



Department of Human Services  
Online Directives Information System

Index:  
Revised:  
Next Review:

MAN1425  
July 1, 2023  
July 1, 2025



# Georgia Department of Human Services

## Office of Facilities and Support Services - Transportation Services Section

### Coordinated Transportation System Transportation Manual

Index: MAN1425  
Revised: July 1, 2023  
Review: July 1, 2025

# DOCUMENT INFORMATION

<b>Version</b> 1.0	<b>Effective Date</b> July 1, 2023
<b>Issued By</b> Cheryl Herrington	<b>Last Reviewed</b> July 1, 2023
<b>Approvals: Perry McMillon</b>	<b>Next Review Scheduled</b> July 1, 2025

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*Use the [blue underlined links](#) embedded in the text to automatically navigate to the referred sections or exhibits within the document, or to outside webpage and documents.*

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# **CHAPTER 1**

## **COORDINATED TRANSPORTATION**

# INTRODUCTION

## Department of Human Services Mission

Strengthen Georgia by providing individuals and families access to services that promote self-sufficiency, independence, and protect Georgia's vulnerable children and adults.

## Vision

Stronger families for a stronger Georgia.

## Core Values

- Provide access to resources that offer support and empower Georgians and their families.
- Deliver services professionally and treat all clients with dignity and respect.
- Manage business operations effectively and efficiently by aligning resources across the agency.
- Promote accountability, transparency and quality in all services we deliver and programs we administer.
- Develop our employees at all levels of the agency.

It is the policy of the Georgia Department of Human Services (DHS) to provide quality and cost-effective transportation to eligible consumers to access Holman services and resources designed to enhance health, independence and self-sufficiency. Coordinated Transportation allows for greater access to human services for the elderly, the disabled, and those with limited transportation options, while encouraging a more efficient method of mobility. It eliminates duplicated transportation efforts and more effectively utilizes the available resources. Transportation services are designed, coordinated, and monitored through the Regional Transportation Office (RTO) staff assigned to each DHS region.

Coordinated Transportation serves DHS, which includes the Division of Aging Services (DAS), Division of Family and Children Services (DFCS), and Division of Child Support Services (DCSS). The Georgia Vocational Rehabilitation Agency (GVRA) and the Department of Behavioral Health and Developmental Disabilities (DBHDD) are also served by the DHS Coordinated Transportation System.

Ongoing success of Coordinated Transportation depends on the education and support of all partners. Support of Coordinated Transportation is paramount to achieving the overall goal of operating an efficient transportation system and departments. It is also essential that consistent information is shared, and participation exists throughout the network.

**Throughout this manual, the terms Transportation Provider (TP), contractor, and Prime Contractor are used interchangeably. Depending on the service area, a Prime Contractor may be the transportation provider, or the Prime Contractor may use Subcontractors to provide services.**

## 1. DHS Transportation Network Structure

Coordinated Transportation is administered through the DHS Office of Facilities and Support Services (OFSS), Transportation Services Section (TSS). Actual services are provided through contracted providers in each region. Contractors may be a state entity, county, regional government entity, private non-profit, or a for-profit vendor. TSS manages the transportation provider contracts and provides region and department level leadership in this effort.

TSS operates in each of the 12 DHS regions. District Operations Managers (DOM) oversee districts and provide oversight for each RTO and the counties within their service areas.

A Regional Coordinator (RC) and a Planner are assigned to one or more DHS regions. Through its regional staff, the TSS extends its program management and oversight to the local level and incorporates local input into the system design. The RTO, in

concert with a Regional Transportation Coordinating Committee (RTCC), is responsible for transportation planning.

## 2. Regional Transportation Coordinating Committee (RTCC)

The purpose of the RTCC is to provide local information, advice, direction, and support to the RTO. Members of the RTCC are responsible for keeping their respective networks informed. The RTO is responsible for educating the RTCC on Coordinated Transportation matters. At a minimum, a RTCC includes the following (or their designated representative) within each DHS region.

**A** - Indicates a person that is included in an advisory capacity for the group

**V** – Voting member; each member category is limited to a designated number of votes

**V\*** - Indicates an Invitee that cannot vote during the contract evaluation and renewal decision

Representatives	A Advisory	V Voting	V* (excluded from evaluation & renewal decisions)
<b>Division of Aging (DAS) (One voting member):</b>			
Aging Services Coordinator (A)	✓		
Regional Coordinator (V)		✓	
Program Manager (V)		✓	
Area Agency on Aging (AAA) Director (V)		✓	
<b>Division of Family and Children Services (DFCS) (Two voting members):</b>			
Provider Operations Coordinator (A)	✓		
OFI Regional/District Manager (V)		✓	
Resource Coordinator (V)		✓	
TANF Supervisor (V)		✓	
SNAP Supervisor (where applicable) (V)		✓	
<b>Department of Behavioral Health and Developmental Disabilities (DBHDD) (Two voting members):</b>			
Risk Management & Facilities Director (A)	✓		
Behavioral Health Regional Manager(s) (V)		✓	
Developmental Disabilities Regional Manager(s) (V)		✓	
ADA Contact at Regional or CSB Level (V)		✓	
Community Service Board Executive Director(s) (V)		✓	
<b>Georgia Vocational Rehabilitation Agency (GVRA) (One voting member):</b>			
Regional Manager (V)		✓	
Regional Contract Specialist (V)		✓	
Hub or Unit Managers (V)		✓	
<b>Regional Commissions</b>			

Representatives	A Advisory	V Voting	V* (excluded from evaluation & renewal decisions)
<b>(One voting member):</b>			
Executive Director (V*)			✓
Transit Planners (V*)			✓
Mobility Managers (V*)			✓
Contract Coordinators (V*)			✓
<b>Georgia Department of Transportation (GDOT)</b>			
<b>(One voting member):</b>			
Division of Intermodal, Rural Transit Group Leader (A)	✓		
District Transit Managers (V)		✓	
Regional Transit Managers (A)	✓		
<b>Other:</b>			
TSS Regional Office Staff (V)		✓	
TSS District Operations Manager (A)	✓		
TSS Atlanta staff (A)	✓		
Metropolitan Planning Organization (MPO) representatives (A)	✓		
Transportation Providers/Contractors (V*)			✓

If a member of the RTCC chooses to appoint other staff to represent his/her organization on the RTCC, the appointed representative is responsible for keeping the RTCC member informed.

**Any member representing an organization that is directly involved with a contracted interest is subject to disqualification from serving on the RTCC as a voting member.**

The RTO staff convenes, facilitates, and records meetings of the RTCC. RTCC meetings are held a minimum of three times per year in each region and conducted using a common agenda. The agenda may be expanded to include district and regionally pertinent items. Meeting minutes are distributed to the RTCC members after each meeting. A record of attendance and non-attendance will be maintained by the RTO. The RTO will submit a Non-Attendance list to the TSS Section Manager and the State Operations Managers after the final RTCC meeting.

RTCCs may establish advisory level committees for the purpose of providing advice and opinions on transportation issues. The committees may meet routinely to discuss implementation and operational concerns and report concerns to the RTCC. The TPs, Prime Contractor(s) and/or Subcontractor(s), at the discretion of the advisory committee, may be expected to attend advisory committee meetings to provide input and updates.

# A. CONTRACTOR LIFECYCLE

## 1. How Contractors Are Selected

The Department of Human Services (DHS) seeks to obtain the services of qualified transportation providers with demonstrated knowledge, experience, competence, resources, and familiarity with agency consumers. Contracts for DHS Coordinated Transportation services are established in one of two ways:

### a) Contractor Selection – Competitive Selection via eRFP Process

For a new contract that is not considered exempt, Transportation Providers (TP) should follow the competitive bid process. The type of entity providing the services dictates what process is used to obtain the services. If the entity falls within one of the exempt categories, the competitive bid process is not necessary. TPs following a contract renewal process or intergovernmental agreements (government entities, non-profits, and quasi-governmental entities) are exempt from the eRFP process and should follow the process below in the [Contractor Selection – Renewals and Intergovernmental Agreements](#) section.

