

SUBJECT: NON-EMERGENCY MEDICAL TRANSPORT WHEELCHAIR/GURNEY
VAN PROVIDER'S PERMIT APPLICATION PROCESS

Date: 7/01/2015

- I. **Authority:** San Diego County Code of Regulatory Ordinances, Division 10, Chapter 3.
- II. **Purpose:** To establish the process by which agencies desiring to provide non-emergency medical transport wheelchair/gurney van services in San Diego County would obtain a Non-Emergency Medical Transport Service Provider's Permit.
- III. **Policy:** Any agency desiring to provide non-emergency medical transport service in San Diego County shall obtain a San Diego County Non-Emergency Medical Transport Provider's Permit as outline in the San Diego County Ambulance Ordinance #10274.
- A. Agencies who presently operate non-emergency medical transport services which are currently permitted by the Metropolitan Transit System (MTS), North County Transit District (NCTD), or any other municipality and are in compliance with the requirements of these agencies will be issued a San Diego County Non-Emergency Medical Transport Provider's Permit without further investigation or fee upon submission of a copy of a current certificate of compliance.
- B. Social service agencies who contract with any organization or entity that is permitted by entities defined in Section III A. shall be issued a San Diego County Non-Emergency Transport Provider's Permit without further investigation or fee.

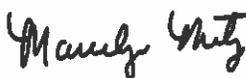
IV. **Procedure:**

Application Process, Non-Exempted Agencies By Endorsement of the MTDB Permit

- A. Submit a completed application which contains the following information:
1. Copy of completed and approved MTS paratransit application.
 2. Applicants name and business address.

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Approved:



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3. The name(s), under which the applicant has, does, or proposes to engage in non-emergency medical transport service.
 4. The name and addresses of the applicant, registered owner(s), partner(s), officer(s), director(s) and all shareholders who hold or control 10% or more of the stock of the applicant..
 5. A statement of fact and good faith from the principal owner.
 6. A Certificate of Consent to Self-Insure issued by the California State Director of Industrial Relations, or a Certificate of Worker's Compensation Insurance as required in Section 610.805..
 7. Proof of liability insurance as required in Section 610.804.
 8. A description of each gurney van and/or wheelchair van including the make, model, year of manufacturer, mileage and vehicle identification number.
 9. A description of the applicant's training and orientation programs for transport personnel, including proof of the ability to staff each non-emergency medical transport vehicle with persons possessing at minimum a current CPR completion certificate and an American Red Cross First Aid Certificate, or equivalent..
 10. An accompanying Permit fees pursuant to Section 610.601 of this Division.
 11. The applicant may be required to submit such other information as the Permit Officer deems necessary for determination of compliance with this Division..
- B. Permit by direct application to the County.
1. Completed County non-emergency vehicle permit application.
 2. (Refer to Section A. #2 through 11 above).

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3.

C. In addition to information required under Section A. #2 through 11, applicants will need to provide the following:

1. A statement of legal history, one each from the applicant, all registered owner(s), partner(s), officer(s), director(s), and controlling shareholder(s), including criminal convictions and civil judgments.
2. An application for a criminal history report, one each from the applicant, all registered owner(s), officer(s), director(s), controlling shareholder(s), including criminal convictions and civil judgment. Each application for criminal history report will be processed by the San Diego County Sheriff's Department. Each person required to submit an application for criminal history report will also be required to complete a Department of Justice fingerprint card.
3. A roster of all transport personnel that lists the type of expiration date of each person's standard first aid certification and each person's California driver's license number and expiration date.
4. The applicant shall allow the Permit Officer or his/her designee to inspect all vehicles to be used for non-emergency medical transport services.
5. Proof of financial viability with an ability to operate for a minimum of 6 months, with profit-loss information provided and proof of current tax payment status.
6. Proof of business license(s) for all areas and/or cities where applicant will operate.

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B. ..

D. Within thirty (30) days of receipt of an application, the Permit Officer will:

1. Make a determination regarding the issuance of the applied for permit.
2. Once application is accepted, schedule inspection and permitting of all service units.

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