

AmeriHealth Caritas Ohio

Transportation Benefits

AmeriHealth Caritas Ohio offers transportation benefits for members. We cover rides to medically necessary emergency and non-emergency care visits. We will make sure you have the kind of ride you need.

To set up a ride

Call **MTM** — our ride vendor — at **1-833-664-6368**.

- Set up the ride at least 48 hours before your healthcare visit.
 - This does not apply for urgent member needs (like same-day or next-day visits) and hospital discharges.
- Have the full address of the location for the visit.
- Let the driver know:
 - How to contact you
 - If there is a certain entrance to use
 - If you will be bringing anything like a wheelchair, something to help with walking, or a child's car seat. (If you are using a car seat, you must provide the seat and be able to set up and remove it.)

To cancel or reschedule a trip: Call MTM at **1-833-664-6368**, at least 24 hours before your visit.

For trips longer than 30 miles

If you must travel 30 miles or more from your home to get covered healthcare services, AmeriHealth Caritas Ohio will cover the rides to and from the provider's office. Call MTM at **1-833-664-6368** at least 48 hours before the trip.

To file a complaint or get help setting up or canceling a ride: Call Member Services at **1-833-764-7700** (TTY **1-833-889-6446**), 24 hours a day, seven days a week.



Don't miss an appointment. Call today to schedule a ride.

To learn more about transportation benefits, scan the QR code with your smartphone.



AmeriHealth Caritas Ohio Transportation Benefits

For trips less than 30 miles

You can get rides for certain services through the local County Department of Job and Family Services (CDJFS) Non-Emergency Transportation (NET) program. You may contact your County Department of Job and Family Services for questions or help with NET services.

AmeriHealth Caritas Ohio provides a supplemental transportation benefit that covers up to 60 one-way trips per member per year for provider visits less than 30 miles away.

For emergencies, call **911** or go to the nearest emergency room.

Member and family mileage reimbursement process

- Call MTM on or before the day of your healthcare visit. **Please note:** If the request is for a Member and Family Advisory Council meeting, you must call MTM **a week before** the meeting date. The number to call can be found on the back of your card or by calling Member Services. You will be given a trip number during this call. Write the number on your trip log. To be reimbursed, you must submit a trip log for all trip requests. That money will go on a reloadable U.S. Bank Visa card that will be mailed to you.
- Submit trip logs no more than 60 days past the date of the first visit.
- Any healthcare professional at the facility can sign the trip log. **This includes nurses, therapists, physician assistants, and nurse practitioners.** It doesn't have to be a doctor.
- Please make copies of your blank reimbursement trip log. If you need a new copy of the form, you may download it at www.memberportal.net, or you may call and ask for one to be mailed to you.
- A one-way trip is from your home to the visit. A round trip is from your home to the visit and then back home. For trips with more stops, such as an extra trip from the first healthcare visit to a second visit before going back home, enter each trip leg on a separate line. For example:
 - 1st leg — home to first provider
 - 2nd leg — first provider to second provider
 - 3rd leg — second provider to home
- Forms that are not filled out the right way cannot be processed.
- Keep a copy of your trip log for your records.
- **For questions about reimbursement**, call **1-888-513-0703**.



To learn more about transportation benefits,
scan the QR code with your smartphone.



Notice of Non-Discrimination

AmeriHealth Caritas Ohio complies with applicable federal civil rights laws and does not discriminate based on race, color, religion, gender, gender identity, sexual orientation, age, disability, national origin, military status, veteran status, ancestry, genetic information, health status, or need for health services in the receipt of health services. AmeriHealth Caritas Ohio does not exclude people or treat them differently because of race, color, religion, gender, gender identity, sexual orientation, age, disability, national origin, military status, veteran status, ancestry, genetic information, health status, or need for health services in the receipt of health services.

AmeriHealth Caritas Ohio provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

AmeriHealth Caritas Ohio provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, contact Member Services at **1-833-764-7700 (TTY 1-833-889-6446)**.

