

## Overview

This job aid details how to request Single Trips in TripCare.

*Note: Single Trips are trips that do not recur. They include one-way trips, round trips, and multi-leg trips. Ongoing treatments should be scheduled as Standing Orders.*

## Beginning the Trip Request

*Note: All information (Member names, addresses, etc.) shown in this job aid is fictional and used for demonstration purposes only.*

**1.** Click on the Request Trip tab.

Dashboard **Request Trip** Standing Orders Attendance User Admin

**2.** Select a Member from the list by scrolling or searching, or add a new member by entering their first and last, Member ID or birthdate, and selecting their insurance.

My Members

Search Member

Enter Member name or ID

FLORES, ALAN (EP70573A)	x
LEE, KELLY (EJ86592H)	x
ODENBECK, ZEPANIAH S (U66326949)	x
PRIETO ESQUI, D'EDRA (44727-487696717-44)	✓
SMITH, JOHN (45678900)	x
SOLARINO, EMMANUEL (22162-073752977-58)	x
SUPRIEN, WENDY (EK34318M)	x

Member Details

Clear

Last Name: PRIETO ESQUI

First Name: D'EDRA

Member ID: 44727-487696717-44 OR Date of Birth: Jan 22, 1957

Select Insurance: FL United MCD

**3.** Click Single Trip.

ADD TO MY MEMBERS **SINGLE TRIP** STANDING ORDER

**4.** Before starting the process, verify the Member's plan details by clicking on the information button in the top right-hand corner.

*Note: If this member's trip exceeds their mileage limit or their plan's trip limits for the time period, it will likely be denied. Instead of using TripCare, these rides should be requested using Chat in the bottom left corner.*

D'EDRA PRIETO ESQUI

Member plan details

D'EDRA PRIETO ESQUI

Single Trip

REQUESTED BY:

Jill Kusa

(jill.kusa@modivcare.com)

Relationship to Member:

Licensed Clinical Social Worker

Trip Limits

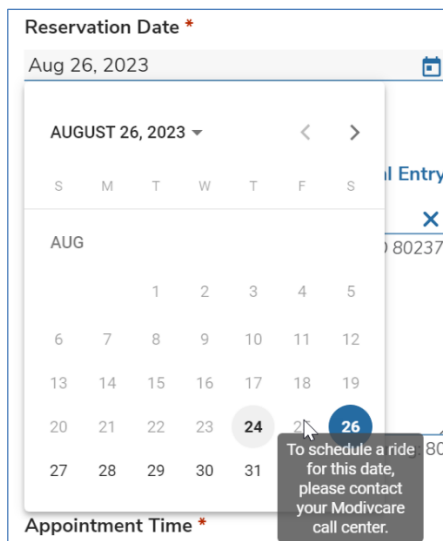
Start	End	Remaining	LOS	Treatment Type	Miles
2022-12-15	2022-12-21	Unlimited	All	All	-
2022-12-22	2022-12-28	Unlimited	All	All	-
2022-12-29	2023-01-04	Unlimited	All	All	-
2023-01-05	2023-01-11	Unlimited	All	All	-

## Step 1

*Note: When completing a trip request, only the fields with a red asterisk are mandatory.*

1. Select the ride date using the calendar icon.

*Note: The first available date will be circled in blue. Dates before it are outside of the Member's advanced notice window and TripCare will not allow you to schedule. If you require an earlier ride, you must use chat to request it.*



2. Enter the Member's address, if it does not automatically populate. You can either click on the address to see a list of recently used locations or use the manual entry function by clicking on the Manual Entry link, inputting the address, and clicking Save Location.

