Facilitator Guide
Training

Medical Transportation Management, Inc.

MTM

Instructor Note:
Welcome class as they enter the room and greet each person as they enter. Provide direction to seating. Ensure that accompanying document is on display via projector.

Say: Hello and welcome! We're glad to have you here today to begin your training! Let's get a few housekeeping items out of the way before we begin. First, please print your first name on the name card tents on your table - it will take us a while to learn everyone's name - and this will help!

Say: Restrooms are located (insert). Feel free to use the facilities as you need to, however, we will be taking frequent breaks throughout the day, including lunch about mid-way through our day.

Say: Please note there are drinks/coffee/snacks located (insert).

Say: I'd like everyone to take this opportunity to place your mobile phones on silent – as we have LOTS of information to cover in the short time we're together! Thanks for doing that!

Say: Today's agenda is full, and you can see where the remainder of the day will take us. We've gotten housekeeping out of the way and after we do a quick icebreaker, we'll get into the core of our day – which includes talking about your role at MTM.

Say: Ok, let's complete a quick activity to get to know each other a little better before we dive into the day!
Instructor Notes:
Complete Icebreaker Activity (no more than 15 minutes)
Keep participants in their seats – do Round 1 first – going to each person and asking them to complete the sentence on the slide before moving to the next person. After all 3 rounds have been completed, bring the class back together.

Say: That was a fun way to get started, right?

Say: Ok, let's get to our next topic. We want to provide some information about MTM as a company. We're going to watch a short video that shows what MTM does each and every day.

You'll gain a better understanding of the company you've joined and what an impact we have on non-emergency medical transportation.

Instructor Note:

Show PR video – MTM Site – Media < Videos < MTM Corporate Video

Say: Did you notice near the end of the video that the words said, "Even the best medical plan isn't helpful if you can't get there?" We think this is a powerful illustration of what we do at MTM – if our Members can't get to appointments – their coverage is meaningless.

Voiceover

You're here because you've made the decision to join a company dedicated to providing non-emergency medical transportation and keeping the health of our Members as our top priority. Since our founding in 1995, our clients and our general desire to make sure that our passengers get to their appointments safely and on time have been foremost in our mission as a company. MTM currently manages over 40 programs in 28 states. We complete about 3.0 million Member interactions annually through our Customer Service Centers, in Missouri, Virginia, Kansas, Minnesota, Houston, and Washington D.C.

MTM schedules more than 7 million trips each year, serving more than 3.0 million Medicaid and Medicare beneficiaries for Managed Care Organizations (MCOs) and state and county governments.

Now we'll learn how MTM is organized – with a good understanding of how we're structured; you'll be able to get assistance sooner and from the right place!

MTM carries out its best practices through eight core departments

- Network Management (NM)
- Customer Service Center (CSC)
- Quality Management (QM)
- Accounting and Finance
- Utilization/Care Management (UCM)
- Business Solutions Group (BSG)
- Technical Infrastructure (TI)
- Client Services (CS)

Network Management (NM)

MTM's Network Management identifies, recruits, and contracts with transportation providers in the service area for a high-quality transportation network capable of sustaining our client's needs; this includes public transit, sedan, wheelchair equipped vehicles, and stretcher van. MTM has a proven methodology for identifying, recruiting and contracting qualified transportation providers. We build diverse transportation networks across our service area. This includes sub-contracts with over 550 transportation providers. Our standards for high quality service set the lead in the industry. Likewise, many of our innovative processes have become the industry standard.

Once a network is in place, our experienced Network Management staff monitors the network for adequate coverage of vehicles and modes (sedan, wheelchair lift, etc.). The department also monitors all required documentation such as licensure, background checks, certifications, insurance requirements, and vehicle inspections to ensure these remain current. Working in this department requires excellent organizational skills, the ability to work successfully with culturally diverse transportation provider companies, and meet tight deadlines.

Customer Service Center (CSC)

MTM currently has customer service centers located in the District of Columbia, Minnesota, Virginia, Texas, and Missouri. Corporate headquarters are located in Lake St. Louis, Missouri and provide 24-hour customer service center operations.

The customer service center is the voice of the organization. As the Member's primary contact, the Customer Service Representative projects the company's image and plays a critical role in helping MTM maintain contracts as well as win additional business. This is successfully accomplished by handling inbound calls within specific timeframes that exceed service level requirements, responding to callers quickly and accurately to promote first call resolution, and through addressing the needs of the callers in a professional manner.

Quality Management (QM)

MTM's Quality Management organization oversees and monitors all aspects of MTM's operations across all departments to ensure our clients receive the highest quality of service achievable. The department's activities consist of the following functions: complaint/grievance management, monitoring and reporting of quality outcomes, auditing and trip verification, fraud and abuse investigation and customer service. Working in this department requires the ability to find and document facts, exercise patience and sensitivity, and a keen sense of attention to detail.

Accounting and Finance

Accounting and Finance manages all financial aspects of MTM's transportation program and consists of the following: Accounting and Finance, Trip Reconciliation, and Bus/Reimbursement. This organization works to ensure efficient payment of transportation providers and only for services rendered, working directly with the transportation provider to ensure accurate and timely completion of trip reconciliation. Additionally, Finance and Accounting mails processes and accounts for all bus tokens and passes mailed to Members or facilities.

Utilization/Care Management (UCM)

MTM designed the transportation management industry's first Utilization/Care Management (UCM) Department. This department gives case managers a single point of contact when scheduling NET/NEMT transportation. This department is also sometimes called Care Management. We staff this department with specially trained Care Management Coordinators supervised by clinical nurses. The Care Management Coordinators work one-on-one with health-plan care managers, social workers, and facility staff booking critical trips for their Members. Care Management Coordinators coordinate trips such as dialysis, chemotherapy, high-risk obstetrical care, behavioral health services, transplants, hospital discharges, and other specialized trips. The

Care Management Coordinators may also coordinate meals and lodging as a Member's needs or circumstances dictate. Working in this department requires compassion, organization and a commitment to getting the job done, which may require creativity and patience.

Business Solutions Group (BSG)

MTM has a highly-trained technology department responsible for MTM's NET Management System, including the identification and delivery of business information and business system solutions, including, but not limited, to management reports, data and information analysis, and business process improvement. This department is responsible for the IT and information services requested by our clients, transportation providers and other partners/subcontractors. Business Solutions performs all database management functions including coordination of production data processing and reporting for clients and MTM staff, Electronic Data Interchange (EDI), system enhancements, data analysis, and HIPAA compliance related to data transmission. Working in this department requires meticulous attention to detail and may require certification in a particular field.

Technical Infrastructure (TI)

MTM's Technical Infrastructure (TI) is responsible for the technology infrastructure and operations support of the MTM business operations including IT service desk, network (LAN & WAN) administration, system health monitoring, telephony system management, system/business continuity, and information security/privacy. The department serves internal and external clients to ensure all systems function optimally. Having a dependable technology infrastructure such as MTM's is no accident, but requires strategic planning and a dedicated staff to support it, along with a commitment to implementing qualified improvements. MTM invests in the company's technological infrastructure to ensure our clients receive the best service possible.

Client Services (CS)

The hallmark of MTM's business is our exceptional Client Services organization. Client Services works in collaboration with all MTM internal partners strives to ensure MTM is fully compliant with all requirements governing the transportation benefit. Client Services staff stays apprised of state Medicaid requirements. This organization's primary responsibility is the management of the program, which includes being a ready resource to our clients and making changes to staffing, processes, and procedures when necessary to meet contract requirements and client expectations.

Say: That was a lot of information to give you at one time. How about a breather? Let's take a 10-minute break and be back in our seats at *[insert time]* and ready to start again!

Say: Welcome back! Just to give you an idea of how the rest of our day looks – we're going to focus on your role as a CSR now – and we'll talk about the importance of what you do and how YOU impact our business. MTM includes a group of CSRs that work hard, but also know how to have fun. We recognize that our CSRs are the heart of our business and we want you to be successful and enjoy the time you spend here. Let's get started on making you confident and ready to tackle your new job here!

We have a short video that gives you a good idea of what it's really like to work at MTM as a CSR. Let's take a look.

Instructor Notes < MTM Site < Media < Videos < Sizzle Reel HD

Say: Well, what did you think? Can you see yourself fitting in here? Now we'll talk more about your actual role as a CSR, so you can get a better feeling for what your everyday work will consist of.

Voiceover

What is MY ROLE as a CSR at MTM?

CSRs answer each and every call with the objective of providing the best possible service and on the first ring. A typical call might include scheduling a ride, canceling a ride, or changing specifics to a previously arranged ride. A CSR serves as the face of MTM to our Members.

The ability to react appropriately to customer requests and needs is crucial. The need to acquire and maintain in-depth knowledge of, and adhere to, established CSC Protocols and Procedures is necessary. In order to be successful in this role, you **must** demonstrate sincere personal commitment to promptness, reliability, and quality of work. The MTM CSR role is critical to the entire business.

Your role as a CSR is at the core of our business model. The what, when, where, and how of what we do is placed in your hands each and every day and our success depends on it.

WHAT do we do?

We arrange rides for Members of health plans and state run programs by the most appropriate means, including; mileage reimbursement, public transportation, sedan, taxi, multi-passenger van, para-lift, non-emergency stretcher, and non-emergency ambulance.

WHEN do we arrange rides?

Rides are arranged after the appointment has been scheduled by the Member and in accordance to their plan's specific days of advance notice. The urgent nature of the appointment along with the number of times the Member has been educated on the days notice could determine whether the Member is asked to reschedule their appointment.

WHERE do we arrange rides?

We arrange rides for clients throughout the United States and within their programs specific distance limits to medical, and if offered by the plan; non-medical appointments.

HOW is transportation arranged?

All appointments are arranged through call intake and screening and entered into a system called the NET Management System or AS400. Each "trip request" is arranged using the most appropriate means of transportation and faxed via the NET Management System.

WHY do we do what we do?

MTM strives to be the very best non-emergency medical transportation company out of care for our clients and our general desire to make sure that our passengers get to their appointments safely and on time. Our Member's health is our top priority.

Modes of Transport

Voiceover

How do our Members GET to appointments? We always want to ensure that our Members utilize the most cost-efficient and best transportation for their needs and their healthplan. Most Members are considered ambulatory.

- Members who are considered ambulatory are defined as "any person being able to ambulate or having the ability to walk on his or her own without the need for a wheelchair lift."

Members who are considered ambulatory should always be offered either mileage reimbursement or public transportation as the recommended mode of transport. Sometimes, a cab is the only option available, and in those situations, MTM will provide transportation in a cab:

- Mileage Reimbursement is not an option due to no car, friend or relative able to transport, or health plan does not offer.
- Public Transportation is not an option due to no bus in the area, doctor's LON confirmed Member is not able to take the bus, or the health plan does not enforce.

Public Transportation is defined as "any transportation offered via public bus, light rail, or ADA regulated curb-to-curb service and is area specific."

MTM utilizes public transportation in areas where applicable. We have a Bus Department dedicated to processing and sending out bus passes. Our bus passes can be sent via regular mail or STAT Courier in certain areas. We also have Public Transportation Specialists who are available to assist the Member with any additional bus information that they may need. If it is the Member's first time riding the bus, the Public Transportation Specialists are available to educate them with the location of their bus stop, times, etc.

Mileage reimbursement allows us to provide Members a dollar amount per mile for the roundtrip to the provider's location and back. Although plans vary, our Texas plans require a trip log be filled out. We'll talk more about trip logs as we progress through our training.

Now we'll start to get into the industry basics that you'll need to be familiar with in order to be successful as a CSR.

Instructor Note < MTM Site < CSR 101 < Specialist List

There are several new terms you're going to learn. We're going to do an activity now that will help define some of these terms. Let's take a look at the Terms on our site. I'd like you to join your groups from earlier and we're going to do an activity to learn some of these.

Each group should choose 5 terms or acronyms from the list here [instructor should choose alphabetical limits for each group – depending on number of groups – Only Children (A-D); Oldest Children (E-L) etc;] that are NEW/INTERESTING to you and your group. You'll have 15 minutes to

select and discuss those 5 items and a spokesperson for your group should be prepared to share those 5 terms along with their definition to the class.