The Georgia Department of Administrative Services, State Purchasing Division (DOAS-SPD) governs the purchasing and procurement activities of all state government agencies. This authority is pursuant to the State Purchasing Act. The pertinent laws that govern State purchases are generally set forth in the **Official Code of Georgia Annotated (O.C.G.A.), Section 50-5-50 through Section 50-5-81**. The DOAS-SPD website at <https://doas.ga.gov/> contains a link to search all Georgia laws and regulations including specific purchasing-related codes.

DHS Office of Procurement and Contracts issues an Electronic Request for Proposals (eRFP) on behalf of DHS Office of Procurement and Contracts (OPC) and the Transportation Services Section (TSS).

For all contracts established through an eRFP, the award is made to the offeror submitting the proposal that is most advantageous to the State and provides the best overall value to the State. Detailed information about the State's purchasing process can be found in the **Georgia Procurement Manual (GPM)**. This manual can be obtained by visiting <https://doas.ga.gov/> and searching for *Georgia Procurement Manual*.

The process to issue an eRFP is described in the following process flow. TSS provides the information regarding needed services to DHS-OPC, who in turn works with DOAS to issue the eRFP. The eRFP is then handled by DOAS until an award is made.

### (i) Roles and Responsibilities Overview

Role	Responsibility
Transportation Provider (TP)	<ul style="list-style-type: none"><li>Preparing, responding, and if applicable signing a contract.</li></ul>

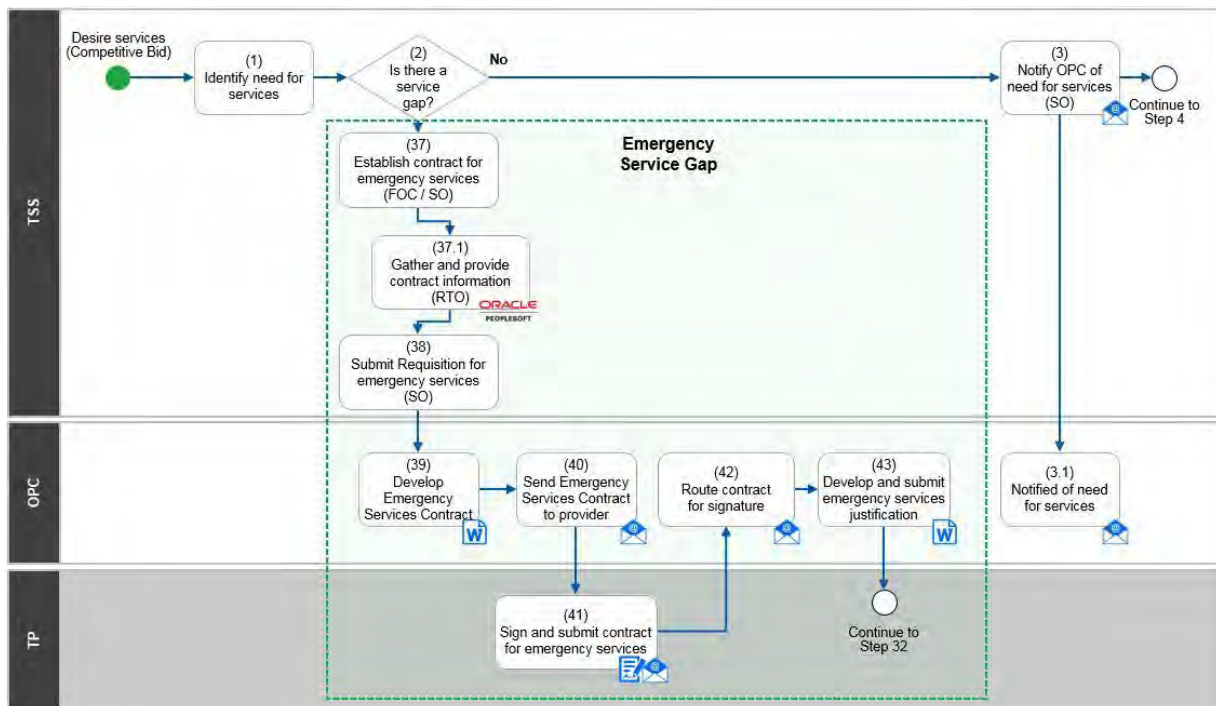
Role	Responsibility
DHS Transportation Services Section (TSS)	<ul style="list-style-type: none"> <li>Preparing, evaluating, selecting, and completing administrative activities for adding a TP.</li> </ul>
DHS Office of Procurement and Contracts (OPC)/ Issuing Officer	<ul style="list-style-type: none"> <li>Issuing, reviewing, evaluating qualified vendors, developing contract, and completing administrative activities for adding a TP.</li> </ul>

