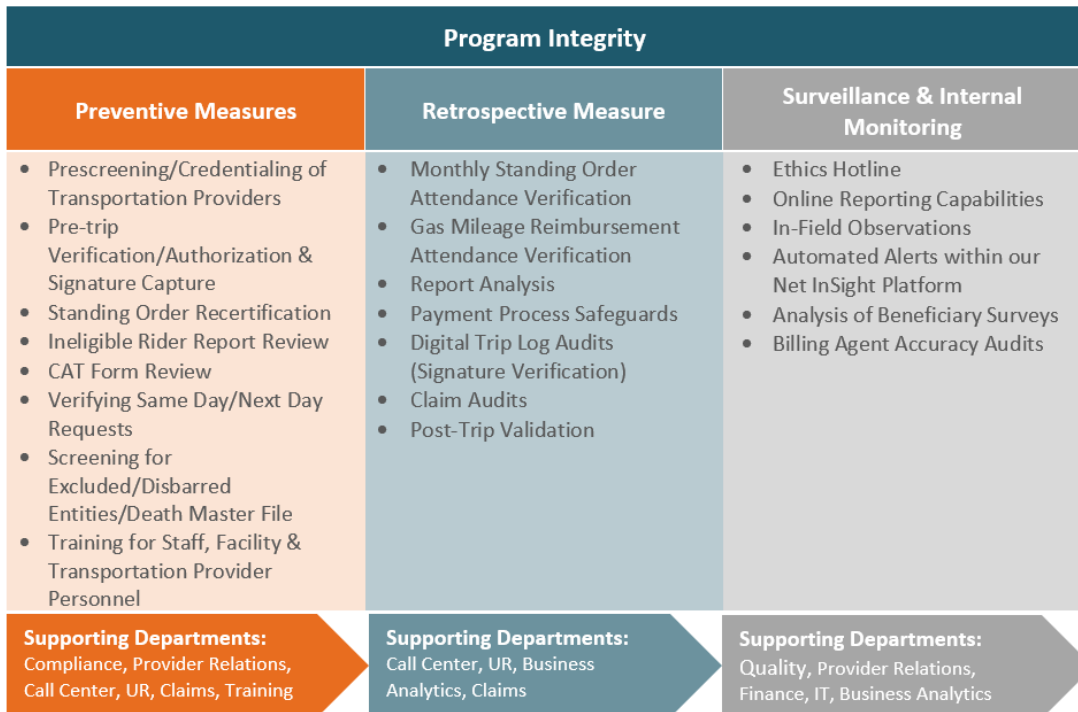


Figure 2.7.3.10-1: Program Integrity Process

Pre and Post Trip Validation Review

NEMT Pre-Transportation Validation Checks

Southeastrans validates and performs utilization reviews on specific trips, including those deemed questionable or potential for fraud, waste, and abuse, and all trips called in under 72-hours, to verify the urgency of the appointment. We also conduct utilization review by confirming beneficiary appointments for 2 percent of current trip volume via random sample.

The only exception is hospital discharges or facility transfers because they are automatically marked UR complete because the trip is confirmed upon scheduling since hospitals or facilities are the only entities allowed to arrange these transports. The NEMT Pre-Transportation Validation Checks report will be sent to LDH each quarter.

NEMT Post Transportation Validation Checks

This quarterly function, with one-quarter lag, will allow LDH to receive an associated medical claim for the completed trip. LDH provides us with the previous quarter's transportation trips and an associated medical claim with each trip. For transportation trips that do not have an associated medical claim, Southeastrans reaches out to the designated facility where the transportation occurred to verify that the facility saw the beneficiary. If so, it is noted in the system. If the beneficiary did not have an appointment or did not go into the facility, they are prioritized for utilization review and become part of the pre-transportation validation check for their next three trips or longer if needed.

The NEMT Post Transportation Validation Checks report will be sent to LDH each quarter, with a one quarter lag.

Teams Dedicated to Combatting Fraud, Waste and Abuse

We take a multifaceted approach to program integrity by employing a Compliance Department and an Audit Department, and both use our Net InSight transportation management system to identify the types of fraud or waste that typically occur within NEMT programs.

These departments function at the corporate level, with contract specific compliance personnel employed at the local contract level. The Compliance Department is a function of our Office of Corporate Counsel; while the Audit Department is a function of our Corporate Finance Department and provides program integrity oversight for the company at large.

The Compliance Department’s primary focus is Provider Network development, training, and compliance; while the Audit Department looks at all aspects of our operations, both internally and externally, from a compliance and fraud, waste, and abuse perspective. This structure is unique to our industry and has proven to be unequivocally efficient in identifying and eradicating fraud, waste, and abuse within the programs we manage.

The Corporate Compliance Team consists of a Director of Corporate Compliance, Corporate Credentialing Manager, Corporate Compliance Manager, and Corporate Incident Management Specialist. The local Louisiana Compliance Team includes a Compliance Manager, Compliance Officers, and Compliance Coordinators. The Audit Department consists of a Senior Internal Auditor, Program Integrity Manager, four auditors, and two investigators. The different types of fraud that these teams monitor include:

Medicaid Beneficiary	NEMT Provider	Healthcare Facility
<ul style="list-style-type: none"> Falsifying eligibility Kickbacks Medicaid Card loaning Repeated no-shows Misrepresenting access or need 	<ul style="list-style-type: none"> Duplicate billing Falsifying records Non-medical trips Falsifying reports/signatures 	<ul style="list-style-type: none"> Non-Medicaid certified facility Misrepresenting beneficiary need Misuse of public transportation fare/media

Table 2.7.3.10-1: *Types of fraud monitored by Southeastrans*

Mobile Tracking Application and Program Integrity

Our Net InSight platform plays a key role in our ability to track and record trip details. Additionally, our mobile app enables the driver to scan the beneficiary’s Medicaid ID card via a QR code and allows the beneficiary and the driver to electronically sign the trip log. Signatures are captured by the mobile device at the drop-off location. It would be very difficult, if not impossible, for a driver to falsify the transportation of a beneficiary because the technology provides the time and geo-coded location at the point of every pick-up or drop-off location.

Compliance and Program Integrity staff at Southeastrans can use these data elements to search for fraudulent activity among transportation providers.

Beneficiary and driver signatures captured via the driver’s tablet can be compared using customized reporting (Figure 2.7.3.10-2). This report may initiate a more in-depth review of claims and trip records to determine whether fraud has occurred.

Data Mining Using State-of-the-Art Technology

To expand our ability to combat fraud, waste, and abuse, we have combined our advanced analytic capabilities, deep industry expertise, and a flexible infrastructure to help reveal unusual patterns that require further investigation and action before payment authorization. For instance, Net InSight uses algorithms and system flags to detect anomalies that include:

- Unusual activity related to special rates
- Providers that stand out due to excessive cancelled trips, adjustments, etc.
- Billing for deceased beneficiaries
- Billing for services not rendered
- Attendance discrepancies
- Claims for a vehicle or driver that is in two places at the same time

The policies associated with our Program Integrity Plan safeguard that we have structures and processes in place for appropriate oversight as well as mechanisms to measure the effectiveness of our anti-FWA program.