### LEG A PICKUP

Pickup Location \*

Manual Entry

Residence

542 EVERGREEN TER, DENVER, CO 80237

### Add New Location

Facility Type \*

Residence

Street \*

6900 E. Layton Ave.

Building

Apt/Suite

Zip Code \*

80237

City \*

Denver

State \*

CO

Name this location \*

Residence

Minimum 3 characters

SAVE LOCATION

CANCEL

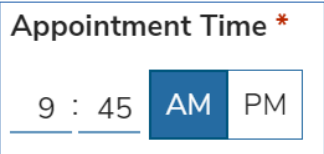
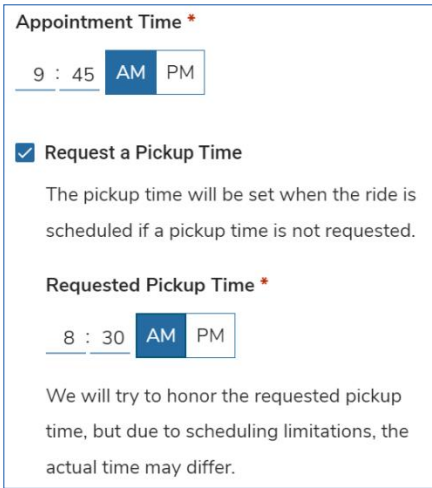
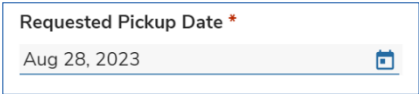
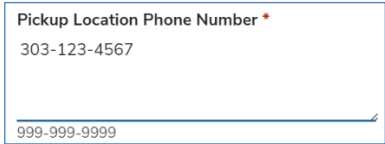
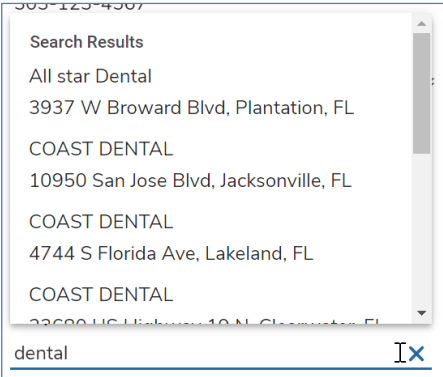
3. In this optional field, input any pickup information such as gate codes, driving directions, meeting places, etc.

### Additional Pickup Information

gate code 523, meet at leasing office, corner unit of building

Max Characters: 80

Remaining: 18

<p><b>4.</b> Indicate the appointment time.</p>	
<p><b>5.</b> If a specific pickup time is needed, check the box to turn it blue. Then, input the requested pickup time.</p> <p><i>Note: If you leave the checkbox blank, Modivcare will assign a pickup time to ensure the Member will arrive on time. If a request time is input, Modivcare will also try to honor it but may provide a different pickup window based on driver/vehicle availability.</i></p>	
<p><b>6.</b> Confirm the pickup date is accurate. In the vast majority of rides, you will not have to change this field.</p> <p><i>Note: In rare circumstances, like sleep studies, where the appointment is on a different day than the pickup, you can adjust the accordingly.</i></p>	
<p><b>7.</b> Input (or update) the Member's phone number, if it has not already populated.</p>	
<p><b>8.</b> Select a location. You can search the Modivcare rolodex for approved locations, choose a recently used location, or use Manual Entry to input a new address.</p> <p><i>Note: Rolodex locations will populate based on the Member's address.</i></p>	

<p><b>9.</b> In this optional field, enter any drop-off information.</p>	<div data-bbox="857 205 1281 373"> <p><b>Additional Dropoff Information</b></p> <p>Use main entrance</p> <hr/> <p>Max Characters: 80 Remaining: 63</p> </div>
<p><b>10.</b> Enter the facility's phone number.</p> <p><i>Note: The number should automatically populate if a rolodex facility is selected.</i></p>	<div data-bbox="800 394 1330 600"> <p><b>Dropoff Location Phone Number *</b></p> <p>(904) 260-4244</p> <hr/> <p>999-999-9999</p> </div>
<p><b>11.</b> Enter the treating doctor, if known. Write N/A if you do not know the doctor.</p> <p><i>Note: Entering a name in this field helps expedite the trip approval process.</i></p>	<div data-bbox="800 661 1330 854"> <p><b>Treating Doctor *</b></p> <p>Dr. Julius Hibbert</p> <hr/> </div>