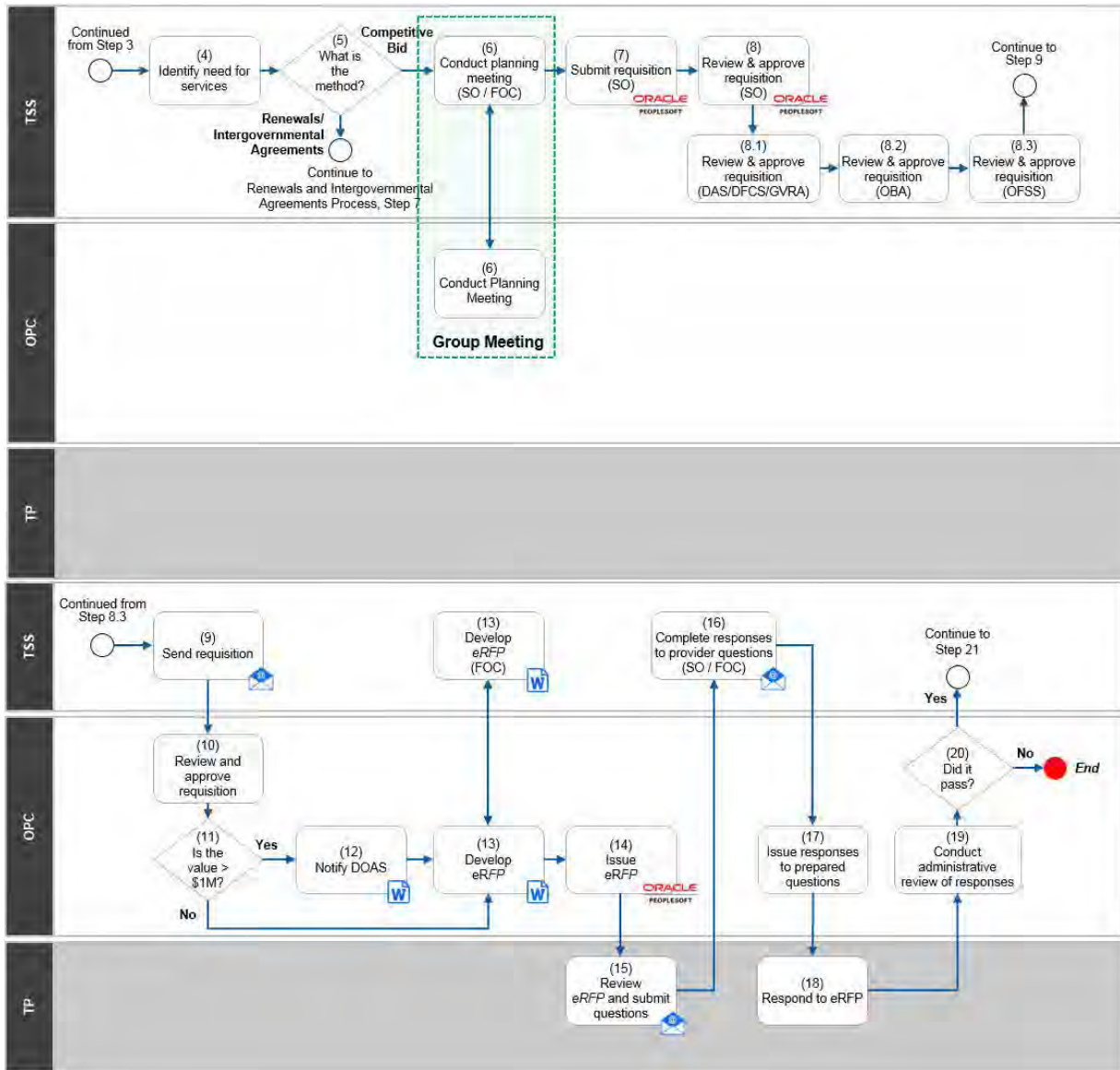
**(ii) Application(s)**

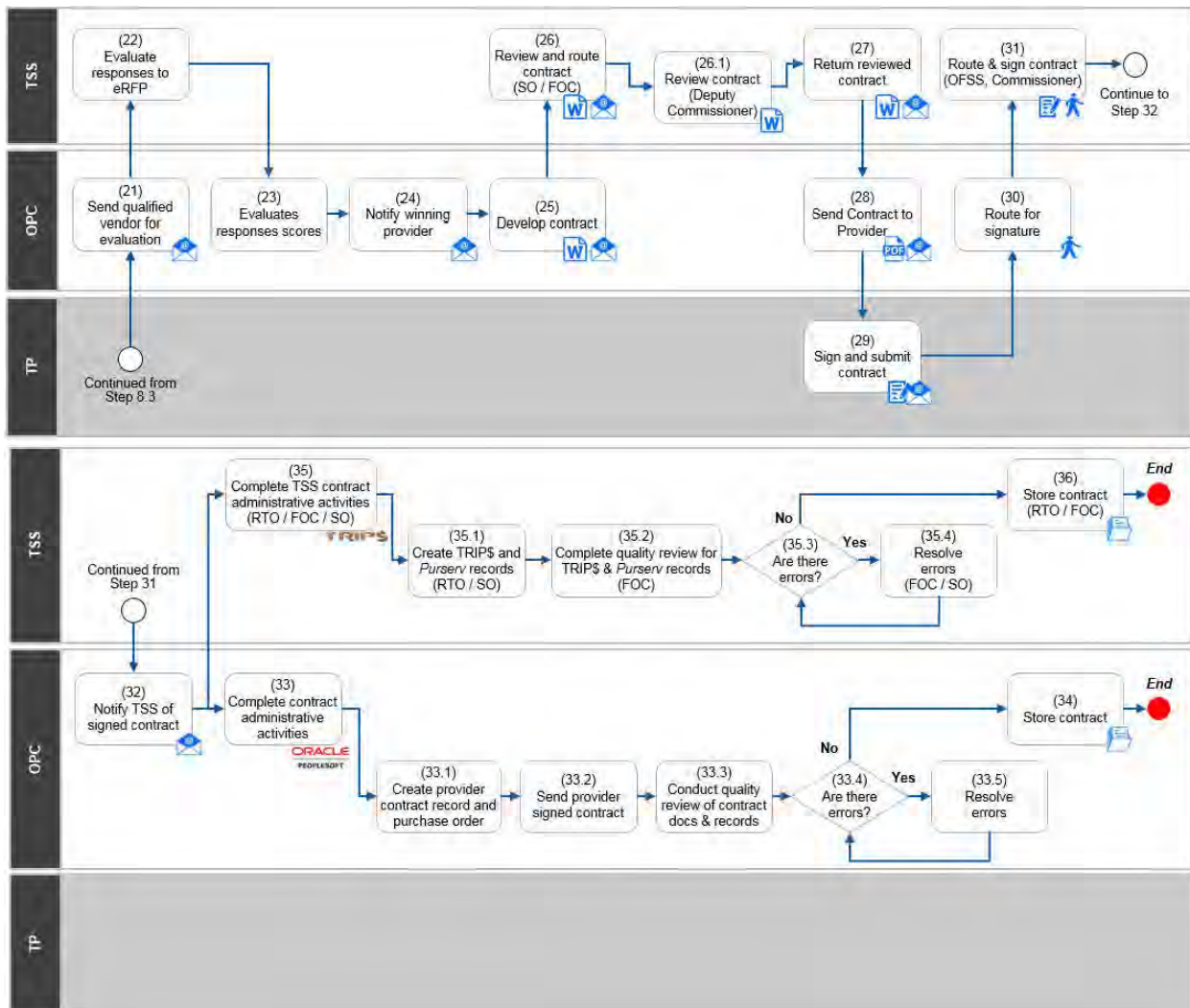
Application	Description
Team Georgia Marketplace	The online procurement marketplace for competitive procurements sought by State of Georgia entities. It provides the online tools, resources, and access vendors need to find, review, and bid on active procurements.

**(iii) Process Flow – Contractor Selection – Competitive Selection via eRFP**

The following process flow illustration depicts the full Contractor Selection process from the point that a need for services by a transportation provider is identified, through contractor selection, to the point that a contractor initiates transportation services under a new contract. This process flow shows each responsible party and its steps throughout the process. The highlighted area depicts the TP role within the process. The TP specific steps are described below the process flow.







**(iv) Procedures – Contractor Selection – Competitive Selection via eRFP**

The procedural steps and details outlined below are those that are the responsibility of the TP and correspond with the steps highlighted in the process flow above. The following is to be used if the TP is responding to a competitive procurement.

**Steps 1-14 – (TSS and OPC)**

TSS and OPC focus on determining whether a service gap exists. If so, an accelerated process is detailed later in this section; the TP continues to Step 41. If not, both TSS and OPC identify the method to secure a contract, conduct planning, prepare and route the requisition for approval followed by developing and issuing the eRFP.

**Step 15 – Review eRFP and submit questions (TP)**

All competitive procurements are issued through Team Georgia Marketplace. Transportation providers who wish to bid should log in using their unique Team Georgia Marketplace credentials to access, review, and respond to any eRFP issued. All questions concerning this eRFP must be submitted in writing via email to the Issuing Officer identified in Section 1.5 “Issuing Officer” of this eRFP. No questions other than written are accepted. No response other than written are binding upon the State. All TPs



must submit questions by the deadline identified in the Schedule of Events for submitting questions. DHS reviews all questions submitted by vendors and post responses to Written Questions by date indicated in the Schedule of Events. A Schedule of Events is included in all eRFPs.

**Steps 16-17 – (TSS and District Operations Manager (DOM))**

All questions concerning this eRFP must be submitted in writing via email to the Issuing Officer identified in Section 1.5 titled “Issuing Officer” in the eRFP. DHS reviews all questions submitted by vendors and post responses to Written Questions by the date indicated in the Schedule of Events.

The questions submitted by the TP and collected by TSS are reviewed and responses are prepared and provided back to the TP.

**Step 18 – Respond to eRFP (TP)**

All competitive procurements are issued through the Team Georgia Marketplace. TPs (aka. “Supplier” in OPC terms) who wish to bid should log in Team Georgia Marketplace to access, review, and respond to any eRFP issued.

**For technical questions related to the use of Team Georgia Marketplace, Suppliers have access to phone support through the DOAS Customer Service Help Desk:**

**DOAS Customer Service Help Desk  
Phone: 404-657-6000  
ProcurementHelp@doas.ga.gov  
Monday through Friday, 8:00 AM to 5:00 PM**

Note:

The duration of procurements varies greatly. In general, a competitive procurement takes approximately 180 days from issuance of an eRFP to Award.

**Steps 19-28 – (TSS and OPC)**

As a preliminary step in the evaluation process, DHS OPC (Issuing Officer) completes an administrative review of each supplier’s response. All responses which pass the administrative review are evaluated by the Evaluation Committee.

Award is made to the responsive and responsible supplier with the best overall score or value. This is the supplier who received the highest combined technical and cost scores, who agrees to contract terms and conditions with the state entity, and who is clearly capable of performing the resulting contract.

**Step 29 – Sign and submit contract (TP)**

For each contract awarded, the contract is developed and routed through DHS internal process for approval to send to the supplier. OPC sends the executable contract by email to the TP for signature and provides instructions of the days expected for return, to whom the contract should be returned, and whether an original copy is required.