Instructor Note:
Give the class 15 minutes to choose their terms and spokesperson. Begin with Only Children and ask that each group share their chosen terms and definitions with the class.

Say: How many of you learned new terms that you had never heard before today? GOOD!

Voiceover
Striving to be the best, means that we place a heavy emphasis on providing good service. How many of you have ever been to Starbucks?

The people who work in a place like Starbucks almost always demonstrate great "hard skills."

Hard skills are technical or administrative activities related to an organization's core business. These skills are typically easy to observe, quantify and measure. They're also easy to train, because most of the time the skill sets are brand new to the learner and no unlearning is involved. Making a latte successfully is a hard skill.

By contrast, "soft skills" are typically hard to observe, quantify and measure. What comes WITH your latte? Is it a smile? Small talk? **Soft skills** define how people relate to each other: communicating, listening, engaging in dialogue, giving feedback – INTERACTION, at its core. Soft skills are those things that define the experience the participants walk away with a memory of.

Soft skills complement hard skills. Soft skills can also be an important part of the success of an organization. Organizations, particularly those frequently dealing with customers directly, are generally more prosperous if they train their staff to use these skills. Soft skills, while harder to measure, are crucial to your role here. Take a look at the list on display here. All of these are considered soft skills.

Say: Think about an experience you've had as a customer or client – personal OR professional – that was memorable for the wrong reasons.

Say: Do you find that the bad experiences you are thinking about were a result of the person you dealt with NOT using a skill from this list?

Instructor Note:
Pause for feedback and solicit answers from learners.

Say: Notice there are things that seem simple on the list – "Listening" – but can have a profound impact on an experience. Ever had to repeat an order or a request – MORE than once? Do you find it makes for a poor customer experience?

Say: Who's willing to share a story with us?

Instructor Note:
Ask someone to share a bad experience.

Say: Was it easier to remember a poor experience than a great one? Do you see how what seem like very common sense skills are of the utmost importance to what you'll do as a CSR?

Instructor Note – MTM Site < Media < Videos < Bad Customer Service
Obviously, this is an example of a horrible customer experience, but it is an interesting illustration of what NOT to do! Over the next few days, we're going to talk about the various soft skills that you'll need to master in order to be successful on calls with YOUR Members!

Say: Let's break for lunch and then we'll come back and dive back into this afternoon's materials! We'll be listening to some calls after lunch and talking more about soft skills then covering some general industry information. Please be back in your seats and ready to go in 45 minutes. Thanks for a great morning session!

Say: Welcome back! To continue making the connection between our goal to provide outstanding service and the power you have to do that, we're going to talk more about call quality. The difference between simply doing your job and providing a service to our customers requires soft skills.

Say: For our next activity we're going to listen to some calls from the other CSCs. You'll find that you're going to hear a mix of calls - some good, some challenging - but listen to all of the calls and put yourself in the shoes of the Member. Think about the soft skills we talked about right before lunch. What do the Members take away from these calls?

Instructor Note:

Play audio clips (MTM Site < Calls < Average Joe, Checklist, Hold Before Inf) and stop after each call for discussion. After each of the calls - stop and talk about the questions on this slide.

On that call:

1. Did you hear a smile from the CSR?
2. Did you think the CSR treated the Member with respect?
3. If you were the Member on this call, would you have felt like you received good service?

Instructor Note:

After discussion of the final call - proceed with remainder of materials.

Say: The soft skills we just talked about are a topic we'll continue to revisit throughout training. It is important for us to not only meet our procedures/policies and protocols, but also to ensure we spend time on soft skills simultaneously. This is a good time for a short break. Let's take 10 minutes and be back in your seats ready to finish out the day!

Voiceover

There are 3 types of medical coverage that Members utilize for our services.

Medicaid is a health insurance program available only to certain low-income individuals and families who fit into an eligibility group that is recognized by federal and state law. Medicaid does not pay money to the individual; instead, it sends payments directly to the health care providers. Depending on the state's rules, individuals may also be asked to pay a small part of the cost (co-payment) for some medical services.

Medicaid is a state administered program and each state sets its own guidelines regarding eligibility and services.

Many groups of people are covered by Medicaid. However, within these groups certain requirements must be met. These may include age, whether an individual is pregnant, disabled, blind, or aged; income and resources (like bank accounts, real property, or other items that can be sold for cash); and whether the individual is a U.S. citizen or a lawfully admitted immigrant. The rules for counting income and resources vary from state to state and from group to group. There are special rules for those who live in nursing homes and for disabled children living at home.

Medicare is a health insurance program for:

- People age 65 or older or under 65 with certain disabilities
- People of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant).

Medicare has:

Part A Hospital Insurance - Most people don't pay a premium for Part A because they or a spouse already paid for it through their payroll taxes while working. Medicare Part A (Hospital Insurance) helps cover inpatient care in hospitals, including critical access hospitals, and skilled nursing facilities (not custodial or long-term care). It also helps cover hospice care and some home health care. Beneficiaries must meet certain conditions to get these benefits.

Part B Medical Insurance - Most people pay a monthly premium for Part B. Medicare Part B (Medical Insurance) helps cover doctors' services and outpatient care. It also covers some other medical services that Part A doesn't cover, such as some of the services of physical and occupational therapists, and some home health care. Part B helps pay for these covered services and supplies when they are medically necessary.

MC+ Managed Care is a health care delivery program serving certain MC+ recipients that meet specified eligibility criteria. The goal is to improve the access and quality of health care services for Medicaid and state aid eligible populations, while reducing the costs of providing that care. The intention is to achieve this goal by enrolling eligible MC+ recipients in MC+ managed care health plans that contract with the state to provide a specified scope of benefits to each enrolled recipient in return for payment made on a per Member per month basis.

The MC+ managed care health plan is required to provide most of the basic benefits as identified by the state plan for adults and all medically necessary services for children under the age of 21. Other services previously not covered under Medicaid/MC+ may be provided to recipients if the MC+ managed care health plan determines it is a suitable, appropriate, and a cost-effective approach to providing a covered service.

Say: We're going to continue to work on learning industry information that you'll be exposed to. Now that we've learned about coverage, let's do an exercise that helps you learn about specialists.

Instructor Note < MTM Site < CSR 101 < Specialist List

Say: On our site, you'll find a list of types of specialists - these are physicians who have expertise in a specific area of medicine. Go ahead and take a look at these, take about 5 minutes to do so.

Say: Now we're going to do a quick quiz! Don't worry, this isn't part of your final assessment! This is just an easy way to test what you learned in your reading. Once everyone has finished, we'll move on!

Instructor Notes: < MTM Site < CSR 101 < Medical Specialty Quiz

Say: Did everyone know most of the answers prior to today's activity? We're going to tackle two more topics today. The first is eligibility.

Voiceover

Not every Member who calls in will be eligible for the trip he is requesting. You'll rely on the Net Management (AS400) system to display eligibility for you.

If a Member is Eligible for transportation benefits their file will appear as you see here. The CSR will be able to proceed with assisting the Member and setting his transportation.

Eligibility is determined by plan and sometimes a Member exceeds his trip limits. If that happens, or a Member is Not Eligible for another reason, the display will look like you see here.

If a Member is showing “not eligible” then the CSR must refer back to the protocol for that specific plan. The Member will either be referred back to their health plan or transferred to our CSCOT Team for assistance.

Eligibility is determined early in your call and you’ll always be able to determine whether or not a Member is eligible prior to moving forward in your workflow. We’ll be continuing to talk about Eligibility as we move through training.

Voiceover

Our final topic for today is Trip Remarks. Trip Remarks are crucial for documenting the outcome of a Member’s trip request. These remarks not only help keep an accurate history of the Member’s requests, but also help the next CSR speaking to the Member see what has occurred in the Member’s history. Let’s look at the Trip Remarks document in your reference guide.

Trip Remarks could document things like compliments for CSRs or transportation providers, complaints about service or transportation, or even alert us to fraud situations. The Trip Remarks Available for use are all on the job aid in your reference guide and you’ll use this document frequently on the job, so plan to keep it handy when you begin taking calls.

< MTM Site < CSR 101 < Trip Remarks Activity

On the site, let’s do an activity to help make you familiar with Trip Remarks. Go ahead and access the Trip Remarks activity and complete it.

Say: You’ve all done a great job today and I really appreciate your participation. Tomorrow we’re going to start looking at the NET Management (AS400) system and you’ll begin learning about how you’ll enter trips into the system while you’re interacting with Members. We’re going to get hands-on experience tomorrow, so get plenty of rest tonight!

Day 3

Say: Welcome back today! This morning we'll be getting into the basics of the NET Management or AS400 system. Ready to get started?

Workflows

Instructor Note: MTM Site < Process Flows < Houston Flows

VOICEOVER

Let's take a look at the workflows on the site. Here you can see exactly what a call looks like from start to finish. There are 5 workflows. Each is driven by the actions/results of each individual decision box.

Look at Eligibility. Here, if we follow the boxes, we see that if we reach the end of the chart, we've determined Eligibility and can proceed to the second workflow chart and continue with the Trip Set Up portion of the call.

Starting at the upper left corner at the first box – if you verify that the client is in the right place, and speaks English, and isn't deaf, hard of hearing, or speech impaired, the next step is to verify name, Medicaid ID #, address, and phone number. Once complete, Eligibility is confirmed.

At several points through the workflow, the call could end – depending on the answers to the questions provided by the Member. Note that each of the termination points include instructions for the steps the Member/CSR should take.

Once Eligibility is confirmed, we move to the Trip Set Up workflow.

On the Trip Set Up workflow, the first step is entering the trip information into the NET system. If the recipient has access to free transportation – the trip is denied and the call can be concluded. If the recipient does not have access to free transportation and is a first time caller, we educate the Member on services available. If the Member is qualified for mileage reimbursement, the mileage reimbursement workflow is utilized. If the Member is not qualified for mileage reimbursement – the CSR will determine either Public Transportation or Sedan/Wheelchair and proceed to the correct workflow.

We'll take the path for Public Trans/Bus flow first. This workflow shows a first step to confirm distance from bus stop in an effort to determine if the reimbursement for Public Transit will be via bus reimbursement or ADA reimbursement. If public transportation or ADA is not certified – the LON process is begun and the next appropriate workflow to review is the Sedan/Wheelchair.

The Sedan/Wheelchair workflow is where further determination is made about the ability of the Member to ambulate or not. If he is ambulatory or has a wheelchair that he can transfer from, the trip is set with the sedan provider. Members that have wheelchairs and cannot be transferred are set on trips with wheelchair providers. Members that have ambulance or stretcher requirements, will follow the additional workflow steps shown here.

This exercise helps illustrate how a call proceeds from start to finish and the questions/decisions that determine the next step for both the Member and the CSR.

Say: Next, we're going to explore the AS400/NET Management system. First - you're going to take a look in your reference guide at the various abbreviations you'll begin seeing as you use the system and read documentation in the system. Please take a look at the NET Management abbreviations page in your guide.

NET ABBREVIATIONS

Say: You'll find on this list that many of these are simply shortcut ways to make our notes shorter in the system. Words like "daughter" are shortened to DTR and words like "hospital" are shortened to HOSP. You'll quickly learn these abbreviations after seeing them repeatedly in your practice exercises in the AS400.

Medical terms like testing or medical abbreviations are typically already abbreviated, so we use the actual abbreviations the medical providers do – such as MRI, EKG, etc.

There are several guidelines that we follow in using the AS400 that will quickly become second nature to you. For example, looking at this slide, you can see that we:

- AVOID using punctuation in the system in the following fields:
    - Name
    - Address
- AVOID using PO Box addresses – ask for physical address or 911 address
- **Tab** will move the cursor to the next field
- **Shift and Tab together** will move the cursor to the previous field
- **+** on the number pad will clear information following the cursor on a field
- All times should be entered as military time
    - 1:00 am - 12:00 pm are entered: 0100, 0200, 0300, etc.