## Step 2

2

Treatment Type \*

Dental

1

Treatment Type Notes

Could take anywhere from 1-5 hours

2

Patient Condition

tooth abscess

3

Nature of Appointment

tooth extraction

4

Procedure Codes

5

Special Requests

lker, Spanish speaker, immunocompromised, dog

Ex: preferred provider, uses cane/walker, in and out

6

**1.** Select the Treatment Type from the drop-down.

*Note: The displayed treatments have been approved by the member's plan.*

**2.** In this optional field, input short details about the treatment. Any information gives Modivcare care context.

**3.** In this optional field, add the patient's condition.

**4.** In this optional field, describe the nature of the appointment.

**5.** Add Procedure Codes in this optional field.

**6.** In this optional field, add any accommodations or special requests, such as service animals, mobility aids, or communication needs.

*Note: The driver will not see any of the medical information in fields 1-5, however, they will see the special requests section.*

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## Step 3

**1.** Select the Level of Service from the drop-down.

*Note: The available selections will vary based on Member plan.*

Select Level of Service

Ambulatory

Wheelchair

Stretcher

**2.** If Wheelchair (or a more restrictive Level of Service) is selected, answer the additional questions. These questions ensure Modivcare deploys the appropriate vehicle for the Member's needs.

Level of Service \*  
Wheelchair

Is the wheelchair oversized?  
☒ Yes ☐ No

Is it standard or bariatric?  
Standard

Is it manual, electric, or a scooter?  
Manual

If manual, can the member transfer without assistance?  
☒ Yes ☐ No

What is the member's height?  
5'4"

What is the member's weight?  
198 lbs  
Weight in pounds

Are there steps at the residence?  
☐ Yes ☒ No

If steps, how many steps?

Is there a ramp at the residence?  
☒ Yes ☐ No

If there is a ramp, where is it located?  
Back

**3.** If the Member's insurance allows it, and they wish to request mileage reimbursement, you can request it through TripCare by answering the pictured questions.

*Note: The first mileage reimbursement ride must be chatted or called in so Modivcare can set up the driver(s). Any subsequent ride can be scheduled with TripCare.*

Would you like to request mileage reimbursement? \*

Mileage Reimbursement Program \*  
GAS REIMBURSEMENT

Who will be driving the member? \*

Please verify the mailing address of the driver. If the mailing address is not correct or the driver is not listed here, contact your Modivcare Facility Line.

This member has no drivers.

**4.** Answer whether the Member can sign the driver's log.

Can member sign the driver's log? \*

☒ Yes ☐ No

**5.** Indicate whether any passengers are joining the Member.

*Note: The Member must provide their own car seat if a child aged 6 or under, or 60 pounds or less, is joining them.*

Additional Passengers

Personal Care Assistants	Adult Escorts	Children Escorts	Child Car Seats (Member Supplied)
0	0	1	1

## Step 4

*Note: This field is only visible if Forms are required by your market. If you have questions about Forms, please reach out to your Liaison/Healthcare Manager, as they are the expert in your market's operations.*

1. View the Forms already uploaded, and click Add a Form if a new/updated Form is needed.

<span>Approved</span> <span>Pending</span> <span>Denied</span>					
Form Type	Status	Level of Service	Start Date	End Date	Options
MNF - LOS	<span>Approved</span>	Ambulatory	2023-06-07	2023-09-07	
MNF - LOS	<span>Pending</span>	Wheelchair	2023-03-31	2023-06-30	
MNF - LOS	<span>Approved</span>	Wheelchair	2023-04-18	2023-07-18	
MNF - LOS	<span>Pending</span>	Wheelchair	2023-06-08	2023-09-08	
MNF - LOS	<span>Approved</span>	Wheelchair	2023-08-08	2024-02-06	

ADD A FORM

### Add Form

Form Type \*

MNF - LOS

a

Form \*

MT-AMB-AMAV MNF I 5.pdf

b

SELECT FILE

PDF, JPG or PNG files up to 1MB.

File Selected

Choose File

MT-AMB-AMAV MNF I 5.pdf

Level of Service \*

Wheelchair

c

Form Start Date \*

Aug 24, 2023

d

Form End Date

Aug 24, 2024

e

Notes

f

Max Characters: 80

Remaining: 80

REMOVE

g






2.