2.7.3.11 Continuity of Operations

Southeastrans maintains strict disaster recovery, crisis management, and business continuity standards to reduce the possibility of data loss, or interruption of service, due to a pandemic, natural disaster, or man-made event. Having thoughtful planning in place prior to an event is particularly important in coastal states, such as Louisiana, that are all too often in the path of dangerous and destructive storms. We have the following plans in place that address all operations in each of the states in which we currently operate.

Plan	Purpose
SE-SEC018 - IT Disaster Recovery Plan	To prevent the loss of Southeastrans’ assets, such as hardware, data, and physical IT equipment; minimize downtime related to IT; keep the business running in the event of a disaster when the technology department may be unable to perform some or all of their regular roles and responsibilities for a period of time.

Plan	Purpose
SE-SEC028 - Operations Business Continuity Plan	To prepare Southeastrans in the event of disaster caused by factors beyond our control (e.g., natural disasters, man-made events, cyber-attacks), and to restore operations to the widest extent possible in a minimum time frame. It identifies vulnerabilities and outlines necessary measures to prevent and or minimize the impact on operations. It is a plan that encompasses all Southeastrans' system sites and facilities.
Pandemic Response Plan (COVID-19 specific)	To outline our response to a pandemic outbreak, including steps Southeastrans takes to safeguard employees' health while also maintaining essential operations and providing vital services to our customers and beneficiaries. In addition, it provides guidance on how Southeastrans intends to respond to specific operational and human resource issues in the event of a pandemic. The plan also cites agency and client specific variances, such as plan exceptions and waivers, related to a specific pandemic such as COVID-19. The information in this plan can be easily used to manage other types of crisis situations.

As part of our Business Continuity Plan, Southeastrans maintains a comprehensive Adverse Weather Plan that provides general guidance, organizational structure, and specific direction on preparedness, response, and communication disciplines for severe weather emergencies. It is critical that we are prepared for potential events to protect Southeastrans' employees and transportation providers to minimize interruptions for NEMT beneficiaries.

As a matter of policy, only our Director of Operations/Contract Operations Manager, Steve Buckner, or his official designee can determine to suspend or cancel trips due to adverse weather. The Contract Operations Manager will consult with LDH and Southeastrans' executive leadership to determine when to activate the Adverse Weather Plan.

When adverse weather conditions could potentially impact the ability of NEMT providers to safely complete assigned trips; Mr. Buckner will implement the following procedures:

- The Director/Contract Operations Manager and key management staff will monitor websites and local media outlets for travel advisories issued by the National Weather Service or other federal, state, and local agencies.
- If possible, the director will consult with LDH in the decision to suspend or cancel transportation services due to adverse weather conditions.
- Communicate with transportation providers and critical care facilities to determine local conditions and support life sustaining and other critical services.

Continue Receiving Requests

We have technology and processes in place to continue operating successfully during a disaster. In total, we currently operate seven call centers, including the one in Baton Rouge. These

centers are geographically spread across the country, and we have the ability to seamlessly transition calls to any one of them during a disaster situation. These call centers use the same state-of-the-art technology platform, with access to program-specific business rules, automated processes, and beneficiary information, which safeguards service continuity.

Confirming Sufficient Network Capacity

Within our systematic yet flexible Adverse Weather Plan, we identify three statuses that transportation providers or facilities will have 1) completely closed 2) open with modification to shifts, schedules, or any other operations and 3) open with no changes. As a weather event develops, Southeastrans' local operations staff will work to identify the status of each of the major facilities, so we can manage operations accordingly.

Completely Closed:	
Medical Provider	If a medical provider closes during the event, our facility team will work with the facility to reschedule each beneficiary who is affected by the closure. These schedule changes will be noted in the system immediately and transportation will be rescheduled appropriately. The facility team will then notify the beneficiary of the cancelled trip and their new appointment day/time. The transportation providers are notified of the cancellation and the new appointment day/time. We have the ability to mark a facility "closed" for specific days in Net InSight which would prevent further trips from being scheduled on those dates.
Transportation Provider	If a transportation provider closes during the event, but the facility is still seeing patients in any capacity, we will immediately reschedule the appointment with another transportation provider. Southeastrans will notify the beneficiary of the changes in transportation providers and the trip will occur as scheduled.
Open with Modification:	
Medical Provider	If a medical provider needs to modify their operating hours during the event, our facility team will work with the facility to identify the beneficiaries affected and reschedule as appropriate and follow the same process of notification as above.
Transportation Provider	If a transportation provider needs to modify their operating hours during the event, but the facility is still seeing patients in any capacity, we will immediately reschedule the appointment with another transportation provider. Southeastrans will notify the beneficiary of the changes in transportation providers and the trip will occur as scheduled.
Open with No Changes:	
We would notify internal staff so they can answer any questions from beneficiaries or transportation providers who may call in with concerns.	

Establishing clear communication with all program stakeholders is vital for instilling trust and confidence, confirming appropriate resources are available to support the response, and providing NEMT services to LDH beneficiaries with the most critical needs. Depending on the circumstances, we will use a variety of communication delivery methods (e.g., website and portals, mobile application, email, texting, and social media). However, when it comes to communicating with NEMT beneficiaries, we capture their preferences in our system and only communicate directly in that manner (e.g., phone call, email, text). During a severe weather event our agents reach out to beneficiaries in impacted areas to record whether they will be evacuating or residing temporarily at an alternate location. The trips they have scheduled are adjusted accordingly.

Prioritizing Trips

The same risks faced by the general population and our employees also impact our transportation providers and their drivers. If Southeastrans' network of transportation providers is significantly compromised due to extensive employee absenteeism or road closures during weather events, we work with LDH, care managers and/or facility staff to triage trips to assure the availability of transportation services for the most essential needs. In an adverse weather event, trips are provided in the order presented.

1. Dialysis, chemotherapy, radiation
2. Hospital discharges
3. Appointments for provider administered medication, including substance abuse/addiction recovery treatment (and doctor appointments for prescriptions that cannot be called in to the pharmacy)
4. Urgent care
5. Wound care
6. Outpatient surgery
7. Post-operative follow-up
8. Medication administration (mental health services)

Special Services representatives will confirm if these healthcare providers are open and able to receive beneficiaries for treatment. During events that limit traditional NEMT providers from rendering services in a timely or safe manner, Southeastrans may elect to increase utilization of public service agencies such as emergency medical services to render essential transportation services. Additionally, we will work to prioritize life sustaining trips and cancel non urgent trips as necessary to meet demand.

All scenarios covered by the Disaster Recovery Plan are formally reviewed and tested at least once a year. Based on the outcome of the testing, we will update our plan as needed. Also, we will revise our plan as part of a "lessons learned" exercise after it has been put to the test under real scenarios.