- 1:00 pm = 1300
- 2:00 pm = 1400
- 3:00 pm = 1500
- 4:00 pm = 1600
- 5:00 pm = 1700
- 6:00 pm = 1800
- 7:00 pm = 1900
- 8:00 pm = 2000
- 9:00 pm = 2100
- 10:00 pm = 2200
- 11:00 pm = 2300

When viewing a popup list or drop down field, press **Page Down** & **Page Up** to see additional options

- "Pop Ups" will appear on the screen when fields are left blank, incorrect data is entered in a field, or data entered in a field is outside the plan parameters. Always read the pop up, determine relevancy, make necessary corrections, and press **Enter** to exit the pop up.
- The following terms can sometimes be used interchangeably due to verbiage changes:

OLD TERM:	**CURRENT TERM:**
(Personal) Gas Reimbursement	Mileage Reimbursement
AS/400	MTM NET Management System
Vendor	Transportation Provider
Call Center	Customer Service Department
Medicaid	Medical Insurance

Say: We've covered a lot this morning! This is the perfect time for us to take a break before we continue our training. Let's be back in our seats in 10 minutes!

Say: Welcome back! Everyone should go ahead and launch the NET Management application and we're going to explore the system as a group. You'll use your user id and password from your HR orientation sheet from Monday.

Instructor note – this portion of the training will be led verbally by you – please ensure you cover all of the information listed.

- The first screen you see here is the login screen. Login using your user name and password you were provided.
- "User" field, type appropriate sign on (typically last name followed by first initial)
- "Password" field, type created password
  - On first log in, the password will be the same as the User name
  - The system will prompt you to change your password
  - The password cannot start with a number
  - The system will prompt you that a change in password is required every 45 days
  - The system will begin to prompt you daily for 2 weeks before the change is necessary
- All other fields not necessary to complete
- Press "Enter" to continue

The next screen you see is the CUSTOMER SERVICE MENU SCREEN.

- List "01" on "Option" field to sign in
- Press "Enter" to continue

Find the Training Accounts list in your reference guide and choose for this exercise, we'll use [insert] *(Connor Test = Stacy) (Mary Test = Sharon) (Candy Test = Doug)*

On the following screen, we'll begin a search for the Member calling.

On "Type selection from list" field, the last entry that is left blank "_" is where Type 1-6 will be entered according to what search criteria is being used (Name=1, Phone Number =3, Trip #=6, etc.)

- We'll choose 1 to search by Member name – and enter Connor, Test with no spacing and press "enter"

Sometimes, we're unable to find a Member in the system after attempting to locate the Member by multiple search methods. After all attempts have been made to locate the caller by name, alternate spellings of name, phone number and no match can be found, the Member must be added to the system. This is not completed CSRs – but the CSR will follow the process for adding a new Member.

Protocols are checked to determine if Members can be added by MTM or if they must be added through an upload from their plan.

If the Member must be added by the plan, the caller is politely informed that they will need to contact their health plan to verify their eligibility for transportation services.

If the Member can be added by MTM, the following information is placed in an email and sent to the Reports Specialist and Team Lead(s). Member's Medical ID #, Last Name, First Name, Middle Initial, DOB, Gender, Complete Address, Phone #(s).

The caller is informed that he will be receiving a call within the next several hours.
Either the Reports Specialist or Team Lead(s) will check eligibility by contacting the plan, checking a web site or listening to an automated eligibility line.

The Reports Specialist or Lead(s) will email a response to all stating that the file was added and is active for requests or has been made not eligible due to ineligibility.

As call volume permits, a call will be placed to the Member to inform of the eligibility status.

On the next screen, the CSR will see immediately if the Member is Eligible.

- **If ELIGIBLE,** the CSR will retrieve all necessary information to arrange the request.

- **If NOT ELIGIBLE**, the CSR will politely inform the caller that "Health Plan [insert] is currently showing you're not eligible for transportation services. I am unable to arrange transportation for you at this time. If you believe that this is an error, please contact the Health Plan."

- Confirm the account (There could be multiple accounts with the same name)
- (See far right column indicated as "PLAN")
- Verify DOB if necessary
- List "1" next to specific account
- Press "Enter" to continue

Your next step is verification.

- 4 key pieces of information must be confirmed on every file and should not be offered
- Verify the name
- Verify the address
- Verify the telephone number
- Verify the medical id or DOB (one or the other must be confirmed on every file)

Update Member Certification screen will display next.

This screen will appear upon entering the file of a plan that enforces the Level of Need Process. Close attention would need to paid to this screen to determine if a certification needs updated, has been updated recently or is pending an update.

- Cert Status-shows the status of the cert (i.e. Not Certified, Certified, Temporary Certification, Pending Certification)
- Member name-shows the name of the Member
- Xport Mode Cert-shows the current mode of certification (i.e. Walk, Public Transportation, Cab, Para-Lift, etc.)
- Description-shows a more clear description of the current level of certification
- Effective-shows the date that the certification became effective
- Expires-shows the date the certification will expire

Last updated: shows the date, time and who made the last update to the Member's certification

NOTE: This screen will not appear if the plan does not enforce the Level of Need Process.

Press "enter" to continue and we'll move into the Trip History screen next.

Over time, past requests will be archived. These requests can be viewed by pressing F8=See Old&New

A quick review of this screen can tell you a lot about what a caller is stating or questioning. You can see what transportation provider typically accommodates and also if a request has been canceled, denied, left in waiting or is scheduled.

For this exercise, we're going to schedule a NEW trip – so we'll populate the Appointment Date field – use 2/6/2012 for the date and the appointment time of 1400 on the Time field. Press F1 to add a trip.

- The Member Red Flag screen shows next.
- The Red Flag contains all important information that would be needed on each and every request
- The system will prompt the Red Flag to pop up each time a request is entered

Read the Red Flag thoroughly (page up or page down) for any information that will need to be listed on a request (directions, specific needs, gate codes, passwords, etc.)

- Transportation providers cannot view the Red Flag
- Additions to the Red Flag can be added for any information that will need to be viewed for any future requests and can be saved by pressing "enter"

- Additions can be added to the Red Flag in any request and the change will reflect on any request entered
- Follow any Red Flag instructions

We won't be making any changes to the Red Flag screen for this exercise, so press F3 and we'll continue.

The TRIP MAINTENANCE SCREEN 1 contains information about the caller and will prompt us to ask questions about the mode of transport. Let's look at each of the fields here.

- Blank fields will require an entry, with the exception of the Inst/Directions field, as this may not be needed
- The account holder's medical I.D. #, first, last and middle initial, age, DOB, Trip Number (authorization #), date of request, CSR that arranged and updated the request's sign on, the date and time the request was started are all listed at the top of the screen

- The "Caller dif?" field would be documented "SELF" if it is the account holder calling or with the name of the complete caller name if different and their contact number and relationship. Their phone number is critical if not residing in the same household. For our exercise – let's all type SELF in this field.

- The "Rel:" field is noted as "MEM" if the Member or any friend/relative is calling on their behalf. The field is noted as "FAC" if any person from a facility is calling on their behalf. No need to type anything in this field today.

- The "Would you like to use our mileage reimb. program?" field is plan specific and should be questioned if the appropriate if the account holder has a car or a friend or relative available to transport. We'll type "Y" for this exercise.

  - NOTE: If this field does not have a "Y" for yes, the mileage reimbursement option will not appear at the time of vendor shopping. See Vendor Selection

- The "Auth" field is the name of the CSR authorizing the request – type your name here.
- The "Trp Typ" field is as follows : T=To, R=Round, F=From – Today we're doing a roundtrip for our Member – please type R into this field.

- The "Appt Dte" and "Appt Tm" fields are entered by the system according to what was entered on the Trip History

- The "Ret Tm" field is the time the transportation provider should return and is used for specific appointments (dialysis) when an exact time is known. Today, we'll use 15:30 for the return time.
    - All other requests, the "WILL CALL" time of "2359" is entered

- Trip Maintenance Screen 1 also shows the pick up and destination counties if distance is a factor
- The "Pickup" field is the address of pick up is entered by the system according to the address that was in the Update Screen
    - If the caller is requesting to be picked up at a different location than what the system contains, question the following: "Is this permanent or for a temporary timeframe?"
        - The temporary change to the pick up address can be made to the specific request.
        - A permanent change to the pick up address must be made in the Update Screen
    - Typically all drop offs should be to the same location as pick up, but exceptions can be made (school, work, etc), but these sort of requests would require additional requests and are considered "multi-legs"

Today – we won't make changes to these fields – as we'll have Member picked up at the system address.

We'll need to search for the Member's provider by the telephone number. Once you've obtained that number from the Member, (we'll use 8169235800) type it in here and press F6.

- The search brought up several results by telephone number
- Page Up and Page Down will show more selections listed alphabetically
- Both names of persons and facilities could be listed

Next – type in a 1 next to the provider that is correct. We'll use Swope Health Services Center for this exercise. Press enter to continue.

Our medical provider's information was located in the Provider Search, and the information was automatically be inserted into the:

- "Destination" field because "R" for Round was entered
- "Pickup" field if the "R" for Round was entered

Any changes made to a request can be viewed by pressing, F10=SEE HIST from Trip Maintenance Screen 1 to verify or clarify what has been changed in this file and when the

change was made. NOTE: This screen will not need to be checked on every request, only when in question.

- What date and time the change was made
- What specifically was changed
- What it was changed from
- Who made the change

- Only certain criteria are allowed to be changed on a request. If any other changes are made and it is determined through the Trip History that the changes were made after the request was faxed off, the change(s) is to be considered to be done in error.
- Changes are only shown after the request is exited and re-entered.

Enter F11 to cancel this screen and we'll move into the 2nd Trip Maintenance Screen.

This is the screen where we determine what Trip Reason codes should be used. Remember, when questioning type of doctor – always ask "What type of doctor are you seeing?" - NEVER asking "WHY."

- On "Trip Reason Cd" field, type a *
- Press "Enter" to continue

- The Trip Reason Codes will consist of covered and non-covered services
  - See specific plan's list of Covered and Non-Covered Services

- Trip Reason Codes are in alphabetical and not numerical order

- Use Page Up and Page Down to see all codes - *If appropriate code is known by memory, it can be inserted manually without searching the "Select Trip Reason Code" screen*

- List the 2-digit code to match the type of service requested on the "Selection:" field. For this exercise, we'll select 35 – Cardiac Rehabilitation.

- Under the "Note" column are protocol specific criteria with instructions such as:
  - PRIOR AUTHORIZATION=Contact plan to verify this service is covered
  - These notes specify any plan parameters

If your caller has special needs, you'll use the Special Needs questions to ensure the appropriate transportation is arranged.

- Special Needs fields: “Pregnant (Y/N)”, “Require Wheelchair Lift (Y/N)”, “Require Attendant (Y/N)” and “Crutches/Walker/Cane (Y/N)” are marked “Y” for yes or “N” for no, after determination.

- If the “Pregnant (Y/N)” field is marked as yes, the expected due date should be documented on the Special Needs field.

- The “Require Wheelchair Lift (Y/N)” field should be marked “Y” for yes if determined that a transfer cannot be made from the wheelchair or “N” for no if determined that a transfer can be made from the wheelchair.
    - If determined that a lift is required, the following information should be retrieved and marked on the “Special Needs” field
        - Type of wheelchair, approximate weight of the person, and number of steps
    - If determined that a transfer can be made and it is understood that the person is not wheelchair confined, the “Special Needs” field should be marked “Can Transfer”
    - If the wheelchair being brought cannot be collapsed and put in the trunk of the vehicle, the “Require Wheelchair Lift (Y/N)” field should be marked “Y” for yes (i.e. electric, scooter, etc.)

- The “Require Attendant (Y/N)” field is marked with an “N” on all requests. The field can changed to a “Y” if requested and allowed by the plan.
    - **NOTE: ALL fields can be entered “N” for no if request is for mileage reimbursement. These fields are only necessary when MTM is transporting.**

- The “# of Car Seats Needed”, “# of Addtl Psgrs” and “# of Addtl Psgrs w/Appt” fields should be marked numerically
    - **NOTE: ALL fields can be entered “0” if request is for mileage reimbursement. These fields are only necessary when MTM is transporting.**
    - If the “# of Car Seats Needed” field is completed, both the age and weight in pounds of the child should be documented on the Special Needs field.
    - This is to ensure that the transportation provider brings the appropriate age/weight child safety seat for the child.
    - Check the specific state’s age/weight requirements for car seats to determine if a child safety seat is needed.