If you believe that AmeriHealth Caritas Ohio has failed to provide these services or discriminated in another way based on race, color, religion, gender, gender identity, sexual orientation, age, disability, national origin, military status, veteran status, ancestry, genetic information, health status, or need for health services in the receipt of health services, you can file a grievance with:

- AmeriHealth Caritas Ohio Grievances
P.O. Box 7133
London, KY 40742
- You can also file a grievance by phone at **1-833-764-7700 (TTY 1-833-889-6446)**.

If you need help filing a grievance, AmeriHealth Caritas Ohio Member Services is available to help you. You can contact Member Services 24 hours a day, seven days a week, at **1-833-764-7700 (TTY 1-833-889-6446)**.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

- Electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
- By mail at:
U.S. Department of Health and Human Services
200 Independence Avenue SW, Room 509F, HHH Building
Washington, DC 20201
- By phone at **1-800-368-1019 (TDD: 1-800-537-7697)**

Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.

AmeriHealth Caritas Ohio is committed to maintaining the privacy and security of the personal information of its plan members. Read more on our privacy practices at www.amerihealthcaritasoh.com/privacy-notice.aspx



English:

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call **1-833-764-7700 (TTY 1-833-889-6446)**.

If you have any problem reading or understanding this or any other AmeriHealth Caritas Ohio information, please contact Member Services at **1-833-764-7700 (TTY 1-833-889-6446)** for help at no cost to you. We can explain this information in English or in your primary language. The information in other languages is at no cost to you. You can also get this information for free in other formats, such as large print, braille, or audio.

Spanish:

ATENCIÓN: Si habla español, tiene a su disposición servicios de asistencia lingüística sin cargo. Llame al **1-833-764-7700 (TTY 1-833-889-6446)**.

Si tiene algún problema para leer o comprender esta o cualquier otra información de AmeriHealth Caritas Ohio, comuníquese con Servicios al Miembro al **1-833-764-7700 (TTY 1-833-889-6446)** para recibir ayuda sin costo alguno para usted. Podemos explicarle esta información en inglés o en su idioma principal. La información en otros idiomas no tiene costo para usted. Además, puede obtener esta información sin cargo en otros formatos, como impresión en letra grande, braille o audio.

Ukrainian:

УВАГА: Якщо ви говорите українською мовою, ви маєте право на безкоштовні мовні послуги. Телефонуйте за номером **1-833-764-7700 (TTY 1-833-889-6446)**.

Якщо вам важко прочитати або зрозуміти цю або іншу інформацію, надану AmeriHealth Caritas Ohio, будь ласка зв'яжіться зі службою підтримки та обслуговування клієнтів за номером **1-833-764-7700 (TTY 1-833-889-6446)**, щоб отримати безкоштовну допомогу. Ми можемо пояснити цю інформацію англійською або вашою рідною мовою. Інформація іншими мовами надається вам безкоштовно. Ви також можете отримати цю інформацію безкоштовно в інших форматах, наприклад, великим шрифтом, шрифтом Брайля, або у вигляді аудіо.

Haitian French Creole:

ATANSYON: Si w pale kreyòl ayisyen, genyen sèvis pou ede w nan lang pa w ki disponib gratis pou ou. Rele nan **1-833-764-7700 (TTY 1-833-889-6446)**.

Si w gen lòt difikilte pou li oswa pou konprann enfòmasyon sa yo oswa nenpòt lòt enfòmasyon ki soti nan AmeriHealth Caritas Ohio, tanpri rele ekip sèvis pou manm yo nan **1-833-764-7700 (TTY 1-833-889-6446)** pou jwenn èd san sa pa koute w anyen. Nou ka esplike enfòmasyon sa yo ann anglè oswa nan lang manman w. Ou ka jwenn enfòmasyon sa yo nan lòt lang san sa pa koute w anyen. Epitou, ou ka jwenn enfòmasyon sa yo gratis nan lòt fòm, tankou gwo karaktè, karaktè bray oswa fòm a odyo.