Example of Seamlessly Operating During a Crisis

Since the World Health Organization (WHO) declared COVID-19 a global pandemic on March 11, 2020, Southeastrans has met the situation head on. We deployed a Pandemic Response Team to address all virtual and on the ground contingencies to safeguard, as best we could, not only the ongoing NEMT services but also the safety and wellbeing of beneficiaries, our workforce, and our transportation providers and their employees. By March 13, 2020, we began transitioning our brick-and-mortar workforce to their personal homes. In the span of 60 days, 60 percent of our employees were fully functioning in a virtual way. Within days, we disseminated operational guidelines to our transportation network to safeguard rigorous health and safety standards. We continue to provide ongoing updates and assistance as this global health crisis remains fluid.

2.7.4 Case Scenarios

2.7.4.1: A Beneficiary that is a Qualified Medicare Beneficiary requested transportation approximately twenty-four (24) hours prior to a scheduled medical appointment for wound care. Describe in detail the methodology and resolution for completion of this transport.

When a Qualified Medicare Beneficiary requests transportation, the CSR enters the beneficiary's information into Net InSight to initiate the gatekeeping process, including verifying eligibility (via the LDH Medicaid site). Because the CSR is trained on LDH program rules, they know the Qualified Medicare Beneficiary is eligible for NEMT under the FFS program and that wound care is pre-designated as an urgent trip. Therefore, the trip is immediately scheduled. The CSR will alert the High-Risk Beneficiary Team (HRT), specially dedicated to overseeing all arrangements for beneficiaries who are in high-risk groups and receive specialized care. An HRT agent assumes management of the trip and locates a transportation provider to accommodate the next day transport. Once the trip is assigned to a transportation provider, the HRT agent makes three additional outreach calls to facilitate successful transport.

Call 1: The agent places a call to the transportation provider to assure they received the trip manifest and will be on time to pick up the beneficiary. If the trip is scheduled before 12 noon, the assigned transportation provider will be contacted between 12 noon and 6 p.m. the day before the trip. If it occurs after 12 noon, the assigned transportation provider will be contacted between 6 a.m. and 10 a.m. on the day of the trip.

Call 2: One hour before the scheduled pick-up time, the agent calls the transportation provider for an estimated time of arrival for pick-up and records their response in the Trip Notes section of the Net InSight system.

Call 3: The beneficiary or their representative is called immediately after the scheduled pick-up time to confirm the driver arrived and the beneficiary is enroute to their appointment.

2.7.4.2: The call center receives a transportation request for a Beneficiary that is wheelchair bound and may require assistance from the door to the vehicle. Describe the Proposer's

process to complete the scheduled transport. The Proposer should include the wheelchair policy that will be utilized [exempt from page limit].

Our CSRs know – through training and experience – that Louisiana Medicaid requires all wheelchair trips to be scheduled with door-to-door assistance. When a beneficiary who is wheelchair bound calls to schedule transportation, our CSRs will use an LDH-approved call script and associated prompts within our Net InSight platform, to verify the caller’s eligibility (via the LDH Medicaid site), inquire whether a wheelchair lift will be needed, and book the trip by selecting the wheelchair transport type in the system. The trip is dispatched to the most appropriate wheelchair transportation provider depending on the lift requirement. The assigned transportation provider’s trip manifest includes the details needed to provide the required assistance as illustrated in **Figure 2.7.4. 2.**

All transportation providers in our network are trained to provide door-to-door service for every wheelchair trip and this requirement is included in our Transportation Provider Agreement. This document includes the policies by which all transportation providers and drivers within our network are expected and obligated to conduct themselves and the business of transporting Louisiana beneficiaries. Please refer to **Appendix F** for our Transportation Provider Agreement (excluded from page limits), and reference *Section VI, Pick-up and Delivery Standards, 12.a., page 32.*

2.7.4.3: A Beneficiary utilizes a wheelchair but can transfer if requested. The Beneficiary has an oversized wheelchair due to his size and cannot easily fit in a regular wheelchair. The Proposer has scheduled transportation for this Beneficiary. However, the Proposer does not have any vehicles available that can accommodate the Beneficiary’s needs. Describe the process the Proposer will follow to complete the scheduled transport.

If there are no local in-region providers who can accommodate the beneficiary’s oversized wheelchair, our Dispatch Team will refer to their guide for wheelchair providers with oversized chair capacity, reaching outside the beneficiary’s Medicaid region in search of an appropriate and available wheelchair provider. The dispatcher will work outward from the beneficiary’s point of pick up in an effort to locate the closest provider possible.

If there is simply no appropriate wheelchair provider available on the requested date of service, the dispatch team will reach out to the beneficiary and offer the following options.

1. Travel via Regular Sized Chair: While not comfortable, the beneficiary will be offered the option to travel in a regular sized chair to keep the scheduled appointment.
2. Transfer: If the beneficiary would be comfortable transferring on the date of service from their chair to the vehicle seat for the duration of the ride, their scheduled trip can be more readily accommodated. The beneficiary could take a collapsible wheelchair with them in an ambulatory vehicle.
3. Reschedule: If the beneficiary would like to change their appointment date, Southeastrans will identify several dates an in-region transportation provider, with over-sized lift capacity, has availability and coordinate the change of appointment for the beneficiary.

2.7.4.4: At 10:30 a.m., a local hospital requests NEMT services for a Beneficiary that is scheduled to be discharged from the facility at 2:00 p.m. The Proposer assigns the transport to ABC Transportation. Shortly after 4:00 p.m., the facility notifies the call center that the scheduled transportation has not arrived. Describe the process the Proposer will follow to complete the scheduled transport.

Once the facility notifies our call center that the scheduled transportation has not arrived, the CSR will immediately alert our Dispatch Team. A dispatcher will reach out to ABC Transportation to confirm their status and the cause of their late arrival and document their response in Net InSight.

If ABC Transportation indicates their driver will be unable to complete the pickup, the dispatcher will take the following steps:

1. Use our Net Notes system to identify the next closest and most appropriate provider that could arrive the fastest. Net Notes is our GPS mobile technology utilized by our network of transportation providers. With this system our dispatchers have access to a live map indicating network vehicle locations. By hovering their cursor over any vehicle on the map, they can quickly determine whether it is currently transporting another beneficiary or is free to recover the trip. If a potential vehicle is identified, the dispatcher calls the transportation provider to confirm its availability and verify that they will recover the trip. When a new transportation provider is located, the information is documented in Net InSight for accurate claim processing and reporting.
2. If Net Notes does not reveal another available vehicle in the area, the dispatcher queries Net InSight for a filtered list of the closest and most cost-effective transportation providers. The dispatcher calls in-region transportation providers first to receive a verbal confirmation that they will complete the pick-up. Again, when the trip is assigned to a new transportation provider, the information is documented in Net InSight for accurate claim processing and reporting.
3. While the search for an available vehicle is conducted, dispatch will maintain constant contact with the facility until the discharge pick-up is successful. In the case of a nursing shift change, our dispatchers are trained to maintain a point of contact with the nurse's

station nearest to the beneficiary, along with a name for a point of reference, to make certain that the beneficiary can be readily accessed and informed. If applicable, the beneficiary will also receive updates via their mobile device.