- If the Member requires a service animal, the CSR will document this information on the Special Needs line in the NET Management system to read, “Has a service animal.” The CSR will also document the Red Flag section of the NET Management System for future reference.

- After the Special Needs questions have been completed, document the "Special Needs" field with any directions, specific needs, gate codes, passwords, or any other information that was contained in the Red Flag needed by the transportation provider.

- We don't have any special needs for our caller today – so press F11=Update record.

Next, we'll need to locate Trip Status Code/Complete Vendor Shopping.

If the request is incomplete and requiring more information and should be left in waiting or needs denied or canceled, use the appropriate Trip Status Waiting Code. We're ready to complete our request.

- On "Trip Status" field, type a *
- Press "Enter" to continue

If the request is complete, it is ready to be F16=Vendor Shop (Shift + F4)

- Do not select a transportation provider if the request will be left in waiting, denied or canceled
- If the plan follows the Level of Need process, a dummy vendor must be assigned to a request in order to exit.
- See VENDOR SELECTION-Selecting a Dummy Vendor
- The request cannot be exited once it is started with a Trip Status Code
- Once a transportation provider has been selected for a request, the Trip Status will be completed automatically

The Trip Status Codes will consist of schedule, denial, cancel, escalate and waiting codes.

  - Trip Status Codes may be specific to plan, department and/or Customer Service Center
- Trip Status Codes are grouped in order
- Refer to your list of Trip Status Codes for a refined and grouped list - *If appropriate code is known by memory, it can be inserted manually without searching the "Trip Status Selection" screen*

- Use Page Up and Page Down to see all codes
- List a "1" next to the most appropriate selection – for our exercise – use AO – trip added – not scheduled.
- Press "Enter"

Mileage is calculated by the system at the time of "Vendor Shopping." Check plan's protocols to ensure the request is within the plan limitations for distance.

If the system has determined that the pick up and drop off addresses is less than 1 mile in distance, the caller will be asked if they can walk to/from their medical provider's office. *NOTE: This option is to be offered and a person should not be denied transportation if they oppose.*

- Our Member today is unable to walk to the appointment, so we'll press F12=Cancel to continue Vendor Shopping when the caller mentions that walking is not a possibility due to weather or health related reasons.

Our Member isn't able to take advantage of either mileage reimbursement or bus today – so we'll continue the steps to find a vendor for his trip.

Say: Let's go ahead and take a break in the materials now for lunch. Be sure you lock your terminal by pressing CTL-ALT-DEL. You've really learned a lot today already and we're halfway through our day! I'd like you to break for lunch now and take 45 minutes.

Instructor Note: Bring class back together after lunch and continue.

When on the Vendor Selection screen:

- Do not disclose one transportation provider's price with another
- Do not mention anything concerning cost to a caller
- List "5=Display" on the "Opt" field to display any notes regarding the transportation provider

This screen contains any information regarding the transportation provider

- Specific directions regarding transfers, car seats, etc.
- Sub Location
- Phone Number
- Alt Phone Number
- Fax Number
- Etc.

- The first selection (which is the closest transportation provider) is made regardless of pricing, unless the plan offers Right of Choice.
  - If the plan offers Right of Choice, it is questioned and selected regardless of price or mileage, but LON process must be followed or if there are any other specific plan rules that override the Right of Choice.

- The most appropriate transportation provider is contacted for availability before selection is made if the request is within 48 hours (excluding weekends or holidays) or the mileage is 75 miles or greater
- A transportation provider can be "preferred" as long as a selection has not been made and it does not show an increase in pricing, even if it is not the closest transportation provider.
    - At times the trip history can show that the transportation provider that is "preferred" normally transports and eliminates a turn back.
    - The F4-Trip Remarks must be documented with the reason why the closest transportation provider was not chosen.
- When finished reviewing the Vendor Information, press F12 to exit.
- Back on the Vendor Selection Screen, enter 1 next to our selection and Press "Enter" to continue.

Next, we have to document Trip Remarks, which include information such as:

- Transportation Provider's contacted and names of who declined/accepted
- Eligibility confirmations
- Documentation on why a request was canceled, denied, or left in a waiting status
- Health Plan names that give authorizations/approvals on requests outside of the parameters of the plan.

To locate the specific Trip Comment Code, while your cursor is on the 3rd hash line, press F4=Prompt

- Trip Remark (Comment) Codes may be specific to department
    - Refer to the list of Trip Remark (Comment) Codes for a refined list by department

- All Trip Remark (Comment) Codes are in order alphabetically

- Use Page Up and Page Down to see all codes

- List a "1" next to the most appropriate selection
    - If appropriate code is known by memory, it can be inserted manually without searching the "Select Comment Code" screen

- For this call, select MI for Miscellaneous Information – we'll type in a comment about the Member traveling alone, and having no special requirements and confirming eligibility.

Once Trip Maintenance Screen 1 and 2, and all other additional screens have been completed; the Trip Type, Date, Time, Pickup and Destination addresses, Trip Reason Code, any Special Needs, transportation provider, amount of miles is confirmed with the caller.

The caller is also informed to be ready 1 hour prior to their appointment time (unless the request is long distance and met approval), although the transportation provider might not show up that early if the distance is minimal. The caller is advised to call with any changes/cancellations.

Press F3=Exit

The next screen to display is to fax the trip.

- The fax will automatically appear as you F3=Exit the Trip Maintenance 1 Screen, unless the request was for mileage reimbursement or was not assigned to a transportation provider
- Let's choose F10= Send Fax

After a transportation request has been faxed or exited, you will be brought back to the Trip History Screen.

We're ready for our next call.

- To enter a new account, Press F3=Exit to exit back to the Database Lookup Screen

Say: Now that you've seen the system, we'll give you some additional information about what you've seen and how your role ties in with the system component.

Trip Types

VOICEOVER

There are different types of trips that are applicable for our Members. Those types of trips include Standard, One-Way, and Multi-Leg.
Standard trips are those trips that are standard. They are trips that transport a Member to an appointment and back to the point of origination. The majority of your trips will fit into this category.

For standard round trips, the Trip Type should be a:

"R" if the Member is going as a **ROUND** trip and is requesting transportation home and is to be set with the same transportation provider.

Sometimes, Members don't require a standard trip. In some instances, a Member needs a ride to an appointment, but not the return trip, or vice versa. These would be considered One-Way trips. Any requests put in as a one-way require a note in the F4-Trip Remarks as well as the special instructions/directions line explaining why it is a one-way.

For one-way trips, the Trip Type should be a:

"T" if the Member is going only **TO** the medical provider
"F" if the Member is going only **FROM** the medical provider

In some instances, Members require multi-leg trips. These would include trips that not only transport a Member to an appointment, but also include a pharmacy stop prior to returning home. For multi leg trips, all trip legs must be coded as **"T"** trips, except for the final leg that must be coded as an **"F"** trip.

- Any documentation is generally looked for in leg 1. All remaining legs require a note in the F4-Trip Remarks stating "See notes in leg 1". This guarantees that any trip that is entered would refer the reader to the proper trip to locate documentation.
- Documentation indicating each leg of the trip should be specified on the Special Needs field. Example: Leg 1 of 3, Leg 2 of 3, Leg 3 of 3.

For any "leg" of the trip that is home/school/work/etc, the Trip Reason Code used for the first "leg" would be used. Do not use Trip Reason Code 57-Non-Medical as this could appear that MTM is arranging transportation to non-covered services.

- This code is used on trips that are arranged to capture a denial or for accounts where non-medical services are covered. i.e. grocery store, hair salon, etc.
- Example: Psychiatric appt, Pharmacy stop, then home would be coded as follows: First Leg-**28**-Psychiatrist, Second Leg-**21**-Pharmacy, Third Leg-**28**-Psychiatrist

These designations will make more sense when we do practice exercises as we get into the AS400 today.

RTPS are another type of trip that we schedule for Members. These are utilized when Members have regular ongoing appointments with no minimum amount of days or a pattern. Once a recurring trip is entered into the system, the system will release each Friday for the following two weeks. Changes should be made to any trips that are showing in the system and for trips not yet showing as "released," should be handled by Care Management.

- ✓ Recurring trips occur when a Member has a regular ongoing appointment
- ✓ Recurring trips can only be set for trips that occur at the same appointment time and same destination
- ✓ Recurring trips can be set up for a period of 3 months, unless it's for dialysis which can be set for a period of 6 months
- ✓ Recurring trips help keep call volumes down

- ✓ Recurring trips that are verified correctly save time and money
- ✓ Recurring trips cannot be set up for plans that have trip limits
- ✓ A recurring trip can be set up to automatically produce trips in the computer

When creating a new RTP:

- ✓ Follow standard trip intake
- ✓ Document days, times, and expiration date on the special needs line
- ✓ Select "provider pending"
- ✓ Leave trip in "WR" Status
- ✓ If the trip meets urgency guidelines and is for same day/next day, transfer the caller to the CSCOT Queue 8108

We'll practice more around the RTP process as we continue our training and get into the system. Before we take our morning break, let's cover one more topic – LON – or Level of Need. Not all plans require that we perform a Level Of Need (LON) assessment. If a Health Plan enforces the Level of Need process this means the Member must be certified for each mode of transportation that they utilize. If public transportation (bus) shows as the most appropriate form of transportation, the Member must use bus unless there is a medical reason why they cannot. At this point, the CSR would start the Level of Need Process.

The Level of Need process is one way that MTM can ensure our Member's are riding with the most appropriate form of transportation while taking their medically necessary needs into consideration. As a CSR, you will gather the Member's primary care information. If required, our care management department will send a level of need form to that doctor. The doctor will then fill out the form and fax it back to us. The Care Management department will then certify the Member for whatever mode of transportation the doctor feels necessary.

Say: This is the perfect time for us to take a break before we continue our training. Let's be back in our seats in 10 minutes!

Instructor Note: Bring class back together and resume with Modes of Transport.

Say: Did you all have a good break? Let's jump right back into the materials with Modes of Transport.

Modes of Transport

Voiceover

Yesterday, we talked briefly about the different modes of transport. Depending on health plan and eligibility, the majority of our Members are ambulatory and will utilize gas mileage reimbursement or public transportation. When requesting gas mileage reimbursement (GMR), Members will report mileage using one of three methods:

1. Requests that must be called in prior to trip occurring.
2. Requests that must be called in after trip has occurred (up to 7 days).
3. Requests that must be put on a log.

CSR will follow standard trip intake marking the, "Would you like to you mileage reimbursement?" question with a "Y." You see an example of this on this screen.

Some exceptions will allow Members to take a cab, and the next screen shows how the AS400 displays such a situation. Note that the vehicle type is a "C."

We also have Members with special needs that we have the ability to address when applicable.

Para-lift or also known as wheelchair lift is defined as "any person not being able to ambulate and therefore requiring a lift van."

A Member meeting any of the following criteria would qualify for transportation via Para-lift:

- It is confirmed that Member does not meet any of the criteria for an ambulatory transport (walking, mileage reimbursement, bus or cab/sedan)
- It is confirmed that Member will be transported using a wheelchair that does not collapse and therefore cannot transfer from the wheelchair to a seat and will require a wheelchair lift

This screen shows the AS400 view of a paralift. Again, note the vehicle type in a paralift trip this is designated by a "P".

In rare instance, Ambulance and Stretchers are used on a non-emergency basis for Members that must be transported in a position lying down or that need a paramedic due to IV's, equipment, or medical observance. Any requests or cancellations of an ambulance or stretcher trip must be completed through the designated specialist, after the CSR has documented the trip. A follow-up

email is necessary to ensure that the Member's transportation request was looked into and that the call transfer was successful.