Nepali/Nepalese (Nepal):

ध्यान दिनुहोस्: यदि तपाईं नेपाली भाषा बोल्नुहुन्छ भने तपाईंका निम्ति भाषासम्बन्धी सहयोग सेवाहरू नि:शुल्क रूपमा उपलब्ध हुन्छन् ।
1-833-764-7700 (TTY 1-833-889-6446) मा फोन गर्नुहोस् ।

यदि तपाईंलाई यो वा AmeriHealth Caritas Ohio को अन्य कुनै पनि जानकारी पढ्न वा बुझ्न कुनै पनि समस्या हुन्छ भने कृपया तपाईंलाई कुनै पनि शुल्क नलाग्ने गरी मद्दतका लागि सदस्य सेवालार्थ **1-833-764-7700 (TTY 1-833-889-6446)** मा सम्पर्क गर्नुहोस् । हामीले यस जानकारीलाई अंग्रेजी वा तपाईंको प्राथमिक भाषामा वर्णन गर्न सक्छौं । जानकारी अन्य भाषाहरूमा नि:शुल्क उपलब्ध हुन्छ । तपाईंले यो जानकारी अन्य स्वरूपहरूमा नि:शुल्क पनि प्राप्त गर्न सक्नुहुन्छ, जस्तै कि ठूलो छपा, ब्रेल वा अडियो ।

Arabic:

تنبيه: إذا كنت تتحدث العربية، تتوفر خدمات المساعدة اللغوية لك مجاناً.
اتصل بالرقم **1-833-764-7700 (TTY 1-833-889-6446)**.
إذا كانت لديك أي مشكلة في قراءة أو فهم هذه المعلومات أو أي معلومات أخرى عن AmeriHealth Caritas Ohio فيرجى الاتصال بخدمات الأعضاء على الرقم **1-833-764-7700 (TTY 1-833-889-6446)** للحصول على المساعدة بدون أي تكلفة عليك. يمكننا شرح هذه المعلومات باللغة الإنجليزية أو بلغتك الرئيسية. المعلومات باللغات الأخرى بدون أي تكلفة عليك. كما يمكنك الحصول على هذه المعلومات مجاناً بصيغ أخرى مثل مطبوعة كبيرة، أو بطريقة برايل أو بصيغة صوتية.



Russian:

ВНИМАНИЕ: если вы говорите по-русски, в вашем распоряжении бесплатные услуги переводчика. Позвоните по тел. **1-833-764-7700 (TTY 1-833-889-6446)**.

Если у вас возникли проблемы с чтением или пониманием этой или любой иной информации об AmeriHealth Caritas Ohio, вы можете бесплатно обратиться за помощью в отдел обслуживания участников по тел. **1-833-764-7700 (TTY 1-833-889-6446)**.

Мы объясним вам эту информацию либо по-английски, либо на вашем родном языке. Информация на других языках предоставляется вам бесплатно. Также данную информацию можно бесплатно получить в других форматах, например, крупным шрифтом, шрифтом Брайля или в аудиоформате.

Somali:

FIIRO GAAR AH: Haddii aad ku hadasho af-Soomaali, adeegyada caawimaada luqadda oo bilaash ah, ayaa diyaar kuu ah. Wac **1-833-764-7700 (TTY 1-833-889-6446)**.

Haddii aad wax dhibaato ah ku qabto akhrinta ama fahmitaanka tan ama macluumaadka kale ee AmeriHealth Caritas Ohio, fadlan kala xiriir Adeegyada Xubinta **1-833-764-7700 (TTY 1-833-889-6446)** si aad u hesho caawimaad aan wax kharash ah kugu fadhiiyin. Waxaan ku sharxi karnaa macluumaadkan Af-Ingiriis ama afkaaga hooyo. Macluumaadka luqadaha kale ku qoran wax kharash ah kuguma fadhiiyaan. Waxad sidoo kale macluumaadkan ku heli kartaa qaabab kale oo bilaash ah, sida far waaweyn, farta indhoolaha, ama maqal.