2.7.4.4.1: ABC Transportation has had three (3) or more previous instances where a Beneficiary being discharged from the local hospital has not been picked up in a timely manner. Describe the protocol the Proposer has in place that will alert the Proposer to ABC Transportation’s ongoing deficiencies, as well as the action that will be taken against this Transportation provider.

Our Louisiana Provider Relations Manager is alerted to ABC Transportations’ history of late hospital discharge pick-ups via communications from the Dispatch Team as well as from a review of their monthly performance reports. They evaluate the performance as follows:

- How late the transportation provider was beyond contractual standards
- Their percentage of late versus on-time trips
- Number of discharges versus pre-assigned trips
- Timeframe of the occurrences (days, weeks, months, etc.)

The Provider Relations Manager will assess ABC Transportation’s regular trip load compared to the late pick-ups to evaluate the severity of non-compliance. For instance, whether they have three late hospital discharge pick-ups out of 300 or three late pick-ups out of 20 in a given timeframe. Understanding the full picture of what is occurring is important. The situation could require individual remediation efforts (e.g., re-training, consulting, trip load adjustments, liquidated damages), or a formal Corrective Action Plan (CAP) including multiple measures and milestones. Ultimately, if the provider does not improve, they may be excluded from the transportation network.

To assure that ABC Transportation is always aware of their performance, they – along with all transportation providers in our Louisiana network – receive a monthly Transportation Provider Scorecard (**Figure 2.7.4.4.1**).

The scorecards are reviewed within the operation and with transportation providers. Reviews consist of a comparison between the current and previous month’s performance. When a provider exhibits consistent performance issues, the Provider Relations Team meets with them to evaluate the cause and develop a resolution plan as explained above.

2.7.4.5: Hurricane Alpha is expected to make landfall in three (3) Calendar Days as a Category 3 storm. Describe the process the Proposer will take when the forecast predicts a direct impact in Central Louisiana. Describe the policies and procedures in place for the Proposer to ensure continuity of operations in the event of electricity and/or phone outages at the Louisiana call center.

As Hurricane Alpha approaches, with a forecasted landfall for central Louisiana, we will work tirelessly to protect the safety and wellbeing of the beneficiaries of the NEMT program, as well as our network of transportation providers and drivers, and our employees. Guided by our established and tested Disaster Recovery and Business Continuity Plan – which includes our Adverse Weather Plan – we will take the following steps in the three calendar days leading up to the storm’s impact.

Three Days Prior to Landfall

As the Category 3 hurricane bears down on the Louisiana coast, we will convene our Emergency Response Team. This team anticipates the impact of a weather emergency on the organization and develops strategies to manage the effects. It is comprised of the following leaders:

During the initial Emergency Response Team meeting, the group monitors real-time forecasts from the National Weather Service, the Weather Channel and local weather resources (TV stations/agencies) as our leadership confirms accountable owners for the following activities:

- Initiate a Command Center: Southeastrans will initiate a virtual command center with representatives from the company, transportation providers, impacted state agencies, and MCOs. This enables us to share information; discuss evacuation orders, and discuss the parameters related to State of Emergency announcements.
- Start Status Documentation Process: Our local team will identify and document within our platform: health care facility closings, particularly dialysis, oncology, wound care centers and the status of transportation providers. The initial focus will be on coastal areas most affected by evacuation orders. We will identify three statuses that transportation providers or facilities will have 1) Completely closed 2) Open with modification to shifts, schedules, or any other operations and 3) Open with no changes. Depending on their status, we will identify alternative facilities for urgent care; and coordinate the prioritization of transports with the available resources. Here is how our team will define the statuses.

1) Completely closed:

Medical Provider - If a medical Provider closes during the event, our facility team will work with the facility to reschedule each beneficiary who is affected by the closure. These schedule changes will be noted in the system immediately and transportation

will be rescheduled appropriately. The facility team will then notify the beneficiary of the cancelled trip and their new appointment day/time. The transportation providers are notified of the cancellation and the new appointment day/time.

Transportation provider - If a transportation provider closes during the event, but the facility is still seeing patients in any capacity, we will immediately reschedule the appointment with another NEMT provider. Southeastrans will notify the beneficiary of the changes in transportation providers and the trip will occur as scheduled.

2) Open with modification:

Medical Provider - If a medical provider needs to modify their operating hours during the event, our facility team will work with the facility to identify the beneficiaries affected and reschedule as appropriate and follow the same process of notification as above.

Transportation provider - If a transportation provider needs to modify their operating hours during the event, but the facility is still seeing patients in any capacity, we will immediately reschedule the appointment with another transportation provider. Southeastrans will notify the beneficiary of the changes in transportation providers and the trip will occur as scheduled.

3) Open with no changes:

We would notify internal staff so they can answer any questions from beneficiaries or transportation providers who may call in with concerns.

- Assist with Evacuation Orders: We will work with the Department or MCOs to support their requests for emergency evacuations or relocations of vulnerable coastal residents, or beneficiaries deemed to be in a high-risk area.
- Begin Beneficiary Communication Protocols: We will post Department-approved information on our websites, pushout approved text messages, and offer messaging via our interactive voice response (IVR) system. We will also rely on representatives from LDH and/or the MCOs to initiate beneficiary notifications regarding the NEMT services, such as:
 - the possibility of trip delays
 - cancellations for non-urgent services
 - referring beneficiaries to the Southeastrans Beneficiary Portal to schedule trips online, easing the strain on the call centers
 - encouraging the use of telehealth services, where available

When it comes to communicating with beneficiaries, we capture their preferences in our system and only communicate directly in that manner (e.g., phone call, email, text).

- Prepare Employees: Because the Baton Rouge area often floods during severe weather events, we will prepare for our local personnel to be ready to maintain operations.
 - Steve Buckner will meet with staff to identify which employees are willing and able

- to work late and stay in near-by hotels. Once an adequate number of employees are identified, Steve will assign someone from his team to make hotel reservations. Those employees will be expected to check into the hotel one day prior to the expected landfall. Due to their close proximity to the office, this group will be expected to conduct their work from our Baton Rouge facility.
- The remaining employees will be expected to work from home starting one day prior to the expected landfall. This will enable those employees to confirm their systems are set up and ready to go prior to the storm's arrival. Our IT department will make sure each employee is equipped with the tools they need (laptops, phones, system access) to perform their job functions from their homes. Due to the pandemic, our team is already well versed at telecommuting. These individuals are able to receive calls via our cloud-based technology platform and schedule trips using our portal, which offers secure access from remote locations.
 - Confirm Technology Back-up: With the storm three days out, it is hard to predict the extent of the damage that will occur or specifically what obstacles we will need to overcome. To safeguard the continuity of operations, the team will doublecheck that our back-up contingency plans are ready in the event of electricity and/or phone outages at the Louisiana call center.
 - **Power failure at Baton Rouge Office:** Confirm all PCs and local hardware are protected by surge protectors and uninterrupted power supplies (UPSs). Verify the back-up generator at the office will automatically activate to provide power for up to 48 hours. Ongoing, the generator is also tested weekly via a startup procedure and manually checked for batter voltage readings – while the filter is inspected annually.
 - **Phone Outage/call center is damaged:** Confirm CSRs at our other call centers, and personnel who do not routinely process trip requests, but who are trained to do so, are activated to supplement the Louisiana call center staff when needed. These individuals include managers, supervisors, and claims processing personnel. Our HIPAA-compliant, telephony system intelligently routes calls in the event of a local outage through a secure and geographically redundant private cloud architecture. That means we can easily use any one of our other centers as a backup in the event of failure or emergency. The transition to another Southeastrans call center will happen immediately and it will be a seamless experience for callers. The CSRs who answer calls are employees of Southeastrans and we do not outsource or offshore our call center services.