Voiceover

Choosing A Vendor

When choosing a vendor for our Members, we always base the choice first on most cost effective providers. Exceptions do occur in some situations, and would include:

- Mileage exceeds 20 miles of deadhead
- The Health Plan offers Right of Choice
- The facility has a Sole Source Provider

Preferred Provider/Right of Choice

- A Preferred Provider is when a Member prefers to ride with a certain transportation provider. If the Member's preferred provider is still the most cost effective option they may be chosen from the shopper, even if it is an increase in the mileage, provided it is no more than 20 miles away.
- Right of Choice is an option offered by a select few of our health plans. If a health plan offers "right of choice" the Member is free to choose which transportation provider they would like to ride with. It is selected without question but within reason.
- For plans that utilize "right of choice," the Member should be asked which transportation provider he prefers and this transportation provider should be selected. ***HSSC does not offer Right of Choice.***

  Note: Some health plans may have the "right of choice" option but still follow the LON process. In this case, the Members are free to choose which specific vendor they would like to ride with, but would still have to be certified for a higher mode of transportation.

  - In the event that the transportation provider is not part of MTM's network, the CSR would send the trip to the Coaches who would place the trip in "EC" (Escalate to Network Management)
  - The MTM Network Management Department will make every possible attempt to arrange the ride with the requested transportation provider.

MTM utilizes Independent Contractors as part of our network of Transportation Providers.

The CIC is a department within MTM that works with Independent Contractors which are just like our Transportation Providers.

An Independent Contractor or IC is similar to MTM's traditional Transportation Providers. They are an individual using their own vehicle to provide transportation for our Members.

- They are credentialed the same as a Transportation Provider.
- They transport our Member safely to and from their medical appointments.
- They keep in contact with the CIC staff on a normal basis.

The CIC team works closely with our IC drivers to help lower cost of transportation. We select the trips and create their schedules in a cost effective manner. The CIC team schedules them like a dispatcher would for their own drivers.

Look at the screen here, note how the transportation provider **JT Nixon & Associates** is preceded by the letters IC. (IC) is how we identify an IC in the shopper.

What would determine if an IC was a good choice for your Member?

Since the goal of the IC program is cost savings we look at the following information for determination before trips are accepted:

- Area of Pick up and Drop off—To See what IC driver is in the area
- Distance of trip--- We prefer trips 50 miles or more, but will be happy to accept a request for less mileage.
- Check the Schedule to see if there is anything conflicting with the proposed trip request.

If you see an IC vendor in the shopper, we ask that you please do not select them for a trip without prior approval. Approval can be given by anyone on our CIC staff, by simply calling 8162 for trips less than 2 business days notice. E-mail us at "CIC Requests" or call 8162 for trips with 3 or more business days notice.

Say: For today – we're going to stop training. Can you believe how much we covered??

You've done an amazing job staying engaged today. Tomorrow is going to be another busy day – we'll see you bright and early tomorrow!

Day 4

Say: Welcome back today! Is everyone feeling like they got a good idea yesterday for what a typical call will sound like? Today, we're going to continue to learn some basics, do some additional practice, and then we'll be learning about your performance objectives and listening to and scoring some calls.

Voiceover

MTM is a non-emergency medical transport provider. This does not mean that we don't receive occasional calls from Members who feel they are in an Emergency Situation. In your reference guide is a Caller Emergency Situation document. Note that in most situations, Members should be instructed to call 911 in case of emergencies. However, there are exceptions that merit CSRs to assist Members.

In situations where Members are unable to call 911, and are truly in emergency situations, such as suicide, Team Leads or Managers will be asked to assist in contacting emergency services while the CSR keeps the Member on the line.

While emergency calls are rare, we do receive requests that we deem URGENT at times. Always consult our Urgency Guidelines when a Member is requesting an urgent trip. These guidelines are included in your reference guide. Please look at that document now. You'll notice that there are some situations that aren't included in the Urgency Guidelines, when applicable, our workflow begins with calling the facility to determine the true urgency. The decision from the facility drives our next actions.

Say: We'll take a few minutes and complete a quick exercise to ensure you understand this section of our training. Please go to the Urgency activity on the site. There are 5 questions here – go ahead and answer those at this time.

Instructor Note: MTM Site < Urgency< Urgency Activity

Give the class 10 minutes to complete the activity and once everyone has finished, move to the next section.

Say: You might have heard us refer to CSCOT this week, and it's time that we provide further information about them for you. CSCOT is a special group within MTM that handle special types of requests. You'll find a document in your reference guide that goes into detail on how to forward requests to CSCOT, but the basic requests that CSCOT handles are:

- New RTPs
- Existing RTPs
- Trips that require VERBAL Auth from the HP
- Stretcher/Ambulance Requests

Any eligibility discrepancies should be referred to CSCOT as well, this means:

- Members showing in system as Not Eligible.
- Members who do not appear in the system at all.

Say: Aside from the calls that have to be referred to CSCOT, we also have other situations that arise that necessitate other departments assist us.

Say: You can see on the AS400 screen here that there are many types of escalated trips listed – such as Ambulance or Stretcher, Public Transit, etc.

Say: Depending on which option you choose, the AS400 will automatically default to the correct trip status code for the desired escalation process. For example, if the CSR chooses option 12 for "trip under 3 days notice," the trip status will then automatically be change to "W8." Let's look at the Escalated Process in your Reference Guide. When we do our practice exercises, we'll revisit these types of escalations and complete a few in the AS400.

Voiceover

How many of you have heard the term, HIPAA? HIPAA is the Health Insurance Portability and Accountability Act of 1996. This Act keeps our Member data safe and the privacy of our Members at the forefront of our everyday operations. As a CSR, you'll be handling Member data each and every day, and it's crucial to take the steps necessary to keep that information secure.

Say: In your reference guide, you'll find a HIPAA Guidelines document. As a CSR, you'll want to follow these processes and always make Member privacy a priority. Please take a look at the HIPAA Guidelines with me.

Voiceover

Under the Health Insurance Portability and Accountability Act of 1996, MTM is obligated under federal law, including, without limitation, to maintain the confidentiality of information, including personal healthcare information of all Members.

It is critical that we protect our Members' information at all times. This includes the bullets you see listed on these guidelines. Some of the most important points to remember:

- Keep all documents that contain Member-specific information out of sight and utilize the metal bins located throughout the CSC to dispose of such documentation when necessary.
- DO NOT give out medical numbers to Members no matter how much information they verify.
- Confirm passwords on accounts when applicable prior to providing ANY information to a caller.
- When leaving messages for Members, never provide specific information - simply request a call back regarding transportation.

By safeguarding Member information, we not only protect our Members, but our company as well.

Say: This is a good time for us to break, as we're going to begin CSR Performance Measures when you return. Take 10 minutes and then we'll plan to get started when you get back!

Say: Welcome back! We're going to talk until lunch about your performance objectives. What are the goals you'll strive to meet in your position as a CSR?

Voiceover

Due to our various contract requirements with state agencies and healthcare providers, our customer service center is held to service level requirements. That means that we have a limited number of "rings" allowed prior to a call being answered. Careful balance of calls per hour per CSR and the length of time spent with each Member is important.

How is the performance of a CSR measured?

Individual calls per hour and handling time goals change as a CSR grows more comfortable with this position and will change after the 90 day introductory period. Obviously, as you become more

familiar with the calls and the job, your handling time and number of calls handled will improve. Your performance is also measured based on observations performed on your calls.

MTM has a state of the art monitoring program in place that is used to assure quality of our customer interactions. We'll be listening to some calls shortly and talking in greater depth about the observation process later today. Right now, let's take a look at the goals for Calls Per Day and Handle Time.

Your Goals for Calls Per Day and Handle Time

Ultimately, your goal is to maintain an average of 7 calls per hour, with an average 5 ½ minute talk time.

As a new CSR, the progression to achieve this goal is as follows:

- 0-40 days as a CSR - **5** calls per hour with average **7 ½** minute talk time.
- 41-90 days as a CSR - **6** calls per hour with average **6 ½** minute talk time.
- 91+ days as a CSR - **7** calls per hour with average **5 ½** minute talk time.

Average Handle Time:

Note: Handle time is talk time and hold time combined

Your goal is - 7 minutes.

Remember, as with any dynamic environment and the nature of differences between calls, your interactions with Members will vary from call to call. Some calls will take significantly less talk time and less hold time, while more complex issues will take longer talk time, as well as longer hold time. Your goals are always an average. Don't get overwhelmed by the objectives on paper and think that every call has to be an exact length.

Error rate is another metric we use to evaluate CSR performance. Each month, our Quality Management group completes 15 trip audits to ensure accuracy on our Member interactions.

Error Rate:

Your Goal is <1.5%.

Another key component of performance depends on your observation scores during monitoring.

Your goals for Call Monitoring are as follows.

Call Monitoring Scores:

- 0-40 days as a CSR - **85%** scores on call observations.
- 41-90 days as a CSR – **90%** scores on call observations.
- 91+ days as a CSR – **95%** scores on call observations.

Call Monitoring scores are derived from the result of observations.
There are 9 sections to the observation score. These are:

- Section 1 – Greeting
- Section 2 – Professionalism
- Section 3 – Confidentiality
- Section 4 – Call Management
- Section 5 – CSR Workflow
- Section 6 – Hold Technique
- Section 7 – Transfer Technique
- Section 8 – Quality
- Section 9 - Closing

We're going to talk through these sections at this time, if you'd like to follow along with me, you have a copy of the observation form in your binder as well as a copy of the guidelines.

Section 1 – Greeting

1.1 Identified self and area – The CSR should immediately upon answering the phone introduce themselves in the greeting of their contact.

a) Did the CSR thank the Member for calling or state, "Good Morning/Good Afternoon?
b) Did the CSR use their first name in the greeting of their call in a manner in which the caller could understand?

1.2 Properly identify the company – The CSR should immediately identify the company (Health Plan) the caller is trying to reach. They should not answer the phone as MTM unless specified in protocols.

a) Did the CSR thank the Member for calling?
b) Did the CSR use the Health Plan name in entirety without using abbreviations?

1.3 Verifies three pieces of HIPAA.

a) The CSR should follow HIPAA guidelines and must verify three of the five pieces of information to be compliant.

i) Name of Recipient

ii) Address

iii) Phone Number

iv) Medical ID

v) Date of Birth

If the CSR scores a 0 in this component, the entire observation will be scored as a 0 due to ensuring 100% compliance with HIPAA guidelines.

Section 2 – Professionalism

2.1 Used proper grammar.

a) CSR should refrain from using MTM jargon or abbreviations when speaking with callers.

b) CSR should use the right choice of wording as to not frustrate the caller or make them feel intimidated.

c) CSR should always speak in a professional manner.

d) CSR should pronounce their words clearly and in a manner in which the caller can understand.

2.2 Use of customer's name during the call.

a) CSR must use the caller's name throughout the call to show respect.

b) CSR must use the caller's last name unless granted permission to use the first name.

2.3 Asks open ended/probing questions.

a) Did the CSR say, "How may I help you today?" or any variation of offering assistance.

b) CSR should ensure they have gathered all the facts before making any speculations as to what happened previously in the trip that contributed to the issue.

Section 3 – Confidentiality

3.1 Obtained caller's name/relationship/telephone number before disclosing info – The CSR should ask caller information immediately after the greeting in order to identify the caller.

a) Did the CSR gain information from caller immediately after the greeting?

b) Did the CSR gain medical ID or other information if necessary in order to access account quickly?

c) Did the CSR obtain caller's name, relationship, and telephone number before disclosing personal information?

The next few sections are the heart of the Member's interaction with MTM. This is where CSR's provide the best service by asking important questions and offering solutions. Think about the requirements for good call management, CSR workflow, and listen to the hold and transfer techniques as we do observations.

Section 4 – Call Management

4.1 Uses open probe to start call/asked appropriate questions – The CSR will ask additional questions to confirm that they have an understanding of the caller's original request. CSR should take callers age and sex into consideration before asking the special needs questions.

a) CSR should reconfirm caller's needs to ensure they captured correct information.
b) CSR should confirm date and time of the appointment.
c) CSR should verify type of trip required.
d) CSR should verify facility information using F6 function in Net Management System.
    i) Facility phone number
    ii) Doctor/Facility name
    iii) Facility address
    iv) Type of doctor being seen
e) CSR should determine if there are additional passengers.
f) CSR should not ask a Member under the age of 12 or over the age of 50 if they are pregnant.
g) CSR should take the caller's special needs into consideration when asking about mobility capabilities such as crutches, walker, cane or wheelchair weight information.
    i) If the caller requires a paralift or stretcher/ambulance, the CSR needs to be cautious of how they ask the caller about their weight. "Ms/Mr Caller, in order for me to ensure we get you to your appointment safely, I need to ask what is your approximate weight including equipment? (If applicable.) The CSR should also ask if their wheelchair is manual or electric.
    ii) If caller requires paralift or stretcher, the CSR should also inquire to determine if the Member has steps outside of their home and approximately how many steps.