French:

ATTENTION : Si vous parlez français, des services d'aide linguistique sont mis à votre disposition gratuitement. Appelez-nous au **1-833-764-7700 (TTY 1-833-889-6446)**.

Si vous avez du mal à lire ou que vous ne compreniez pas ce message ou d'autres informations fournies par AmeriHealth Caritas Ohio, veuillez contacter l'équipe de service aux adhérents au **1-833-764-7700 (TTY 1-833-889-6446)** pour recevoir une aide gratuitement. Nous vous expliquerons ces informations en anglais ou dans votre langue maternelle. Vous pouvez recevoir ces informations gratuitement dans d'autres langues. Vous pouvez également obtenir ces informations gratuitement dans d'autres formats, notamment en gros caractères, en braille ou sur format audio.

Kinyarwanda (Burundi):

MENYA NEZA: Nimba uvuga Ikirundi (Burundi), ama seruvise afasha mu vy'indimi, atangwa ku buntu, arahari ku bwanyu. Hamagara kuri **1-833-764-7700 (TTY 1-833-889-6446)**.

Nimba hariho ingorane iyo ariyo yose ituma utoroherwa gusoma canke gutahura ibi canke amakuru ayo ariyo yose ya AmeriHealth Caritas Ohio, usabwe kwitura Member Services (Igisata Citaho Abanywanyi) uciye kuri numero **1-833-764-7700 (TTY 1-833-889-6446)** kugira uronke ubufasha ku buntu. Turashobora kugusigurira aya makuru mu Congereza canke mu rurimi rwawe kavukire. Ayo makuru atanzwe mu zindi ndimi nta mahera uyatangira. Urashobora kandi kuronka aya makuru ku buntu mu bundi buryo, nko mu nyandiko nini, mu nyandiko zikoreshwa n'impumyi, canke mu buryo bw'amajwi.

Swahili:

TAHADHARI: Ikiwa unazungumza Kiswahili, utapokea huduma za usaidizi wa lugha, bila malipo. Piga simu kupitia **1-833-764-7700 (TTY 1-833-889-6446)**.

Ikiwa una tatizo lolote la kusoma au kuelewa taarifa hii au nyingine yoyote ya AmeriHealth Caritas Ohio, tafadhali wasiliana na Huduma za Wanachama kupitia **1-833-764-7700 (TTY 1-833-889-6446)** ili upate msaada bila gharama yoyote. Tunaweza kukueleza habari hii kwa Kiingereza au katika lugha yako ya msingi. Taarifa katika lugha zingine haitakuwa na gharama kwako. Pia unaweza kupata taarifa hii bila malipo katika miundo mingine kama vile, maandishi makubwa, breli, au sauti.

Uzbek (Uzbekistan):

DIQQAT: Agar siz o'zbek tilini bilsangiz, til bo'yicha yordam xizmati siz uchun bepul. **1-833-764-7700 (TTY 1-833-889-6446)** raqamiga qo'ng'iroq qiling.

Agar sizda ushbu ma'lumotni yoki boshqa AmeriHealth Caritas Ohio ma'lumotlarini o'qish yoki tushunishda muammo bo'lsa, iltimos, bepul yordam olish uchun **1-833-764-7700 (TTY 1-833-889-6446)** raqami orqali Xizmat ko'rsatish bo'limi bilan bog'laning. Biz bu ma'lumotni ingliz tilida yoki ona tilingizda tushuntirishimiz mumkin. Mazkur ma'lumotlar boshqa tillarda ham siz uchun bepul taqdim etiladi. Shuningdek, siz ushbu ma'lumotni katta hajmda, brayl alifbosida yoki audio kabi boshqa formatlarda bepul olishingiz mumkin.