The TP reviews the contract. If no corrections are needed, the TP prints the document (one-sided only), signs all pages requiring signatures, including any applicable annexes, and returns the contract to DHS for signature. For instructions on submitting the contract to DHS, follow the instructions given by the issuing officer.

**Steps 30-36 – (TSS and OPC)**

Prior to DHS signing the contract, the Notice of Intent to Award ([Exhibit 1 – Sample Notice of Intent to Contract](#)) is posted for 10 days. During this time suppliers have an opportunity to protest the award. In case of a protest, the process **STOPS** until OPC

determines a resolution. If there is no protest, DHS proceeds with getting the appropriate signatures for the Department.

Once the contract is fully executed, the PDF is emailed by OPC. It details the DHS contract number to be used to submit payment requests and programmatic reports, as well as other contract-related activity.

Following this series of steps, both TSS and OPC complete internal contract administrative tasks to include adding the contract information in statewide applications and storing original documents.

#### **(v) Procedures – Contractor Selection – Competitive Selection via eRFP – Emergency Service Gap**

If there is a need for an emergency purchase, TSS follows an accelerated process to fill an emergency service gap. DHS OPC completing a contract for emergency services shall follow the “special circumstances” and is responsible for the following activity:

##### **Steps 37- 40 – (TSS and OPC)**

Emergency purchases are an exception to the Order of Precedence. An emergency procurement is handled outside of the normal competitive process for purchases greater than \$24,999.99 because of the urgency of the circumstances, such as the immediate welfare of the general public.

Poor planning or the pending expiration of funds does not constitute a valid justification for an emergency purchase. It is always good business practice and considered to be in the best interest of the State to make any procurement as competitive as time permits. The state entity is authorized to handle the emergency purchase whether or not the dollar amount of the emergency purchase falls within the state entity’s delegated purchasing authority.

In the event of an emergency purchase, the Agency Procurement Officer provides the DOAS-SPD with written notice and justification by completing form SPD-NI004 Emergency Justification Form, which can be found on the [www.doas.ga.gov](http://www.doas.ga.gov) website and searching for the terms *SPD-NI004*.

##### **Step 41 – Sign and submit contract for emergency services (TP)**

OPC sends the emergency executable contract by email to the TP for signature and provide instructions of the days expected for return, to whom the contract should be returned, and whether an original copy is required.

The TP must attach the completed Emergency Justification Form (from Step 40) at the header level of the Purchase Order in the system as well as other pertinent documentation relating to the emergency purchase.

If no corrections are needed, the TP prints the document (one-sided only) and signs all pages requiring signatures, including any applicable annexes. The TP returns the document to the contact provided in the email either as a PDF attachment in an email, by mail or hand delivered at the address indicated in the email from OPC within five business days.

TPs who require a copy of the contract with original signature from all parties must sign and send two copies of the contract and mail or hand deliver to the contact in the email within five business days. Unless two copies are signed and sent, only a PDF of the fully executed contract is emailed back to the TP by OPC.

Once the contract is fully executed, the PDF is emailed to the TP by OPC. It details the DHS contract number to be used to submit payment requests and programmatic reports, as well as other contract-related activity.

### Steps 42-43 – (OPC)

OPC routes the contract for signature and develops the emergency justification documentation. In addition, OPC notifies TSS and both entities complete contract administrative activities, including adding the contract information in statewide applications and storing the original documents.

### (vi) References and Related Documents

Document	Description
<b>Georgia Procurement Manual (GPM)</b>	This manual can be obtained by visiting <a href="https://doas.ga.gov/">https://doas.ga.gov/</a> and searching for <i>Georgia Procurement Manual</i> .
<a href="#">Exhibit 1 – Sample Notice of Intent to Contract</a>	Letter issued by DOAS notifying the supplier of the intent to award the contract to this supplier.
<b>SPD-NI004 Emergency Justification Form</b>	Form for documenting reasons for emergency procurements. Can be found on the DOAS website at <a href="http://www.doas.ga.gov">www.doas.ga.gov</a> and searching for the terms <i>Emergency Justification Form</i> .

### b) Contractor Selection – Renewals and Intergovernmental Agreements

TPs following the contract renewal process or intergovernmental agreements (government entities, non-profits, and quasi-governmental entities) fulfilling a contract should follow the steps below. TPs applying for a new contract should follow the competitive selection process above in the [Contractor Selection – Competitive Selection via eRFP Process](#) section.

The State of Georgia operates on a fiscal year of July 1 – June 30. The State may only enter contractual obligations one fiscal year at a time and therefore, multi-year obligations are not permissible. The annual renewal of a contract shall be based on the availability of funds and the contractor's successful performance the preceding year. Renewals are contingent upon the Prime Contractor's completion of renewal criteria, including but not limited to: updated proposal information, cost analysis information, favorable evaluations from the consumers, centers and/or programs served, and approval for renewal by the Regional Transportation Coordinating Committee (RTCC). If approved for renewal, a Prime Contractor that was selected through the Contractor Selection via eRFP process may renew its contract up to four times (must be consecutive) for a total of a five years of consecutive engagement prior to the contract automatically going back to bid in the Contractor Selection via eRFP process. Refer to the [Contractor Annual Renewal Review Process](#) section in this chapter for more information.

If circumstances warrant contract renewal, DHS issues a letter to the Prime Contractor stating DHS's desire to renew the contract. The letter provides the terms and conditions of the offer to contract and request a cost proposal and technical proposal. DHS receives a letter of intent to contract from the desired contractor at least 90 calendar days prior to the effective date of the proposed contract. This time frame is necessary to allow sufficient time to send out a new solicitation for proposals in the event the desired contractor is not willing to contract under the terms offered by DHS. If the letter of intent is not received within the specified time frame, DHS will seek approval from OPC to issue a request for proposal.

DHS has the discretion to enter into an intergovernmental agreement if the services to be acquired are available from that source. DHS requires that, to the maximum extent feasible, TPs be given the fair and timely opportunity to participate in local transportation plans and programs, and to offer their own service proposals for consideration.