4.2 Verifies telephone number and address during the call.

a) The CSR must verify the Member's address and telephone number on all calls at some point throughout the call.
   i) If Member does not have a phone number the CSR should indicate that in the F4 notes.

4.3 Offers mileage reimbursement.
   a) CSR should explain the benefits of utilizing mileage reimbursement.
   b) CSR needs to ensure proper education is made on the following:
      i) Retro Process/Prior/Gas Logs
      ii) Mileage reimbursement form process

4.4 Offers bus when available.
   a) CSR should explain the benefits of taking public transportation.
      i) Caller does not have to wait for transportation provider to pick up using the will call process.
      ii) Taking the bus allows you the flexibility of being able to manage your time.

4.5 Acknowledged and answered all questions.
   a) CSR needs to overcome caller's objection to taking public transportation or using mileage reimbursement.
   b) CSR needs to provide the caller proper education on why they are denying based on state or health plan protocols.
   c) CSR must educate the caller on next steps for mileage reimbursement, RTP, LON, OOC, Meals & Lodging and PA to reduce multiple callbacks and caller frustration.
   d) CSR should never put blame on another department or CSR. They should always take personal accountability for any issue that arises.
      i) "I have reviewed your trip and have identified the issue, I apologize for this inconvenience and I will do my best to get it resolved for you quickly."
   e) If the caller is irate, the CSR should address the caller's personal concerns before making any recommendations about the trip.
   f) CSR should never interrupt the caller when they are clearly upset. They should let the caller know they are there to listen to their concerns. After resolving the caller's personal needs, they will make recommendations on how to resolve the trip issue.

4.6 Gave correct answers.
   a) Demonstrates expertise by clarity of questions to ensure you speak to the caller in a manner that meets the caller's experience with MTM. First time callers need more information for education purposes.

b) CSR must provide accurate information when setting trips by utilizing proper processes and procedures specifically LON, RTP, PA, OOC, Meals & Lodging and Mileage Reimbursement.

4.7 Recapped the trip/Quantified all commitments to the caller.

a) CSR must provide the caller with a review of the trip details.

i) Date and time of appointment

ii) Pick up and drop off locations

iii) Trip type (one-way, round trip or multi-leg)

iv) Special needs requirements (if applicable)

v) Passenger information (if applicable)

vi) Transportation provider information

vii) Mileage (long distance trips beyond protocol mileage guidelines)

4.8 Confirmed understanding.

a) Encourage customer to clarify – This component is to allow the caller to affirm the reason or request for accuracy purpose.

b) Checks for customers overall understanding of product and service.

i) Mileage reimbursement

ii) Public transportation

iii) Cab

iv) Para lift/Stretcher

c) Ensures proper education is made on the following

i) Pick up and drop off procedure

ii) Prior authorization process

iii) Out of county/State process

iv) Meals & lodging

v) Urgency guidelines

vi) Level of Need form

vii) Mileage reimbursement form process

viii) Recurring trip process

d) Identifies and discusses appropriate solutions, options and/or alternatives – The CSR needs to review appropriate solutions before making recommendations and enter necessary F4 notes within the Net Management System.

i) Bus exclusion

ii) Special needs (para lift/stretcher)

If the CSR scores a 0 in this component, the entire observation will be scored as a 0 due to not documenting F4 notes.

e) Confirms and responds appropriately to the caller's message.
   i) Reaffirm the caller's needs for mutual agreement.
   ii) Apologize for misinterpreting the caller's original reason for calling.

4.9 Problem solving.

a) CSR needs to portray confidence in order to convince the caller that they can handle their concerns or request.

b) CSR should take all appropriate steps of assisting the customer before escalating the call.

c) If a caller calls and requests a supervisor immediately, the CSR should inform the Member that they can't escalate to a supervisor without trying to resolve the issue first.

Section 5 – CSR Workflow

5.1 Verifies eligibility including Member's demographic information.

a) If the caller is not eligible for transportation, the CSR verifies via website, Health Plan or IVR and provides information to have caller added to system.

i) First and last name

ii) Medicaid ID

iii) Birthdate

iv) Sex

v) Address

vi) Telephone number

5.2 Verifies the provider's address.

a) CSR clarifies the provider's address which was given by the caller.

5.3 Provides information about the benefits and accessing services.

a) CSR should review Health Plan protocols to ensure the caller is meeting days notice guidelines and educate the Member on proper call in procedure for future trips while following current protocols and urgency guidelines.

b) CSR should decide if the trip meets the guidelines to set or deny based on protocols and F8 Red Flag within the Net Management System.

i) The CSR needs to ensure they review the covered/excluded list, eligibility requirements, and F8 Red Flag notes on account.

c) CSR should communicate the value of MTM's transportation services wherever applicable.

d) The CSR should always inform the caller why specific information is needed to set the trip.
   i) HIPAA Regulations – "In order for me to process your transportation request, I will need to verify three items of identification. This is to ensure we are compliant with HIPAA regulations."
   ii) Special needs questions – "In order to set your trip with the appropriate transportation provider, it is necessary for me to get your weight."
   iii) Additional passenger's age and weight information (car seats) – "It is important for me to get the ages of the additional passengers should an emergency occur as well as determining car seat requirements."
e) Acknowledges customer's probable feelings.
   i) When protocol states that we cannot set trip, the CSR should acknowledge and empathize with the caller's feelings of being denied.
f) Proper call back procedure – CSR needs to educate the caller on the call back procedure if a requirement on this call.
   i) Meals and lodging request, network EC trips, complaint process, and after hours.

Section 6 – Hold Technique

6.1 Requests permission and explains to place caller on hold.
   a) CSR must always gain permission from caller to place them on hold.
   b) CSR should not put caller on hold unnecessarily.

6.2 Periodic time check.
   a) CSR must go back to the caller after having on hold for no more than two minutes (depending on Health Plan) to make them aware of the status.
   b) CSR should always thank the caller for holding when bringing them back on the line.

Say: How did this CSR deliver on appropriate hold technique? Did you score this section well?

Section 7 – Transfer Technique

7.1 Transferred call appropriately.
   a) CSR should educate the caller by letting them know why they need to be transferred.
   b) CSR should also educate on whom they are being transferred to and provide the caller with a call back number in case they are disconnected during the transfer process.
   c) CSR needs to ensure the caller they can assist with the request instead of transferring to a specific CSR as caller requested.

Section 8 – Quality

8.1 Overall (tone and courtesy words).

a) CSR should show empathy when speaking to Members by using phrases like – "I understand your situation/frustration and I will do what I can to accommodate your request."

b) CSR must always maintain a positive upbeat experience for the caller without being condescending or rude.

c) CSRs voice should fluctuate in a tone that expresses concern on the caller's behalf.

d) The CSR should apologize based upon the situation and reaction of the caller.

e) CSR should keep an even tone throughout the call.

f) CSR should never elevate their voice to match the callers if the caller is upset.

g) CSR should keep a smile in their voice that demonstrates appreciation.

h) CSR should do their best to match the caller's rate of speech in order to reduce the frustration level of the caller.

i) If the caller speaks slower than the CSR, the CSR should try to match to ensure the caller is retaining all the information we are providing.

j) CSR should always pause throughout the contact of the call to give the caller an opportunity to respond, ask questions, or reconfirm information.

k) Allows customer to speak without interruption.

l) CSR should inform the caller that they value them as a customer.

m) CSR should use courtesy words such as, "Please, thank you, and one moment" throughout the call.

n) CSR should gauge the caller's eagerness to get off the call and keep chit chat to a minimum.

o) CSR should refrain from having discussions involving religion, politics, or anything that may have conflicting view points.

8.2 Minimizes distractions.

a) CSR should use appropriate listening skills and focus strictly on caller.

i) Tune out background noise from peers.

ii) Eliminate other distraction (email).

iii) CSR should jot down quick notes to keep attentive to the caller's needs.

b) CSR needs to ensure they are not interrupting their conversation with the caller due to outside distractions (finishing up on previous trips, peers chatting, email, another call rings in, or music.)

Section 9 – Closing

9.1 Ended call properly (thanked caller/offered further assistance).

a) CSR must confirm the caller does not have any additional questions or needs to set up additional trips.

b) CSR must thank the caller for calling.

c) CSR must remind the caller if they need to make any changes or have questions about their trip to contact us at their earliest convenience.

d) CSR should use phrases that help direct the call flow to get the caller on and off the phone as quickly as possible.

Say: Before we dive into our observations, I'd like to let you give your brains a break! Let's break for lunch at this time and be back in 45 minutes. When we return, we're going to spend our day with YOU conducting observations. Enjoy your lunch!

Instructor Note: *Bring the class back together.*

Say: Welcome back! I hope you had a great lunch. We've got a lot to talk about this afternoon, so let's jump right in! As we discussed before lunch, performance measures for you here are your observation scores when you're monitored. As I mentioned earlier, MTM has a monitoring process in place that is industry leading.

Say: In order to understand the call observation, we're going to listen to a call and use the observation form and guidelines to provide a clear explanation of the different parts of the calls you'll be scored on. Remember, just as crucial as the observation guidelines, are the SOFT SKILLS that we talked about on Tuesday. These are the basics of good service.

Instructor Note: *Form is on MTM Site < Forms < New Call Monitoring Tools*

Say: Let's listen to a call and walk through the observation while we listen. The guidelines provide specifics for each section of the form that is used for the final score. On the site, you'll find an electronic version of the form. Use that to score the calls as we listen.

Say: We'll talk about the different parts of the scoring at the end of the call, don't be afraid to take notes that you want to discuss after the call is over. Is everyone ready?

Instructor Note:

Begin playback of pre-selected call.

MTM Site < Calls < Observation.wav

Display the observation form on the screen for the duration of the call and after the call concludes, begin discussion below, showing each accompanying slide.

Section 1 – Greeting

Say: What did we hear on that part of the call? Were the 3 components of the greeting met appropriately? How did you score this CSR on the greeting?

Section 2 – Professionalism

Say: Did the CSR use proper grammar? What about the other components of this section? How did you score this call for professionalism?

Section 3 – Confidentiality

Say: Did this CSR do a good job in securing confidentiality? Score this section of the observation based on how you believe he performed.

Section 4 – Call Management

Say: What did you notice about this portion of the call? Did the CSR ask good questions and determine both the most appropriate AND cost effective method for this Member? Would you have offered this Member a different solution? Go ahead and score this section of the observation on your form.

Section 5 – CSR Workflow

Say: What did you notice in this section about how the CSR handled the Member's eligibility? Did you hear any techniques that you think will be useful when you begin taking calls? How did you score this section for this call?

Section 6 – Hold Technique

Say: Did you agree with the hold technique this CSR used?

Section 7 – Transfer Technique

Say: How did this CSR deliver on appropriate transfer technique? How did you score this section?

Section 8 – Quality

Say: This section of the call helps determine whether or not we provided a quality Member experience. If you were on the other end of this call, would you have felt like you were a valued Member? Would you have felt like you had the CSR's attention throughout the call?

Section 9 - Closing

Say: Did the caller end this call feeling as if his needs were addressed? Did the CSR ensure that the Member expectations were met? Do you think the Member left the call understanding exactly what would happen prior to their trip?

Say: Looking at that call overall, how did you score this CSR on this observation? Do you have a good understanding now of how you'll be scored on your own calls? What about the Soft Skills on that call? What did you notice?

Say: You guys did a great job in that monitoring exercise. Let's go ahead and take a break now. We'll plan to be back in our seats in 10 minutes and we'll continue.