Two Days Prior to Landfall

Realizing that the intensity and severity of Hurricane Alpha will vary by geographical region, we will increase the frequency of our Emergency Response Team meetings to every two hours. Additionally, we will:

- Continue to proactively monitor the weather forecasts and determine if the governor has issued additional emergency declarations based on changing conditions.

- Finalize key management personnel needed on-site and on-call during the emergency.
- Prioritize NEMT services for critical care NEMT beneficiaries (e.g., those requiring dialysis, radiation or chemotherapy) and directly communicate with transportation providers in affected areas to identify their availability (volume of vehicles, drivers, etc.) for urgent trips to aid in the prompt assignment and needed trip recovery.
- Collaborate with LDH, Louisiana Emergency Management, and MCOs to keep them abreast of our plans and any significant issues.
- Continue working closely with critical care facilities and transportation providers to identify their operational status so we can manage operations accordingly (as defined previously).
- Continue working with beneficiaries, facilities, and transportation providers to reschedule appointments to a different day, time, or location for non-critical care beneficiaries, while working diligently with all medical facilities to determine availability and capacity.

Day of Landfall

If Southeastrans' network of transportation providers is significantly compromised due extensive damage, road closures, or other factors, we will work with LDH, MCOs, care managers and/or facility staff to triage trips to assure the availability of transportation services for the most essential needs, as follows:

1. Dialysis/chemotherapy, radiation
2. Hospital discharges
3. Appointments for provider administered medication, including substance abuse and addiction recovery treatment (and doctor appointments for prescriptions that cannot be called in to the pharmacy)
4. Urgent care
5. Wound care
6. Outpatient surgery
7. Post-operative follow-up
8. Medication administration (mental health services)

We will work to prioritize life sustaining trips and cancel non urgent trips as necessary to meet demand.

Vent Patients

For beneficiaries on vents, who might lose power in inclement weather, Southeastrans will provide the following support:

- Receive request for transport at our call center

- Work with our EMS providers to secure an appropriate ambulance transport to the closest receiving hospital
- Work with more distant transportation providers to secure transports should certain resources (e.g., coastal resources) become stretched due to evacuations or demand

High-Risk Beneficiary Outreach

Our team will place calls to beneficiaries with upcoming trips in the most affected storm areas to check on their status. This helps us determine if a beneficiary has evacuated and the condition of the area in which they live.

Coordination with Clients

We will continue to work collaboratively with LDH and MCOs as everyone assesses the extent of the destruction. Southeastrans will deploy a client notification process if we recognize there is a staffing concern within our own workforce and those of our provider networks and develop a plan of action.

2.7.4.6: A heart transplant Beneficiary, who lives in a rural area, is scheduled for pre-op testing at the local Level II Trauma Center in four (4) Calendar Days. The Beneficiary has been scheduled for a 7:00 a.m. pickup time. The Beneficiary is ambulatory but will carry an oxygen tank. The night prior to the scheduled pickup, the assigned Transportation provider notifies the Proposer that they are unable to perform the trip. The Proposer has no willing and available Transportation provider in the Region. Describe the process the Proposer will follow to perform the scheduled transport.

Following HR 68 protocol, Southeastrans will exhaust all transportation provider resources within the region before seeking coverage from neighboring regions or beyond. Louisiana is home to four Level II Trauma Centers in the southwest, central, and southeast regions of the state. Depending on which trauma center is local to where the beneficiary resides, the trip from their rural residence to the center could take an hour or more. Our after-hours Dispatch Team will work quickly and implement the urgent dispatch process. The dispatcher will query Net InSight for a filtered list of the closest and most cost-effective transportation providers and begin calling them directly to identify an available and willing transportation provider for the ambulatory transport, before the 7 a.m. pick-up.

During the beneficiary's original reservation call, the CSR will confirm that the oxygen tank the beneficiary will carry is sized for personal use and will notate this special need on the transportation provider manifest. The dispatcher will also share this information with all transportation providers they contact. When the trip is assigned to a new transportation provider, all modifications are documented in Net InSight for accurate claim processing and reporting and a manifest note is recorded indicating that the beneficiary will be traveling with a personal oxygen tank.

When the dispatcher confirms the transportation provider accommodating the trip, they call

the beneficiary to share details about the newly assigned transportation provider.

2.7.4.7: A Beneficiary's Healthcare Provider submits a Standing Order for NEMT services. The appointment is for chronic outpatient dialysis at 10:30 a.m. on Mondays, Wednesdays, and Fridays from Monday, December 1, 2021 through Thursday, May31, 2022. The Beneficiary uses a manual wheelchair, but a lift has been requested. The return pickup time is 4:45 p.m. The Proposer should describe the process they will follow to complete this submitted Standing Order request. Additionally, the Proposer should respond to each of the variations of this scenario as presented below:

A Special Services Representative (SSR) in the Standing Order Department follows the steps below upon receiving the standing order request from the beneficiary's healthcare provider:

1. The SSR verifies the beneficiary's eligibility and once confirmed, contacts the healthcare provider to make certain all the information on the standing order is correct (dates and times, pick-up address, phone numbers, etc.). They also provide the facility with the proper Southeastrans contact information, should the appointment change.
2. The SSR enters the standing order information into the Net InSight system and includes a manifest note indicating that the beneficiary requires a vehicle with a lift. This note signals the dispatcher that a lift is needed and that they secure the appropriate vehicle for transport. This note also appears on the transportation provider's manifest, so they are aware that the beneficiary will be using their lift at pick-up and drop-off.
3. The standing order is then created with a start date of December 1, 2021 and an end date of May 31, 2022. In the event a lift vehicle is not available, the SSR will contact the beneficiary to confirm whether a ramp-style wheelchair accessible van will be satisfactory. If the beneficiary's needs cannot be met by the ramp-style wheelchair van, the SSR will begin to reach out of region to cover the first trip, but the standing order will be permanently assigned to an in-region provider with a lift-style wheelchair van.
4. Lastly as a best practice, one month before the standing order is scheduled to expire, an SSR contacts the facility to determine if a renewal is needed or if the scheduled end date is still valid. If the facility needs to renew the standing order, the SSR will instruct them to submit a new standing order form so and the renewal is processed for another six months, or a timeframe within six months that is required by the healthcare provider.