**(i) Roles and Responsibilities Overview**

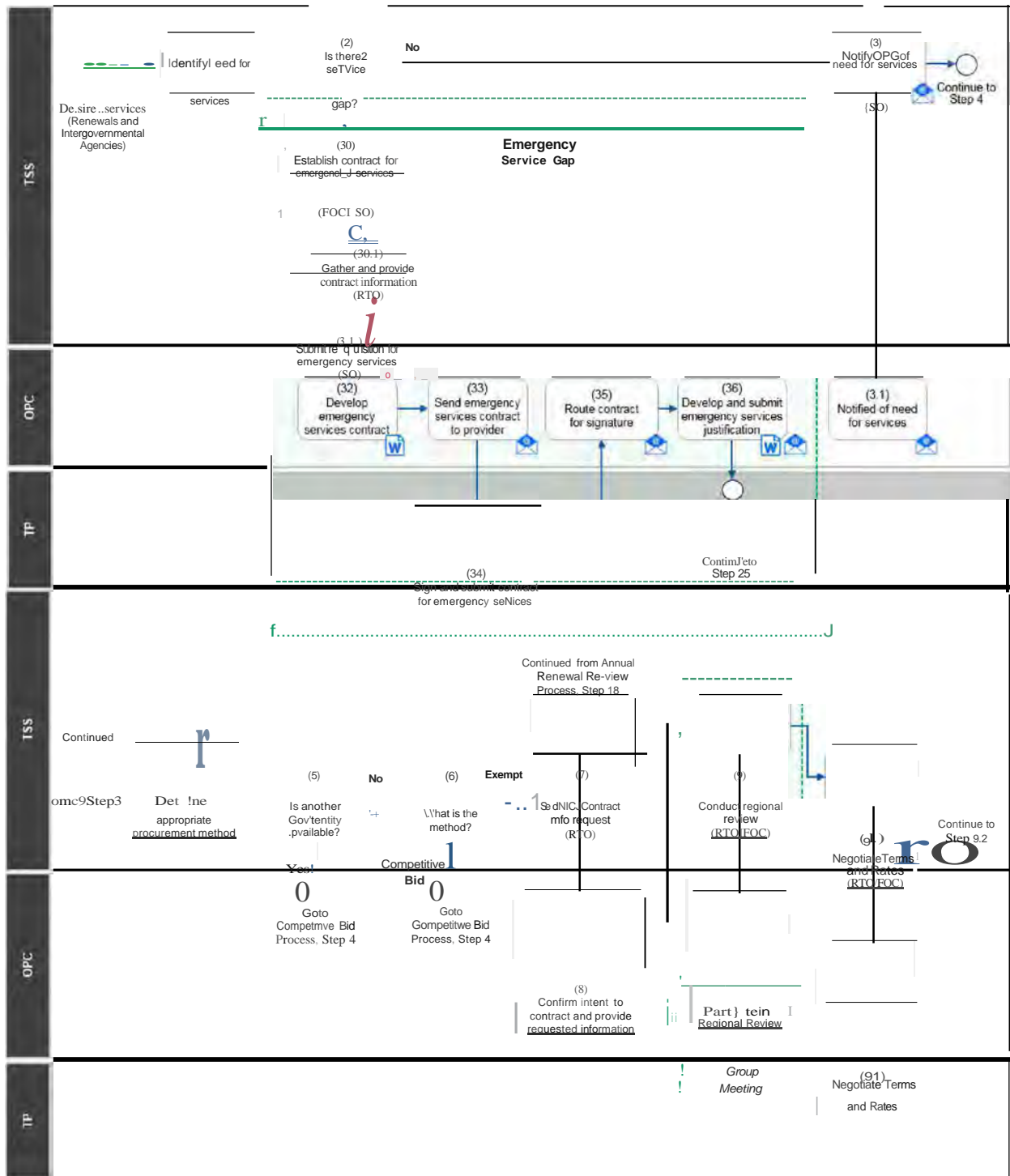
Role	Responsibility
<b>Transportation Provider (TP)</b>	<ul style="list-style-type: none"> <li>Preparing, responding, and if applicable, signing a contract.</li> </ul>
<b>DHS Transportation Services Section (TSS)</b>	<ul style="list-style-type: none"> <li>Preparing, evaluating, selecting, and completing administrative activities for adding a TP.</li> </ul>
<b>DHS Office of Procurement and Contracts (OPC)</b>	<ul style="list-style-type: none"> <li>Issuing, reviewing, evaluating qualified vendors, developing contract, and completing administrative activities for adding a TP.</li> </ul>