Instructor Note: *Regroup and begin.*

Say: On Tuesday, we spent time talking about soft skills and the importance of those when interacting with our Members. We're going to listen to another call now, but instead of focusing on the observation form, I'd like you to think in terms of soft skills in particular. Here is the list we talked about earlier this week. Take notes about the things you notice about THESE behaviors on this next call. After the call is over, we'll talk about what you heard and observed.

Instructor Note:

Begin playback of next pre-selected call.

MTM Site < Calls < Soft Skills 2.wav

Display the soft skills screen for the duration of the call and after the call concludes, begin discussion below, showing each accompanying slide.

Say: Did you find that this CSR demonstrated good soft skills? If you were this Member, how would you have felt about the call you just completed?

Instructor Note:
Facilitate discussion about the soft skills on this call, noting that the Member was asked to wait while the CSR was doing something else at the start of the call. Also talk about the sincerity and listening skills of the CSR.

Say: We're going to do that same exercise again – listening to another call specifically for Soft Skills.

Instructor Note:
Begin playback of next pre-selected call.
MTM Site < Calls < Soft Skills 3.wav
Display the soft skills screen for the duration of the call and after the call concludes, begin discussion below, showing each accompanying slide.

Say: Did you find that this CSR demonstrated good soft skills? If you were this Member, would you have felt like this CSR was interested in your needs?

Instructor Note:
Facilitate discussion about the soft skills on this call, noting that the CSR's tone at the beginning of the call was not friendly. Also note that he uses the word, "I think," frequently, and his reluctance to offer assistance in locating the provider by name without a telephone number from the Member.

Say: We'll listen to one more call for Soft Skills.

Instructor Note:
Begin playback of next pre-selected call.
MTM Site < Calls < Soft Skills 5.wav
Display the soft skills screen for the duration of the call and after the call concludes, begin discussion below, showing each accompanying slide.

Say: This Member was a bit difficult to understand, but did you notice the CSR showing any signs of frustration as a result?

Instructor Note:

Facilitate discussion about the soft skills on this call, noting that the CSR remained friendly throughout the duration of the call, despite difficulty in understanding the caller.

Say: Do you see the connection between good service and soft skills after listening to these calls? While we follow protocols and guidelines for the hard skills that we learn, the courtesy that our soft skills provide to our Members has a huge impact on our quality of service.

Say: After listening to calls today and walking through the observation process, how are you feeling about the prospect of taking calls? You did a nice job today. Tomorrow we're going to talk in-depth about what we refer to as Call Center 101. Enjoy your evening and we'll see you in the morning!

Day 5

Say: Welcome to the last day of our first week together! Today we're going to cover a couple of Quality Management topics and then get into Call Center 101, which includes some of the basics like MTM policy at the center.

Complaints

Voiceover

There are times when Members have what they consider to be a bad experience with either MTM or a transportation provider. In these cases, sometimes, they call with the intention of filing a complaint with us.

What is considered a complaint?

If a caller informs you that he would like to file a formal complaint/grievance, the following steps would be taken:

The CSR will escalate the call to the QM Queue **(8105)** and also email the QM Complaints **if** the complaint is regarding an accident, incident, or any type of substance abuse claim.

The email should include the trip number, Member/transportation provider names, and contact phone number.

NOTE: If the plan requires a warm transfer, inform the caller that the plan would like to hear from them directly. Contact the plan and warm transfer.

If a complaint call is after hours (after 5 PM) or on a weekend, document using the **AC**-After Hours code in the Trip Remarks. Email the QM Complaints burst with the trip number, Member/transportation provider names, and contact number for follow up on the next business day.

NOTE: If the plan requires a warm transfer and is not open, inform the caller that the plan would like to hear from them directly, please call back on Monday in order for us to transfer you.

After the first complaint code is entered in the F4-Trip Remarks, all supporting documentation regarding the complaint would be entered into the next paragraphs using the **MI**-Misc. Info code. If not handled in this way, it appears that there were multiple complaints filed.

Documentation of complaints should include no abbreviations and must be detailed, showing exactly who called and the circumstances.

If a caller states that he is frustrated, but would not like to file an official complaint, this is documented using an MI-Misc. Code using the NET Management system.

Say: Unfortunately, sometimes fraud and abuse are also present in our industry. We'll talk now about the Fraud and Abuse procedures that MTM employs to help stop such behaviors.

Fraud and Abuse

Voiceover

In relation to services provided by MTM; fraud and abuse encompass a wide range of recipient and transportation provider issues. Offenses that should be considered fraud and abuse include:

- Misuse of Medicaid or Medicare services
- Misuse of transportation and mileage reimbursement services
- Improper billing practices

MTM's Fraud and Abuse Program is set up to monitor and prevent cases of recipient and transportation provider fraud. Compliance Auditors review and investigate fraud alerts that are reported daily.

- Each day a Compliance Auditor pulls a report of the previous day's fraud alerts that the system has automatically generated. The Compliance Auditor investigates each fraud alert and works towards resolving the issue.
- Each fraud alert is posted to a monthly Fraud Alert Summary that includes the issue, a resolution to the issue, and a code to identify the type of issue that has been reported.

So what are examples of potential fraud?

- A Member states he has an appointment, but the doctor's office states the person is not scheduled for an appointment.
- A Member has been informed that a service is not covered, but the Member still makes an attempt to be transported to a facility to be seen for the service that is not covered.
- Two Members from the same household have set up mileage reimbursement for appointments that are on the same dates and to the same destination.
- A Member states he has a working vehicle but requests transportation service rather than mileage reimbursement without a medical reason for not driving.
- MTM is informed that a transportation provider did not complete a past trip, but the trip still has a scheduled trip status.
- A request has been made to set up transportation under the name of a Member for someone other than the Member.
- A Member's trip history reflects excessive trips to the Emergency Room or excessive routine appointments without a justified reason that warrants the excessive trips.

Although this list isn't all inclusive, it does present some typical examples of the fraud and abuse we sometimes encounter. The best way to prevent Fraud and Abuse is to do your part to follow the process:

- Report issue of suspected fraud and abuse by entering an FA code in the trip notes.
- Take immediate steps to prevent fraud or abuse from occurring, if at all possible. (i.e. deny/cancel trip request that involves fraudulent or abusive trip activity, contact team lead, Red Flag the member.)
- A Compliance Auditor will review the FA, Resolve the FA issue, and identify the FA type.

Say: Let's go ahead and take a break now. Now that we've covered Complaints and Fraud, we're going to move into what we refer to as our Call Center 101 after the break.

INSERT MATERIALS/INFORMATION

CSC Tier Levels

Chain of command

Scheduling

Say: You'll find a detailed document in your reference guide with some tips for using email in the workplace effectively – but some basics to remember:

- Emails should be checked routinely throughout the day for any changes or important updates
- Keep email minimized when on calls
- Close at the end of the day
- Emails should be used for business purposes only

Say: Since many of you have likely used Outlook or other email clients in the past, we're going to cover Outlook by completing an activity.

Using the materials in your reference guide for any additional help, complete the Outlook exercise you see here. If you need any help, please raise your hand and I'll be happy to assist.

Instructor Note:

Display activity on slide. Provide 10 minutes to complete, and provide assistance for anyone who needs it.

Say: How did that go? Everyone got the email sent? Let's break for lunch at this time and be back in 45 minutes.

Instructor Note:

Bring the class back together.

Say: Welcome back! For the remainder of our day today, we're going to do some additional practice exercises in the AS400/NET Management System.

Instructor Note:

Display exercise from slides and make your way around the room offering assistance as needed.

Say: Please follow the instructions for the requirement for this exercise. This is to refresh your memory on the system before we start practicing some different types of trips. Use your reference guide and ask any questions that might arise as you process the request.

Instructor Note:
When it appears that the class is finished, wrap this exercise and move forward.

Say: How did that go? Do you feel like you're getting a better feel for the system and setting up basic round trips?

Say: I'm going to walk you through an exercise where we do mileage reimbursement. I'd like everyone to pull up the account for medical #56461646456. What is the name of the Member that comes up for that number?

Instructor Note:
Display exercise from slide and verbally explain the process/screens while displaying AS400 screen on TV simultaneously.

Say: Now that you've completed a mileage reimbursement, let's do one more practice exercise today. This time, you guessed it – public transportation. I'm going to walk you through this exercise like the previous one.

Instructor Note:
Display exercise from slide and verbally explain the process/screens while displaying AS400 screen on TV simultaneously.

Say: You've had a lot to digest this week – for many of you this was a new industry, for most of you a totally new type of job. We've talked about policies for MTM, HIPAA, you've learned about Soft Skills, and basics of Customer Service expectations. There's a whole list here on the screen and it's not even the majority of what you've learned.

Say: Next week we're going to spend our first three days splitting the days into two parts. In the mornings we'll do practice exercises and role plays with the specific protocols. In the afternoons we'll be entering paper trips into the system for rides that have already been requested.

Say: Before we adjourn for today, take a moment to congratulate yourselves on your hard work this week. I'm very proud of you! Now, go enjoy your weekend and we'll see you Monday!

Week 2

Day 1

Say: Welcome back to week 2! Did everyone have a good weekend? As I mentioned last week, we're going to do much more hands on work this week, specific to the TX protocols! This morning we'll start with some practice exercises and some role playing activities.

INSERT AS400 PRACTICE EXERCISES
Break at 10 am
INSERT AS400 PRACTICE EXERCISES
LUNCH at 12 pm
INSERT AS400 PRACTICE EXERCISES
INSERT ROLE PLAY EXERCISES
Break at 2:30 pm
INSERT ROLE PLAY EXERCISES
Close for day

Day 2

Say: Hi there! Welcome back! You did a great job yesterday with your practice exercises, and paper trips. Today, we'll do some role playing activities to practice our SOFT SKILLS. Then this afternoon we'll spend entering paper trips like we did yesterday.

AS400 Practice Exercises
Break at 10 am
PAPER TRIP INSTRUCTIONS
LUNCH at 12 pm
PAPER TRIP ENTRY BEGINS
Break at 2:30 pm
PAPER TRIP ENTRY RESUMES
Close for day

Day 3

Say: We're officially half way through your last week of training! Great job! This morning we'll spend the first part of the morning talking through the plan protocols. I've had a few folks taking notes about questions they wanted to ask, and I'm sure it would be a good time to ensure we're all in sync.

Plan Protocols

Break at 10 am

Plan Protocols

LUNCH at 12 pm

Plan Protocols

Close for day

Day 4

Say: We're almost there. You graduate from training tomorrow! Today we're going to learn about the Cisco phones that you'll use every day. Once we've finished that portion of our training, we'll do some more paper trips, and then this afternoon, you'll take your final exams!

Insert CISCO Materials

(also included in REF GUIDE)

Nesting time – listen to calls on floor.

Lunch at 12 pm

Nesting time – listen to calls on floor.

Bring class back together at 4

Say: Welcome back and thanks for the hard work this week, I know listening to calls must seem monotonous, but that gives you great practice for taking calls! I'm going to direct you to the site to take the test. Notes are not allowed. Once you've finished, you're free to go for the day! Is everyone ready?

Instructor Note:

MTM Site < Graduation < Final Assessment

Final Day

Say: You made it! Today is your final day of training before you start taking calls! We'll finish up taking calls in the classroom after lunch today and then we'll answer any remaining questions you have and you'll evaluate your training experience from the two weeks. Is everyone ready to continue with taking calls?

Take calls in classroom
Break when necessary
Lunch at 12 pm
Take calls in classroom
Bring class back together at 2

Say: Before we finish our last "official" activity, what questions do you have from the past two weeks? Do you have any items that you've seen routinely that you have unanswered questions about? Anything you'd like to comment on?

Instructor Note:

Facilitate discussion for amount of time that is sufficient to answer all questions.

Say: That leaves us our last activity. Now is the time where you get to evaluate us. We're going to ask you to fill out a quick training evaluation which helps us determine which portions of the training were most helpful and which portions we need to improve on. Please be candid in your feedback. Your evaluation is not tied to you and we appreciate the honest responses.

