



PO Box 12000 | Syracuse, NY 13218  
medanswering.com

**To: All Ambulette Transportation Providers**  
**From: MAS on behalf of NYSDOH Bureau of Medicaid Transportation**  
**Subject: Ambulette Discharge Preferred Provider Opportunity**  
**Date: April 25, 2019**

The New York State Department of Health (DOH) is pleased to offer an Ambulette Preferred Provider Opportunity (PPO) for trips being arranged for eligible NYS Medicaid enrollees from New York-Presbyterian Queens located at 5645 Main St, Flushing, NY 11435.

The PPO includes providing non-emergency Ambulette transportation for Medicaid enrollees' discharge trips.

There will be one transportation provider (TP) selected to fulfill the responsibilities associated with this PPO. The selected TP will receive a flat rate per enrollee for each trip leg the enrollee is transported. The PPO rate is inclusive of all services associated with the defined modality in accordance with DOH Policy.

The selected TP must be an approved NYS Medicaid Transportation Provider and comply at all times with New York State's rules and regulations.

Interested TPs must complete and submit the attached proposal by the required due date.

A three-month trip sample is provided for your review, however, please understand this data does not guarantee future trip volume.



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**AMBULETTE PREFERRED PROVIDER OPPORTUNITY**  
*for*  
**NEW YORK-PRESBYTERIAN QUEENS DISCHARGES**  
*from*  
**5645 MAIN ST, FLUSHING, NY 11435**

**PROPOSAL**

*All proposals must be completed, signed, scanned and emailed to: [ppo@medanswering.com](mailto:ppo@medanswering.com) by 4 PM on 5/9/2019.*

**Transportation Company Name:** \_\_\_\_\_

**Owner/General Manager:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Provider ID:** \_\_\_\_\_

**SECTION 1: Proposed Flat Rate Charge Per Person/Per Trip Leg**

Flat rate: \_\_\_\_\_

**SECTION 2: Required Information**

1. Do you have a Medicaid Compliance Program as required by NYS Office of Medicaid Inspector General?

Yes \_\_\_\_\_ No \_\_\_\_\_

2. Are all vehicles used by your company for transporting Medicaid enrollees properly owned/leased, registered and insured as Ambulette vehicles according to NYSDOH Policy?

Yes \_\_\_\_\_ No \_\_\_\_\_

3. How many vehicles properly owned/leased, registered and insured as Ambulette vehicles in your fleet are available for transporting Medicaid enrollees?

Number of Vehicles: \_\_\_\_\_



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**SECTION 3: PPO Requirements**

1. Assigned trips may not be refused.
2. Assigned trips may not be reassigned.
3. The Transportation Provider (TP) will be available 24 hours/day, 7 days/week, 365 days/year.
4. TP must accept all trips assignments electronically via the MAS Medicaid Transportation Management System (MAS System). There will be no calls or faxes from MAS.
5. For all scheduled trips, the TP must be on time for pick-ups (within 15 minutes of the scheduled time).
6. All immediate trip requests must be picked up within 60-90 minutes of the MAS trip assignment.
7. TP leadership must attend all pre and post meetings and/or conference calls with DOH, MAS and New York-Presbyterian Queens.
8. In order to meet the high-quality expectations of the DOH and New York-Presbyterian Queens, the TP will commit to honoring agreements between these two entities to ensure exceptional results. Such agreements may include, but not be limited to, on-time performance, proper dress code, company identification, employee ID, pick up locations, adhering to protocols, quick and easy mutual access to organizational leadership in order to address real-time problem solving and long-term planning.
9. Additional guidelines as agreed to by New York-Presbyterian Queens and the transportation provider.

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**PRINT NAME**

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**SIGNATURE**

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**DATE**