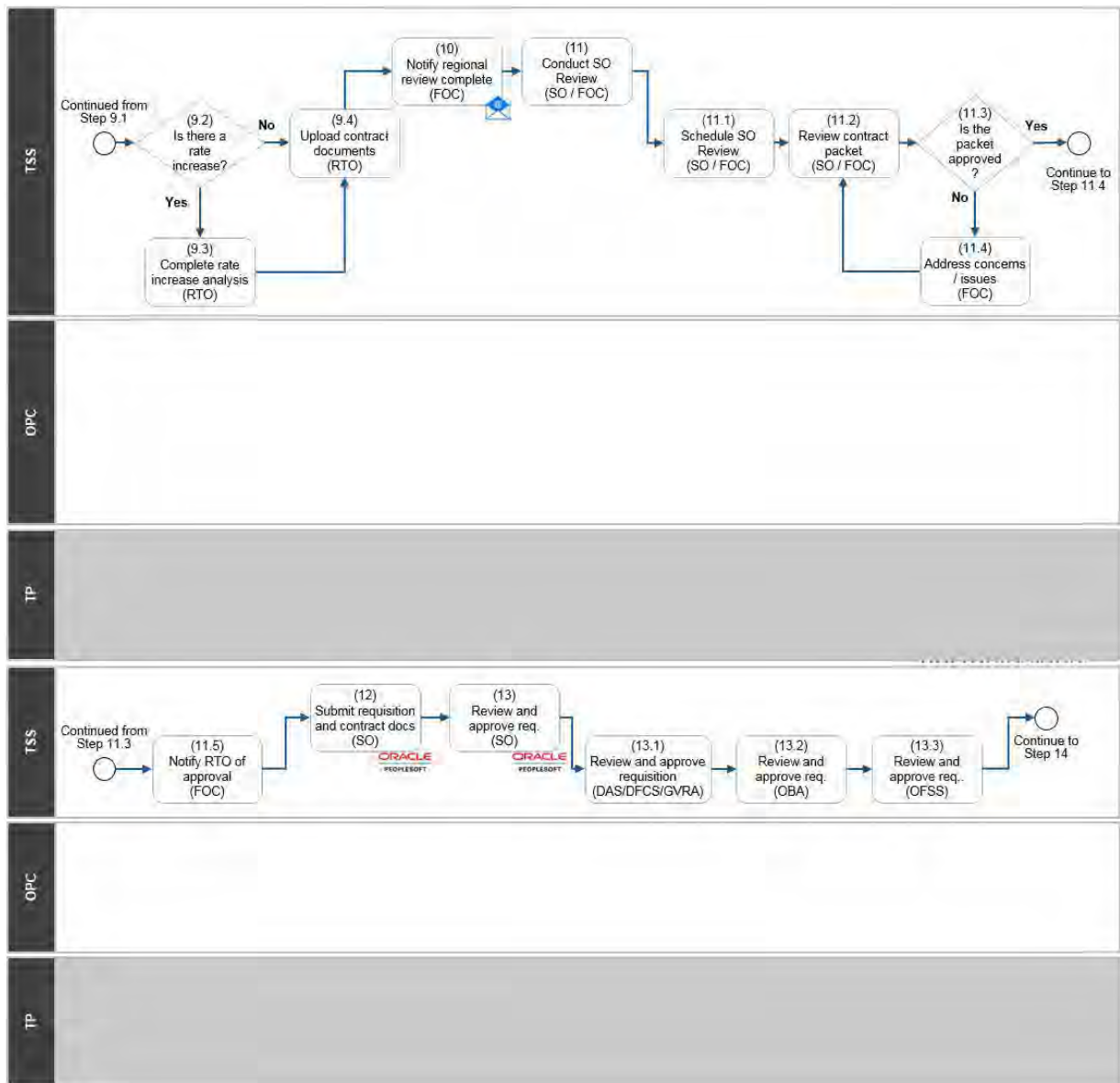
**(ii) Application(s)**

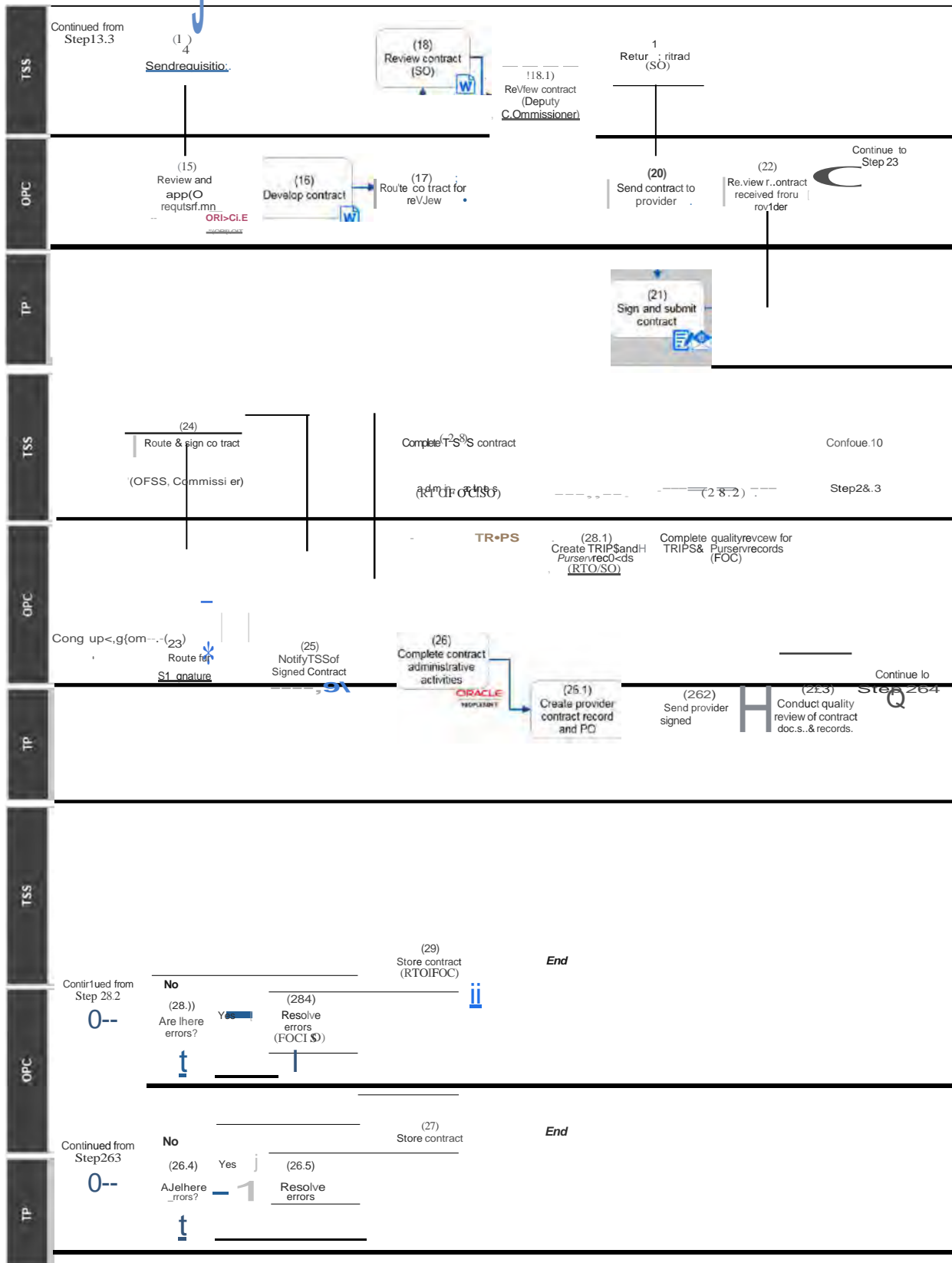
Application	Description
<b>Team Georgia Marketplace</b>	The online procurement marketplace for competitive procurements sought by State of Georgia entities. It provides the online tools, resources and access vendors need to find, review, and bid on active procurements.

**(iii) Process Flow – Contractor Selection – Renewals and Intergovernmental Agreements Process**

The following process flow illustration depicts the full Contractor Selection process from the point that a need for services by a transportation provider is identified, through contractor selection, to the point that a contractor initiates transportation services under a new contract. This process flow shows each responsible party and its steps throughout the process. The highlighted area depicts the TP role within the process. The TP specific steps are described below the process flow.







#### **(iv) Procedures – Contractor Selection – Renewals and Intergovernmental Agreements Process**

The procedural steps and details outlined below are those that are the responsibility of the TP and correspond to the steps highlighted in the process flow above. The following is to be used if the TP is responding to an exempt procurement.

##### **Steps 1-7 – (TSS and OPC)**

TSS and OPC focus on whether there is a service gap. If so, an accelerated process is detailed later in this section; the TP continues to Step 41. If not, both TSS and DHS Procurement partner to determine the appropriate procurement method. TSS and DHS Procurement send the notice of intent to contract request to the TP.

##### **Step 8 – Confirm intent to contract and provide requested information (TP)**

Once an interested TP receives a Notice of Intent to Contract (NOIC) (refer to [Exhibit 1 – Sample Notice of Intent to Contract](#)), or a Contract Information Request Packet, from TSS, the TP must confirm its intent to contract and provide the requested information within 60 days of receipt. This is not the actual contract but the required documents listed in the contract coversheet. These documents require original signature from the TP. Both the confirmation of intent to contract and the requested information should be sent to the designated TSS and Regional Transportation Office (RTO).

##### **Step 9 – Participate in Regional Review (TP)**

This step is the annual evaluation process for the TP and/or Subcontractors only in the case of poor evaluations and the need for a Corrective Action Plan (CAP). TPs entering an exempt contract may be asked to participate in a Regional Review prior to negotiating terms and rates for the contract. This entails responding to any issues in a CAP, as needed. During this meeting, the TP completes the annual contract renewal documents and respond to any issues in a CAP, if applicable, as needed.

###### **9.1 – Negotiate terms and rates**

TPs submit annual cost and budget reports that are used by TSS, in coordination with other tools such as rate history reports and comparisons to similar transportation providers, to determine the validity of proposed per unit costs for each trip type.

##### **Steps 9.2 – 20 – (TSS and OPC)**

The Prime Contractor and/or Subcontractor determine their cost of doing business, which is then divided by the expected number of trips as issued by the RTO and used to determine cost(s) per trip. The TP submits a Cost Proposal to the RTO along with Cost and Budget Reports that detail costs that contribute to the trip rate(s). The information is reviewed by TSS, and negotiations are conducted with the TP, ending with a Rate Schedule that reflects the approved contracted rates. Next steps include gathering contract documents, entering the requisition in the financial system, and receiving approvals of the contract requisition. Finally, the contract is prepared, reviewed, and released to the TP.

##### **Step 21 – Sign and submit contract (TP)**

For each contract awarded, the contract is developed and routed through DHS internal process for approval to send to Supplier. OPC sends the executable contract by email to the TP for signature and provides instructions of the days expected for return, to whom the contract should be returned, and whether an original copy is required.

The TP reviews the contract. If no corrections are needed, the TP prints the document (one-sided only), signs all pages requiring signatures, including any applicable Annexes,



and returns the contract to DHS for signature. For instructions on submitting the contract to DHS, follow the instructions given by the Issuing Officer.

#### **Steps 22-29 – (TSS and OPC)**

Once the contract is fully executed, the PDF is emailed to the TP by OPC. It details the DHS contract number to be used to submit payment requests and programmatic reports, as well as other contract-related activity.

Both TSS and OPC complete internal contract administrative tasks, including adding the contract information in statewide applications and storing the original documents.

#### **(v) Procedures – Contractor Selection – Renewals and Intergovernmental Agreements Process – Emergency Service Gap**

If there is a need for an emergency purchase, TSS follows an accelerated process to fill an emergency service gap. DHS OPC completing a contract for emergency services shall follow the “special circumstances” and is responsible for the following activity:

#### **Steps 30-33 - (TSS and OPC)**

Emergency purchases are an exception to the Order of Precedence. An emergency procurement is handled outside of the normal competitive process for purchases greater than \$24,999.99 because of the urgency of the circumstances, such as the immediate welfare of the general public.

Poor planning or the pending expiration of funds does not constitute a valid justification for an emergency purchase. It is always good business practice and considered to be in the best interest of the state of Georgia to make any procurement as competitive as time permits. The state entity is authorized to handle the emergency purchase whether or not the dollar amount of the emergency purchase falls within the state entity’s delegated purchasing authority.

In the event of an emergency purchase, the Agency Procurement Officer provides the DOAS-SPD with written notice and justification by completing form SPD-NI004 Emergency Justification Form, which can be found on the [www.doas.ga.gov](http://www.doas.ga.gov) website and searching for the terms *SPD-NI004*.

#### **Step 34 – Sign and submit contract for emergency services (TP)**

OPC sends the emergency executable contract by email to the TP for signature and provide instructions of the days expected for return, to whom the contract should be returned, and whether an original copy is required.

The TP must attach the completed Emergency Justification Form (from Step 33) at the header level of the PO in the system as well as other pertinent documentation relating to the emergency purchase.

If no corrections are needed, the TP prints the document (one-sided only) and signs all pages requiring signatures, including any applicable Annexes. The TP returns the document to the contact provided in the email either as a PDF attachment in an email, or by mail or hand delivered at the address indicated in the email from OPC within 5 business days.

Ts who require a copy of the contract with original signature from all parties must sign and send 2 copies of the contract and mail or hand deliver to the contact in the email within 5 business days. Unless 2 copies are signed and sent, only a PDF of the fully executed contract is emailed back to the TP by OPC.