Instructor Note:

MTM Site < Graduation < Training Evaluation

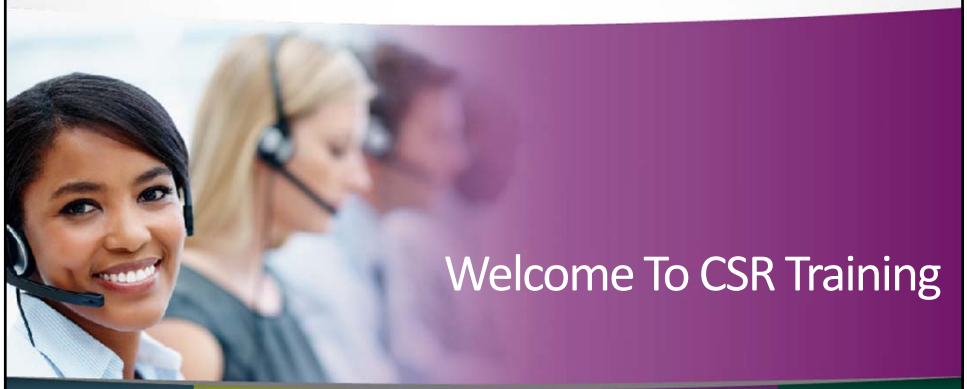
Say: Now that we've finished that, I want to thank you for your hard work over the past two weeks. I have had fun training with all of you and I think you'll enjoy the memories you see here!

Instructor Note:

Display photos from past two weeks on screen. Proceed with graduation activities including cake/punch/etc., if applicable. Provide reporting instructions for following week including location/hours. Dismiss.

MTM

Call Center Services



Welcome To CSR Training

Classroom Courtesies

- Be on time…Breaks…Lunch
- Be respectful – keep an upbeat attitude
- Pay attention
- Use professional language
- Do not work ahead- stay with the class
- Actively participate in conversation
- Have fun!

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Icebreaker Activity

Finish the Sentence

Round 1

- The best job I ever had was….

Round 2

- The worst food I ever ate was…

Round 3

- The best vacation I ever took was to…

MTM

This Morning's Topics

Being a Customer Service Representative

- What's it like to be a CSR at MTM?
- What is my role as a CSR?
- How does a high quality CSR perform?

General Call Information

- Military time
- MTM Terms
- Soft Skills vs. Hard Skills

MTM

What's it like to be a CSR at MTM?

MTM

What is my role as a CSR?

- Answer every call with the goal of providing THE BEST customer service possible to our Members.
- Take personal accountability to provide accurate and helpful service on each call.
- Demonstrate sincere personal commitment to promptness, reliability and quality of work.
- BE the face and voice of MTM.

MTM

Quality CSRs = MTM Success

- **WHAT** do we do?
- **WHEN** do we arrange rides?
- **WHERE** do we arrange rides?
- **HOW** is transportation arranged?
- **WHY** do we do what we do?

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Military Time

Military Time	Standard Time	Military Time	Standard Time
0000	12:00 AM	1200	12:00 PM
0100	1:00 AM	1300	1:00 PM
0200	2:00 AM	1400	2:00 PM
0300	3:00 AM	1500	3:00 PM
0400	4:00 AM	1600	4:00 PM
0500	5:00 AM	1700	5:00 PM
0600	6:00 AM	1800	6:00 PM
0700	7:00 AM	1900	7:00 PM
0800	8:00 AM	2000	8:00 PM
0900	9:00 AM	2100	9:00 PM
1000	10:00 AM	2200	10:00 PM
1100	11:00 AM	2300	11:00 PM

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Terms Exercise Activity

Term Review Time

Pass out Bingo Terms Handout & Specialist man

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Terms Exercise

B.I.N.G.O.

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Hard Skills vs. Soft Skills

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How are soft skills related to what I do?

Communicating clearly	Listening	Servicing customers
Being on time	Following instructions	Teamwork
Getting along with others	Responsibility	Dependability
Appreciating diversity	Honesty	Enthusiasm
Leadership	Solving problems	Making decisions
Taking initiative	Creativity	Friendliness
Negotiating	Managing yourself	Self-Esteem
Good manners	Work Ethic	Adaptability

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Soft Skills

What soft skills do you think are important for your position?

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Customer Service????

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Customer Service ????

Think about yourself as the customer in these situations.

(Show video now.)

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Customer Service ????

What did you observe about the customer service in this video?

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What is your first impression?

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Insights from Sam Walton

"There is only one boss, and whether a person shines shoes for a living or heads up the biggest corporation in the world, the boss remains the same. IT'S THE CUSTOMER!

The customer is the person who pays everyone's salary and who decides if the business is going to succeed or fail. In fact, the customer can fire everybody in the company from the chairman on down, and he can do it simply by spending his money somewhere else."

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First Impression Activity

Listen to each call and discuss the 1st impression

Call 1

Call 2

Call 3

Call 4

Call 5

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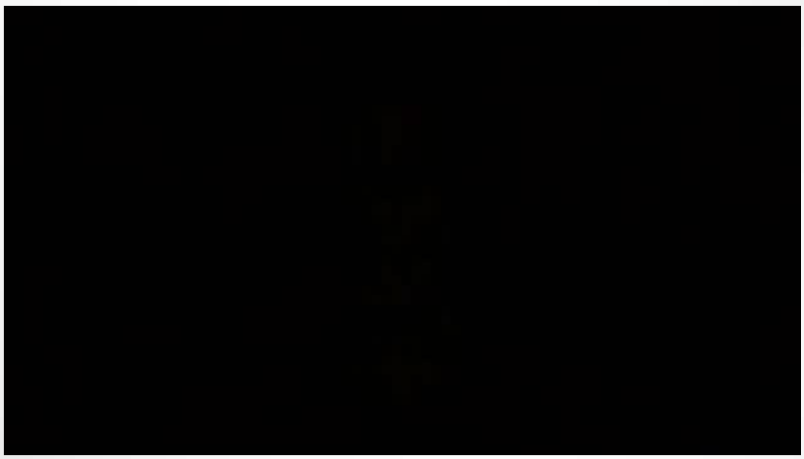
First Impression Video



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LUNCH

Time to rest your brains for a bit.
Be back here in **1 hour** and
ready to move forward.

Enjoy!

MTM

This Afternoon's Topics

General Call Intake

- Modes of Transportation
- Types of Medical Coverage & Specialists
- Trip Eligibility (Eligible/Not Eligible) & Remarks
- Emergency vs. Urgency

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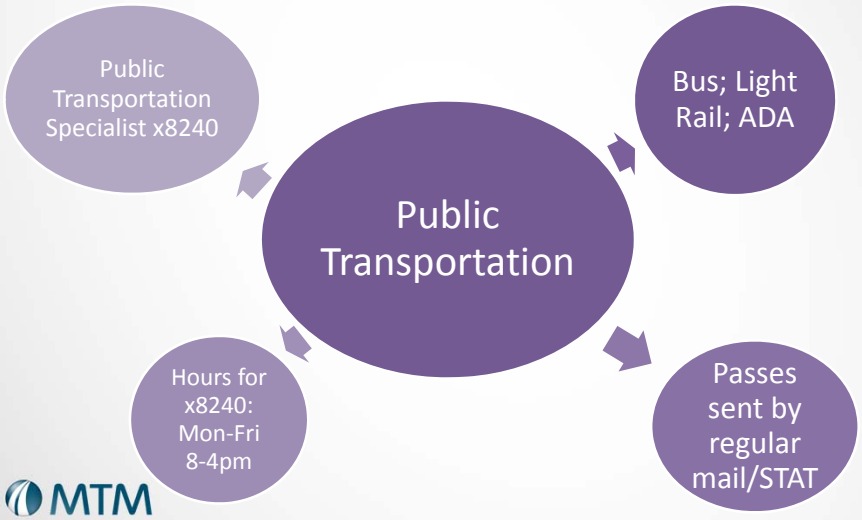
Modes of Transportation



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Modes of Transportation

Gas Mileage Reimbursement

Dollar amount per mile for round trip to the provider's location and back. This is the preferred method of transport.

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Medicaid

Available to:

Certain low income individuals

Families who fit eligibility criteria

Costs:

Depending on state rules – some individuals might be responsible for a co-pay for select medical services

Pays:

Healthcare Providers only

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Medicare

Available to:

People 65 or older

People under 65 with certain disabilities

People of any age with end-stage renal failure

Costs:

Part A – generally no premium for Part A

Part B – most pay a monthly premium for Part B

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Types of Specialists

Hand out *Types of Specialists* document for binders

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Types of Specialists Activity

Time for a fun activity!

Types of Specialists word search

MTM

Trip Eligibility

- It is our job as a CSR to ensure that the Member is eligible for trips under their current plan
- Dependence on NET Management (AS400) to display eligibility
- Eligibility is determined by the plan
- Ineligible requests go to CSCOT/referred to plan
- Eligibility is determined early in the call and will guide the flow of the call.

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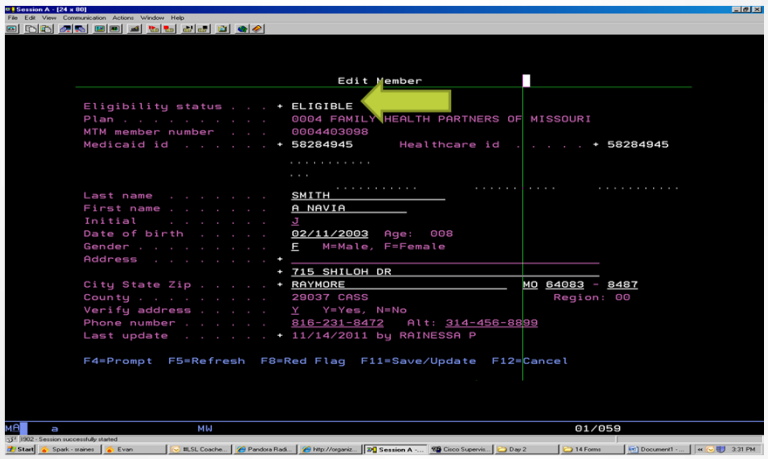
Eligible



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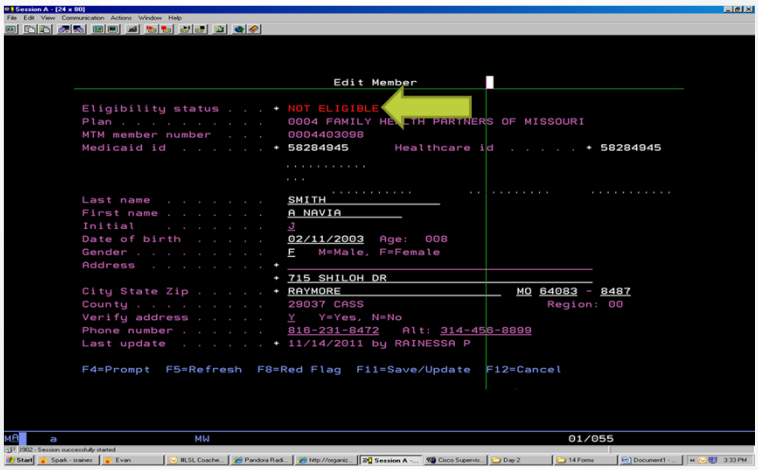
Not Eligible



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Trip Remarks

(Hand out trip remarks document)

- Trip remarks must be documented to indicate the outcome of a trip request
- Also referred to as **F4** notes
- Important for reporting purposes

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Emergency vs. Urgency

Emergency Policies

- Situations requiring immediate action

Urgency Guidelines

- Requests for trips that are urgent in nature

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Emergency vs. Urgency

- **Hand out the *Emergency Situations* hand out**
- **Read that document silently to yourself now**

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Emergency vs. Urgency

- Hand out *Urgent Request Guidelines* document
- Review together as a class

MTM

Today's Recap

Being a Customer Service Representative

- Being a high quality CSR at MTM
- Excellent customer service & first impressions

General Call Information

- MTM Terms & Military Time
- Soft vs. Hard Skills

General Call Intake

- Modes of Transportation
- Types of Medical Coverage & Specialists
- Trip Eligibility (Eligible/Not Eligible) & Trip Remarks
- Emergency vs. Urgency

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END OF THE DAY

ANY QUESTIONS?

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END OF THE DAY

THANK YOU for your active participation today!

We will begin tomorrow morning at 0830. Have a wonderful evening!

MTM