Pashtu (Afghanistan):

توجه: که تاسی په پښتو ژبه غږېږئ، د ژبې د مرستې وړیا خدمتونه ستاسې لپاره موجود دي. دې **1-833-764-7700 (TTY 1-833-889-6446)** شمېرې ته زنگ ووهئ.

که تاسې د دې معلوماتو یا هم د AmeriHealth Caritas Ohio د نورو معلوماتو لوستلو یا پوهېدلو کې مشکل لرئ، مهرباني وکړئ په وړیا ډول د مرستې لپاره د غږو خدمتونو سره په **1-833-764-7700 (TTY 1-833-889-6446)** شمېره اړیکه ونیسئ. مور کولی شو په انگلېسي ژبه کې یې ستاسې لومړنۍ ژبه کې دا معلومات تاسې ته تشریح کړو. په نورو ژبو کې معلومات تاسې ته د کوم لګښت پرته درکول کېږي. همدارنګه تاسې کولی شئ په وړیا ډول دا معلومات په نورو بڼو او فارمېټونو کې هم ترلاسه کړئ، لکه غټ چاپ، برېل، یا غږیز.

Turkish:

DİKKAT: Türkçe konuşuyorsanız, sizin için ücretsiz dil yardım hizmetleri mevcuttur. **1-833-764-7700 (TTY 1-833-889-6446)** numaralı telefonu arayın.

Bu notu veya başka herhangi bir AmeriHealth Caritas Ohio bilgi notunu okumada veya anlamada sorun yaşıyorsanız lütfen ücretsiz yardım için **1-833-764-7700 (TTY 1-833-889-6446)** no lu telefondan Üyelik Hizmetleri ile iletişime geçin. Bu bilgileri size İngilizce veya ana dilinizde açıklayabiliriz. Diğer dillerde size verilecek bilgiler için ücret talep edilmez. Bu bilgileri, büyük baskı, Braille alfabesi veya audio gibi diğer formatlarda da ücretsiz olarak alabilirsiniz.

Dari (Afghanistan):

توجه: اگر به لسان افغانی گپ میزنید، خدمات مساعدت لسانی به صورت رایگان به شما ارایه میشود. با نمبر **1-833-764-7700 (TTY 1-833-889-6446)** به تماس شوید.

اگر در خواندن یا درک این مطلب یا کدام معلومات سائری از AmeriHealth Caritas Ohio مشکل دارید، لطفاً برای دریافت کمک رایگان با خدمات اعضا به نمبر **1-833-764-7700 (TTY 1-833-889-6446)** به تماس شوید. ما میتوانیم این معلومات را به لسان انگلیسی یا به لسان اصلی شما توضیح دهیم. معلومات به لسان های سائر به صورت رایگان به شما ارایه میشود. همچنان میتوانید این معلومات را به صورت رایگان در فارمت های سائر مانند چاپ بزرگ، خط بریلی یا صوتی دریافت کنید.

Vietnamese:

CHÚ Ý: Nếu quý vị nói Tiếng Việt, chúng tôi có sẵn dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho quý vị. Hãy gọi **1-833-764-7700 (TTY 1-833-889-6446)**.

Nếu quý vị gặp khó khăn trong quá trình đọc hoặc hiểu thông tin này hoặc bất kỳ thông tin nào khác của AmeriHealth Caritas Ohio, vui lòng liên hệ Ban Dịch Vụ Khách Hàng theo số **1-833-764-7700 (TTY 1-833-889-6446)** để được hỗ trợ miễn phí. Chúng tôi có thể giải thích thông tin này bằng Tiếng Anh hoặc bằng ngôn ngữ mẹ đẻ của quý vị. Thông tin ở ngôn ngữ khác được cung cấp miễn phí cho quý vị. Quý vị cũng có thể nhận thông tin này miễn phí ở các định dạng khác, chẳng hạn như định dạng chữ in khổ lớn, chữ nổi hoặc âm thanh.