Once the contract is fully executed, the PDF is emailed by OPC. It details the DHS contract number to be used to submit payment requests and programmatic reports, as well as other contract-related activity.

**Steps 35-36– (OPC)**

OPC routes the contract for signature and develops the emergency justification documentation. In addition, OPC notifies TSS and both entities complete contract administrative activities, including adding the contract information in statewide applications and storing the original documents.

**(vi) References and Related Documents**

Document	Description
<b>Georgia Procurement Manual (GPM)</b>	This manual can be obtained by visiting <a href="http://doas.ga.gov/">http://doas.ga.gov/</a> and searching for <i>Georgia Procurement Manual</i> .
<a href="#">Exhibit 1 – Sample Notice of Intent to Contract</a>	Letter issued by DOAS notifying the supplier of the intent to award the contract to this supplier.
<b>SPD-NI004 Emergency Justification Form</b>	Form for documenting reasons for emergency procurements. Can be found on the DOAS website at <a href="http://www.doas.ga.gov">www.doas.ga.gov</a> and searching for the terms <i>Emergency Justification Form</i> .

**2. Contractor Monitoring and Evaluation**

The contractor evaluation process includes the RTO contractor monitoring, as well as the results of interviews, group meetings, surveys, paperwork submission, contractor review, vehicle inspections, and the ability of the service to meet DHS transportation needs.

The RTO monitors to ensure the TP’s compliance with DHS policies, procedures, and contracts, which define transportation program services and operations. Monitoring may be accomplished through site visits directly to TPs or through visits to the Prime Contractor when direct services are provided through subcontracts. All monitoring is summarized and reported annually; this summary is used by the RTCC in developing contracting recommendations and by DHS in making contract renewal decisions.

**a) Roles and Responsibilities Overview**

Role	Responsibility
<b>Transportation Provider (TP) / Prime and Subcontractor</b>	<ul style="list-style-type: none"> <li>Reviewing report card and completing corrective action. Executing termination process, if applicable.</li> </ul>
<b>Regional Transportation Office (RTO)</b>	<ul style="list-style-type: none"> <li>Gathering, summarizing and issuing report card and managing corrective action activities.</li> </ul>
<b>Transportation Services Section State Office (TSS-SO)</b>	<ul style="list-style-type: none"> <li>Assisting RTO in managing corrective actions.</li> </ul>