- Select the Form Type from the drop-down (available choices will vary by market).
- Use the Select File button to choose the form from your computer's file explorer.
- Choose the member's Level of Service (available choices will vary by market).
- Use the calendar icon to select the form start date.
- Use the calendar icon to select the form expiration date.
- Enter any optional notes.
- Use the Remove button if you no longer wish to attach the form to the trip request.






*Note: Once a Form is approved, it will automatically be added to every future Trip Request for the Member and will only need to be replaced if it expires.*

## Moving On

What do you want to do next?

				
Make this a round trip	Add new leg	Complete Trip Request	Cancel Leg	Cancel Trip Request

Click Make this a round trip to create a standard two-way trip.

	Use the Make this a round trip button to schedule a standard two-way trip.
	If you prefer to schedule a multi-leg trip, use the Add new leg button to add an additional stop after the appointment, such as a trip to the pharmacy.
	If you prefer a single leg trip, use the Complete Trip Request icon. <i>Note: This will drop the member off at their appointment without scheduling a pick-up.</i>
	For multi-leg trips, the Cancel Leg button allows you to cancel a single leg.
	To cancel the entire trip request, click on the Cancel Trip Request icon.

## Finishing Up

1. The Leg B information will automatically populate based on the details you entered for Leg A. Review it to ensure it is accurate.

**LEG B PICKUP**

Pickup Location \* Manual Entry

COAST DENTAL X

10950 SAN JOSE BLVD, JACKSONVILLE, FL 32223

**Additional Pickup Information**

Use main entrance

Max Characters: 80 Remaining: 63

<p>2. Enter a pick-up time. You can enter a specific time if you know when the appointment will end. If the amount takes an undefined amount of time, you can schedule the B Leg pick-up as a Will Call. To schedule a Will Call, toggle the button to Yes.</p> <p><i>Note: For Will Calls, Members will need to call Modivcare when their appointment is finished. It can take Modivcare up to 60 minutes to deploy a driver.</i></p>	<div><div><div>Pickup Time *</div><div>HH : MM AM PM</div><div>Will Call</div><div><div>NO</div><div>YES</div></div><div>This leg requires a pick up time</div></div><div><div>Will Call</div><div><div>NO</div><div>YES</div></div></div></div>
<p>3. Complete the Treating Doctor field. This is the only other field you must complete for the B-Leg.</p>	<div><div>Treating Doctor *</div><div>Dr. Nick Riviera</div></div>
<p>4. Click Complete Trip Request to finish the process.</p>	<div><div>What do you want to do next?</div><div><div><div>↺</div><div>Make this a round trip</div></div><div><div>+</div><div>Add new leg</div></div><div><div>✓</div><div>Complete Trip Request</div></div><div><div>✗</div><div>Cancel Leg</div></div><div><div>✗</div><div>Cancel Trip Request</div></div></div></div>
<p>5. You'll see a confirmation screen displaying the Trip Request information.</p>	<div><div>Summary for Trip Request with ID: 7267</div><div>--PENDING--</div><div>✓ Form submitted successfully.</div><div><div><div><div><div></div><div>D'EDRA PRIETO ESQUI</div><div>(44727-487696717-44)</div><div>Date of birth: 1957-01-22</div><div>Address: 542 Evergreen Ter Denver CO</div><div>Phone:</div><div>Email:</div><div>Insurance type: FL United MCD</div></div></div><div><div>REQUESTED BY:</div><div>Jill Kusa</div><div>(jill.kusa@modivcare.com)</div><div>Relationship to Member:</div><div>Licensed Clinical Social Worker</div></div><div><div>Information</div><div>Treatment Type:Dental</div><div>Level of Service:Wheelchair</div><div>Special Requests:</div><div>walker, Spanish speaker, immunocompromised, dog</div><div>Appointment Time:9:45 AM</div></div></div><div><div>A</div><div>Appointment Date &amp; Time: Aug 28, 2023 @ 9:45 AM</div><div>Requested Pickup: Aug 28, 2023 @ 9:30 AM</div></div></div></div>