2.7.4.7.1: On Monday morning at 8:00 a.m., the Beneficiary contacts the call center and states the scheduled Transportation provider called that morning and stated that there was a family emergency and that the Transportation provider would be unable to transport the Beneficiary to treatment. Explain the process that the Proposer will take once this information is received.

Once the call center receives this information, the CSR taking the call immediately alerts our Dispatch Team about the provider send back, and they implement the following process:

1. A representative from the Dispatch Team reaches out to the assigned transportation provider to confirm that the information shared by the beneficiary is accurate. Then, the Dispatcher begins searching for recovery transportation right away by:
 - a. Using our Net Notes system to identify the next closest and most appropriate provider that could arrive the fastest. By hovering their cursor over any vehicle on the map, they can quickly determine whether it is currently transporting another beneficiary or is free to recover the trip. If a potential vehicle is identified, the dispatcher calls the transportation provider to confirm its availability and verify that they will recover the trip.
 - b. If Net Notes does not reveal another available vehicle in the area, the dispatcher queries Net InSight for a filtered list of the closest and most cost-effective transportation providers. The dispatcher proactively calls in-region transportation providers first to receive a verbal confirmation that they will complete the pick-up.
 - c. Simultaneously, while a dispatcher is working to locate a transportation provider – another reaches out to the facility to determine whether the appointment can be scheduled for the next day if immediate transportation cannot be secured.
2. When the trip is assigned to a new transportation provider, the information is documented in Net InSight for accurate claim processing and reporting.
3. When a transportation provider is identified, the dispatcher calls the beneficiary to share details about the newly assigned driver (e.g., make/model of vehicle, driver's name, estimated time of arrival).
4. If the dispatcher is unable to secure an alternate driver, they call the beneficiary to explain and offer the new appointment time the facility was able to accommodate.

To prevent the transportation provider from creating a similar disruption in the future, the dispatcher will inform the Provider Relations Manager of the late send back. The Provider Relations Manager will meet with the transportation provider to go over appropriate contract requirements for notifying Southeastrans rather than the beneficiary. By following our established send back procedures, we are better equipped to reassign the trip and alleviate unnecessary stress on the beneficiary.

2.7.4.7.2: The current date is Wednesday, March 9, 2022 and the Beneficiary requests to move the Friday, March 11, 2022 appointment to Thursday, March 10, 2022. Explain the process that the Proposer will take once this information is received.

The CSR will document the beneficiary's request and notify the Dispatch Team who takes the following steps:

1. Dispatch calls the facility to confirm they are aware of and are accommodating the requested appointment change.

2. Dispatch contacts the assigned transportation provider to determine if they can accommodate the change.
3. If the assigned NEMT provider cannot deliver the trip, dispatch is re-activated.
 - a. Using our Net Notes system to identify the next closest and most appropriate provider that could arrive the fastest. If a potential vehicle is identified, the dispatcher calls the transportation provider to confirm its availability and verify that they will recover the trip.
 - b. If Net Notes does not reveal another available vehicle in the area, the dispatcher queries Net InSight for a filtered list of the closest and most cost-effective transportation providers. The dispatcher proactively calls in-region transportation providers first to receive a verbal confirmation that they will complete the pick-up. The dispatcher will document in Net InSight when the new transportation provider is identified and assigned.
4. Finally, the beneficiary is notified if their original transportation provider cannot accommodate their appointment change and offered the option to keep their original appointment time.

2.7.4.7.3: The current date is Wednesday, May 30, 2022 and the Beneficiary has an appointment for dialysis on Friday, June 1, 2022. Describe the process the Proposer will follow to accommodate this transport.

Understanding the urgency of a dialysis appointment, our CSR will immediately schedule the trip using our standard gatekeeping process. If the scenario above is for a new dialysis patient, the CSR will take the following steps:

1. The CSR will book the single trip and alert the Dispatch and the Special Services Team.
2. Dispatch will begin the urgent dispatch process by calling transportation providers to secure service and document pertinent information in Net InSight.
3. An SSR will reach out to the beneficiary's dialysis facility to initiate the standing order process for ongoing treatments (send the standing order form and assure all standing order information is received by Southeastrans). It may be necessary for the SSR to set up several individual trips to cover the appointments that will occur before the standing order forms are completed and returned.
4. Once the standing order form is received, the SSR proceeds with scheduling the standing order trips for the beneficiary in the Net InSight system.
5. Dispatch will procure a regular transportation provider for the standing order.

The scenario would not occur for an existing dialysis patient who is already in our system. This is because one month before their existing standing order is scheduled to expire, an SSR

contacts the facility to determine if a renewal is needed. If so, the SSR instructs the facility to submit a new standing order form and the renewal is processed for another six months.

2.7.4.8: A Beneficiary has an existing Standing Order for chemotherapy on Mondays with a drop-off time at 1:00 p.m. and a pick-up time at 3:30 p.m. from Monday, December 1, 2021, through Monday, May 28, 2022. The Beneficiary requests a change to the Standing Order to add radiation treatment on Mondays at 3:30 p.m. The pickup time for the radiation treatment is 6:00 p.m. Describe the process the Proposer will follow to accommodate this request.

When a beneficiary needs to add an additional recurring appointment to an existing standing order, the SSR takes the following steps:

1. The SSR contacts the beneficiary's treating facility to confirm the dates and times of the additional radiation treatment and that the radiation treatment will be conducted in the same complex.
 - If the appointment is at the same complex, the transportation provider remains the same and the transportation provider carries out the standing order.
 - The return pickup time is adjusted to 6:00 p.m.
2. Once confirmed by the facility, the SSR adds the additional trip to the existing standing order, with the appropriate pick up and drop off location(s) and time, in the Net InSight system. The SSR contacts the transportation provider currently servicing the beneficiary's standing order to determine if they can accommodate the added appointment – noting the later pick-up time.
 - a. If the answer is yes, the transportation provider remains the same and the transportation provider carries out the standing order.
 - b. If the answer is no, the SSR will work with Dispatch to identify a transportation provider who can accommodate the beneficiary's entire standing order. The platform enables us to identify transportation providers who can accommodate a late afternoon pick-up.
 - c. The SSR will notify the beneficiary if a transportation provider change is needed.

In the rare case that the treatment locations of the two appointments are not the same, and the times and locations make timely pickup and drop-off unlikely, the SSR will coordinate with the two facilities and the beneficiary to identify a different date or time to accommodate the radiation treatment, while coordinating the necessary transportation.

2.7.4.9: A nursing facility submits a transportation request for one of their residents twenty-four (24) hours prior to the appointment via telephone. Describe the process the Proposer will follow to address this request.

When a nursing facility representative calls our main call center number, or uses the dedicated facility phone number, a CSR will obtain the needed information, verify eligibility, and apply Louisiana Medicaid contract rules pertaining to nursing facility transports.

The CSR knows that based on Louisiana Medicaid rules, requests submitted by nursing facility representatives do not have to abide by the customary 48-hour advance notice requirement. Furthermore, the CSR knows that beneficiaries residing in nursing facilities must be transported by stretcher using an ALS or BLS level of service. The CSR will proceed with scheduling the request as an urgent trip.

The CSR will ask the facility representative to complete and submit the CAT form so the ALS/BLS provider can get paid. Upon ending the call, the CSR will alert the Dispatch Team and they initiate the urgent trip process to accommodate next day transportation.

2.7.4.10: A Beneficiary calls to schedule transportation for a cardiac rehabilitation service in three (3) Calendar Days. Describe the process the Proposer will follow to handle this request.

When the beneficiary calls to schedule transportation for a cardiac rehabilitation service, the CSR accesses the LDH Medicaid website to establish eligibility, then will ask a series of questions to determine the duration of the beneficiary's cardiac rehab program. Because the beneficiary is calling within three calendar days of the appointment, the CSR will schedule the trip as a standard request. This scenario states that the beneficiary's scheduled trip is three calendar days away. If the day scheduled lands on a weekend, then our CSRs will call the facility to confirm their weekend hours to assure the drop-off/pick-up times are scheduled accordingly.

In addition, if the beneficiary indicates there are multiple sessions associated with their cardiac rehab program, the CSR will alert the SSR team about establishing a standing order on behalf of the beneficiary.

2.7.4.11: A Beneficiary resides with their grandmother and will be traveling out of state in order to receive medical care. The Beneficiary's grandmother is requesting gas reimbursement for the trip. Describe the Proposer's process for handling this request.

During the gatekeeping process, our CSR will verify the beneficiary's Medicaid eligibility and ask a series of questions to determine eligibility for the Gas Reimbursement Program. When the CSR is informed that the grandmother and beneficiary reside at the same address, the CSR will advise the grandmother that she is **not** eligible for gas reimbursement and explain the Louisiana program rules that state, "the provider may not reside at the same physical address as the beneficiary being transported." The grandmother is informed that she may still transport the beneficiary if she chooses, but not through our gas reimbursement program.

If the grandmother is unable to afford gasoline or other costs associated with the out of state trip, the CSR will take the following steps:

1. The CSR will contact the beneficiary's health care provider to obtain a completed out of state travel form.

2. The call center supervisor will submit the completed form to LDH for approval or follow the beneficiary's MCO guidelines.
3. Once the request is approved, our CSR will schedule the trip and our dispatcher will locate a transportation provider to complete the service, with the grandmother accompanying her grandchild as an escort.

2.7.4.12: A Beneficiary has been referred to Cincinnati's Children's Hospital for a specialist that is not available in Louisiana. The medical appointment is scheduled for March 15, 2022, which is two (2) weeks from today. The Beneficiary's guardian has requested air transportation for the round Trip. Provide the process for responding to and handling a request from the Beneficiary's guardian to travel by (1) commercial air and (2) fixed wing ambulance. Include the process for reimbursing for lodging, meals, and other permitted travel expenses.

To assist the beneficiary's guardian with their request, the CSR first verifies the beneficiary's eligibility, after which the following information is collected in order to complete the request for approval:

- Exact travel dates
- Pick-up address
- Address of hospital
- Names and dates of birth for all parties traveling
- Closest airports to the beneficiary and the hospital

For FFS beneficiaries, the request is sent to LDH for approval. Once approval is received, the trip information is transmitted to the Meals and Lodging Team who completes the arrangements for commercial air transport and lodging. For MCO beneficiaries, Southeastrans will follow the MCO's specifications for obtaining authorization for out of state travel.

Commercial Air Scheduling

If the beneficiary is able to fly commercially, the Meals and Lodging Team will work to schedule appropriate flights. The team will begin by searching appropriately timed flights from the airport closest to the beneficiary's home to Cincinnati/Northern Kentucky International Airport. If no flights are available that meet the beneficiary's schedule, more distant Louisiana airports will be searched. The Meals and Lodging associate will contact the guardian to confirm all necessary information for the flight prior to booking.

Fixed Wing Ambulance Process

Scheduling of the fixed wing ambulance transport is managed by our Dispatch Team. They will work directly with Cincinnati Children's Hospital to identify the most appropriate fixed wing ambulance choice. It is our experience that most hospitals either have their own air ambulance service or a preferred transportation provider. Once the air ambulance provider is confirmed, the Compliance Team works with them to collect the following documentation:

- Certificate of Insurance
- Louisiana Secretary of State Registration
- IRS form (EIN)
- W9
- Contact Information
- NPI Number (for OIG/SAM Exclusion List Verification)

When Compliance has completed the documentation validation process and entered the required information in the Net InSight system, dispatch is notified and will proceed to enter the negotiated fixed wing ambulance rate and any required cost overrides.

Ground Transportation

Ground transportation from the airport is the responsibility of the guardian, who is advised of such at the time of scheduling. Should LDH make an exception, our Meals and Lodging Team will assure that sufficient funds are available.

Meals and Lodging

Our Meals and Lodging Agent will contact the hospital to determine whether they have recommendations for hotels and/or negotiated rates. If so, and the nightly rates are compliant with LDH policy, the agent will proceed with booking. If not, or there is no availability, the agent will work with hotels in the vicinity of the hospital to book appropriate accommodations.

Southeastrans makes every effort to prevent any out-of-pocket costs to the guardian for covered meals, lodging, and travel costs by issuing a reloadable debit card for their use. Once all arrangements are in order, the Meals and Lodging agent will contact the guardian to provide all of the information they will need to access their flights. The debit card will be delivered to the guardian by FedEx or if the timeframe will not allow, delivery will be directed to the hotel on the day of check-in. After the card is in the guardian's possession, subsequent meal and approved travel related funds are simply loaded to the card.

2.7.4.13: The Proposer receives a credentialing packet from a new provider who wishes to service St. Tammany Parish, which is currently underserved. The packet includes the provider's Disclosure of Ownership form, which indicates four (4) individuals, each with twenty-five percent (25%) ownership, four (4) vehicle registration documents, four (4) copies of driver's licenses, and defensive driving certificates for all the drivers. Describe in chronological order all of the steps that the Proposer will take to fully credential this provider.

In this scenario, the transportation provider has not offered all of the documentation required for credentialing. Upon receiving the transportation provider's credentialing packet, or a packet for any transportation provider requesting to join our network, our Louisiana Provider Relations Manager works with the Compliance Team to coordinate the transportation provider's credentialing and manages their contracting process and orientation. This three-part process is outlined below:

Part 1. New Provider Intake

The Provider Relations Manager talks with the transportation provider (all four owners or their designee) to determine:

- The Region in which the company is domiciled, assuring they are eligible to serve St. Tammany Parish, and
- The levels/modes of service they offer and the service days and hours they are available to determine if their capabilities will meet the current needs of the parish.

Once the Provider Relations Manager determines the transportation provider's services meet St. Tammany Parish's needs, they collect the following documentation from the transportation provider. Where applicable, the documentation must reflect information for all four owners.

- a. Disclosure of Ownership Form
- b. Request for Qualifications (all four owners will be listed)
- c. Certificate of Insurance
- d. Secretary of State Certificate
- e. W-9
- f. Copy of EIN statement

The Provider Relations Manager reviews and verifies the legitimacy of all documents collected and once thoroughly vetted, their file is forwarded to the Compliance Team to complete the in-depth credentialing and training process.

Part 2. Provider Credentialing and Training

The Compliance Manager receives notification of the new provider application and assigns a Compliance Coordinator to assist the transportation provider through the credentialing process. Within 24 hours of assignment, the coordinator sends a welcome letter to the transportation provider, introducing themselves, outlining the list of documentation items that will be required, the training that must be completed, and instructions for how to use our credentialing tool. The items the provider must submit are listed below.

Transportation Provider Entity Documents

- Copy of Corporation/Articles of Organization
- IRS Form/Tax ID #
- ACH form (for direct deposit)
- NPI Number (must be in Business name)
- Criminal Background Check on **all four** Owners and all drivers
 - Must be from one of the vendors on our background vendor list, must be less than 30 days old
 - Needs to search back a minimum of 99 years
 - A list of Barrier Crimes is provided that would make a transportation provider or driver ineligible to participate in the program
- A copy of the Social Security Card for all Owners
- A copy of the Driver's License for all Owners

- All four owners must complete our Corporate Compliance Training and complete the training survey – links to both are provided
- Current employee list
- Certificate of Insurance (COI)

Driver Documents

Clear copies of the following for **all** drivers:

- Current Class “D” driver’s license or CDL
- Social security card
- Criminal background
 - Must be from one of the vendors on the LDH approved background vendor list (must be less than 30 days old)
 - Needs to search back a minimum of 99 years
- Motor Vehicle Report (any license suspended in the last five years for any reason other than child support is not accepted)
- Five Panel Drug Screen (must be less than 30 days old)
- Training certificates for:
 - First Aid (online is not accepted)
 - CPR (online is not accepted)
 - Defensive driving (online is not accepted)
 - Passenger assistance (online is not accepted)
 - Wheelchair training
- HIPAA/Compliance Test

The Provider is given the option to secure all required training from a Southeastrans certified trainer or through their own training resources approved by Southeastrans.

Vehicle Documents and Equipment

Current copy of registration (must be registered in the business’ name) and insurance card for ALL vehicles

- Decals/lettering must be placed on vehicle body and not on glass. Decals/lettering CANNOT be magnetic.
- Signage Requirements:
 - Minimum 3-inch lettering in contrasting colors on driver side, passenger side and rear of vehicle (not in windows).
- Must have a for-hire plate. (Non-profit government entities may also have a public plate instead of for-hire)
- The following safety items are REQUIRED INSIDE the vehicle
 - Fire extinguisher (two 3 lb. or one 5 lb. extinguisher)
 - Seatbelt cutter
 - Two Seatbelt Extenders
 - Medical footstool (metal legs, non-skid top, rubber stop on the feet, weight threshold of 350 lb. or more)

- Spill kit (containing impervious gown, shoe cover, fluid shield/face mask, and rubber gloves)
- Large First aid kit (150 pieces or more)

Once the provider has submitted all required documentation, the coordinator validates all materials and creates a provider profile in Net InSight. The Compliance Manager conducts a secondary verification. After this final review, the Provider Relations Manager is notified to begin the final contracting and orientation process.

Part 3. Provider Contracting and Orientation

Once the transportation provider's credentialing is complete, the Provider Relations Manager is notified, and sends the Southeastrans Transportation Provider Agreement and the Rate Agreement to the transportation provider for review and signature via an electronic process completed via DocuSign.

Once both agreements are fully executed, the transportation provider is scheduled for a two-part Orientation. Prior to beginning Orientation, the transportation provider must complete some pre-work.

1. The iSupport system sends the provider an email with a link to set up their Provider Portal user ID and password. This link is good for only 24 hours, so providers are instructed to complete the process right way.
2. The provider is advised to visit our Help Desk Center and review the Provider Portal Training video, the Provider Portal PowerPoint Presentation, and the Provider Portal Support tab prior to their scheduled Orientation.

Provider Orientation - Two Parts

1. **Part I:** The provider receives an email with a link to attend virtual claims/portal training. This exercise teaches the provider how to navigate the portal and submit their claims.
2. **Part II:** Upon completion of Orientation Part I, the provider receives an email with instructions for attending Part II where they complete an in-depth review of the Provider Handbook.

Once the four co-owners complete all of the steps outlined above, they are eligible for trip assignments. It typically takes 30 days for a new transportation provider to complete the credentialing process if they submit all their documentation promptly.

2.7.4.14: The Proposer receives a claim for NEAT services from an ambulance company. The Proposer was not notified of the transport prior to receiving the claim. Explain the Proposer's claim adjudication process.

The NEAT claim described above is received by the Claims Department in one of three ways:

1. 837 file
2. Uploaded to the Provider Portal, or
3. Mailed in as a paper claim

Regardless of the manner in which the claim arrives, it is considered a “post authorization claim” and is allocated to the Post-Date of Service Team, where these steps are followed:

1. A Support Specialist reviews the claim and confirms the beneficiary’s eligibility via the state’s eligibility portal. If they were eligible on the date of service and a completed Certificate of Ambulance Transport (CAT) has been provided, the trip is retroactively scheduled in the Net InSight system as long all trip standards are met.
 - a. Once scheduled, the Post Date of Service specialist assigns the leg ID to the claim form, and the claim is reassigned to the Claims Specialist that processes the specific NEAT provider’s claims. As part of our fraud, waste and abuse program, there is a separation of duties to safeguard the integrity of the claims process.
2. If the beneficiary is not eligible, the trip does not meet all requirements, or the CAT form is missing, the trip does not meet all standards for post-date of service booking and is rejected. The specific reason for trip rejection is noted on the claim and a copy is sent to the provider.
3. The provider is informed that they can make corrections and resubmit the form, and upon receipt the process begins again.
4. If the NEAT provider is not in network, the Specialist:
 - a. Verifies whether the provider was in network at the time of service. If so, they complete the process described above.
 - b. If they were not, the specialist contacts the Provider Relations Department to determine if they are working to get the provider contracted.
 - c. If the provider was not in network at the time of service, and is not in process with Provider Relations, the claim is sent back to the provider as a misdirected claim with instructions for them to contact Provider Relations.
5. Trips added to the post authorization claim are forwarded to the Claims Team with the necessary leg ID, where the claim is processed per the original received date.

At this point, the claim must meet all claim requirements for payment (pickup and drop off time, mobility, procedures codes, etc.) If the claim is denied, the provider receives notification on the reimbursement report and can resubmit the claim with corrections.