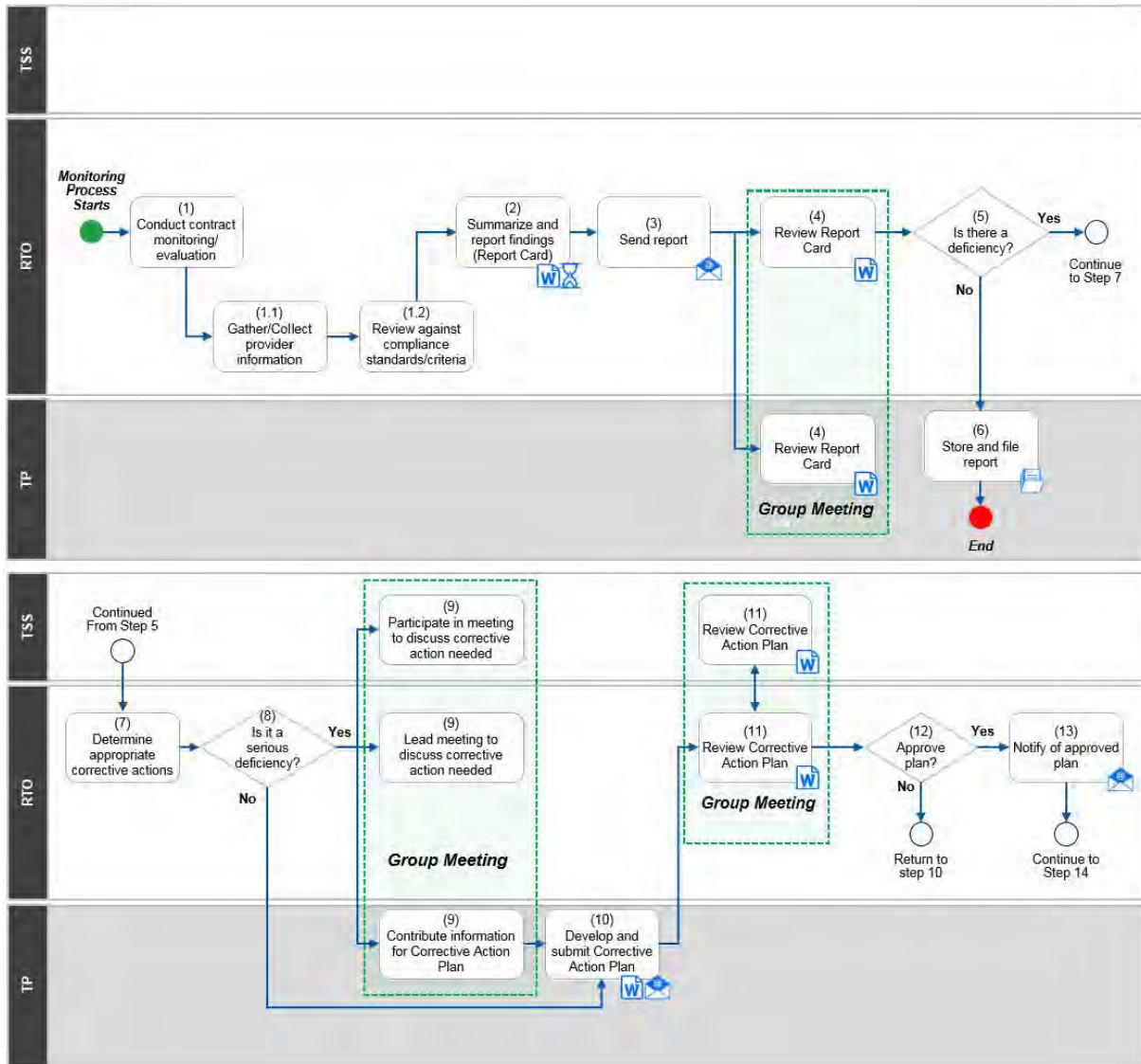
**b) Applications**

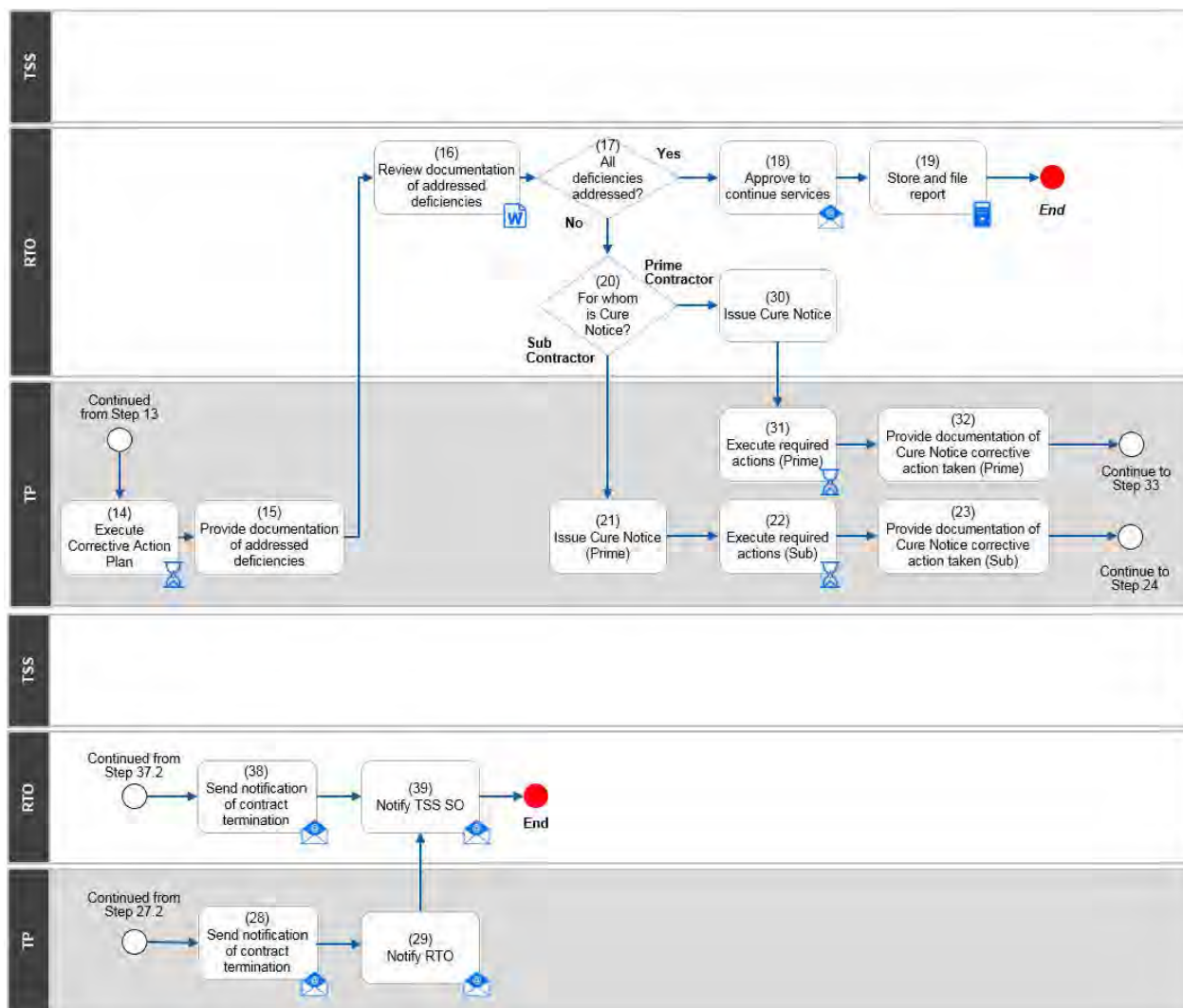
Application	Description
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<b>TRIP\$</b>	Transportation Request Information Processing System, the application for client registration and trip ordering
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### c) Process Flow – Contractor Monitoring and Evaluation

The following process flow illustration depicts the full Contractor Monitoring and Evaluation process from the point that a TP/Subcontractor receives a quarterly Report Card from the RTO to the point that any identified deficiencies are successfully resolved. It also covers Cure Notices and provider termination, when necessary. This process flow shows each responsible party and its steps throughout the process. The highlighted area(s) in the process flow depict the TP/Subcontractor role within the process. The TP/Subcontractor specific steps are described after the process flow.





### d) Procedures – Contractor Monitoring and Evaluation

The procedural steps and details outlined below are those that are the responsibility of the Prime Contractor or Subcontractor and correspond to the steps highlighted in yellow in the process flow above.

#### Steps 1-3 – (RTO)

The RTO gathers/collects information throughout the contract period and reviews the TP performance against compliance and risk standards. The RTO issues a quarterly report card to detail the TP/Subcontractor performance and track if transportation providers are meeting contractual obligations. TP/Subcontractor’s data is collected throughout a TP/Subcontractor’s contract period, and includes consumer and Human Service Provider (HSP) prior year surveys (see [Exhibit 2 – Sample FY20XX Evaluation Summary - Consumers](#) and [Exhibit 3 – Sample HSP Satisfaction Survey Summary](#)), vehicle and driver inspection reviews and site visits, regular meetings and communications, complaints, incident reports, financial data, and timely and accurate execution of administrative tasks (e.g. invoicing, reporting). Each quarter, data gathered during the period is evaluated by the RTO and documented in a TP Report Card to be reviewed by

the TP and District Operations Manager (DOM) (refer to [Exhibit 4 – Sample Quarterly Report Card](#)).

**Step 4 – Review Report Card (TP)**

TPs carefully review this Quarterly Report Card and share with applicable Subcontractors. If any corrective action is needed, improvement needs are clearly outlined in the [Exhibit 5 – Sample Corrective Action Plan](#). Any improvement needs, or corrective action, are discussed in a follow up meeting with the RTO (see Step 11).

**Step 5 – Is there a deficiency? (RTO)**

The RTO reviews the Report Card and makes a determination of whether there is a noted deficiency. If there is not a deficiency, continue to Step 6; otherwise, continue to Step 7.

**Step 6 – Store and file report (TP / Subcontractor)**

If all contractual criteria are met and no deficiencies are noted in the quarterly Report Card, no additional action is taken by TSS and no additional action is required of the TP; the TP can simply file the report for its own records.

**Step 7-8 – (RTO)**

The RTO makes a determination of the severity of the corrective actions required of the TP. If the corrective actions are not serious, the TP is asked to develop and submit a CAP. If the corrective action is serious, a meeting among the TSS-SO, RTO, and TP is requested.

**Step 9 – Contribute information for Corrective Action Plan (CAP) (TP, RTO, and TSS)**

TSS, RTO and TP meet to discuss discrepancies and any corrective action needed. In this meeting, the RTO and DOM review the TP's proposed CAP, with the DOM providing recommendations for necessary updates or approval of the plan. If only minor deficiencies are noted, the TP moves to Step 10.

**Step 10 – Develop and submit Corrective Action Plan (CAP) (TP)**

TPs develop a CAP to address any deficiencies outlined in the quarterly Report Card and return the completed CAP to the RTO, who will share with the DOM as needed.

**Step 11-13 (TSS and RTO)**

The TSS Section Manager (TSS-SM) and DOM hold a group meeting to review the CAP and makes a determination on whether to approve or not. If the plan is approved, the RTO notifies the TP to execute the CAP. If the plan is not approved, it is routed back to the TP to revise and resubmit the CAP.

**Step 14 – Execute Corrective Action Plan (TP)**

Once the proposed CAP is approved, TPs have 60-90 days, as determined by the RTO depending on the severity, to complete the CAP. This step, and the following, continue until all deficiencies have been satisfactorily resolved.

**Step 15 – Provide documentation of addressed deficiencies (TP)**

Once the CAP has been executed and all deficiencies rectified, TPs provides documentation of addressed deficiencies to the RTO. This step, and the previous, continue until all deficiencies have been satisfactorily resolved.

**Steps 16-20 – (RTO)**

The RTO reviews the documentation of addressed deficiencies and makes a determination on whether the corrective actions have been completed. If issues have been addressed, the RTO notifies the TP and files the report. If the issues have not been addressed, the RTO determines if the corrective action applies to the prime or

Subcontractor; if it regards the Prime Contractor, the RTO issues the [Exhibit 6 – Sample Cure Notice](#) to the Prime Contractors, and if it regards the Subcontractor, it is issued by the Prime Contractor.

**Step 21 – Issue Cure Notice (TP - Prime Contractor)**

The Cure Notice is released by the prime to its Subcontractor. SO reserves the right to suspend the contract in whole or in part if it appears the contractor is failing to substantially comply with the quality of services required under the contract, and/or require further proof of reimbursable expenses prior to payment, and/or require improvement in the programmatic performance or service delivery.

**Step 22 – Execute required actions (TP – Subcontractor)**

The Subcontractor completes the CAP execution until all deficiencies have been satisfactorily resolved. The Subcontractor has 10 days to correct or cure the deficiency or violation.

**Step 23 – Provide documentation of corrective action taken (TP – Subcontractor)**

The Subcontractor provides documentation of the corrective actions taken.

**Step 24-25 – Review documentation of cure action taken by the Subcontractor (TP – Prime Contractor)**

The TP reviews documentation of cure action taken and determines if the CAP has been completed satisfactorily.

**Step 26 – Store and file report (TP – Prime Contractor)**

The Prime Contractor files the report for its own records. This report will be included with the Transportation Provider Annual Review.

**Step 27 – Terminate subcontract (TP – Prime Contractor)**

It is the Prime Contractor’s responsibility to terminate the contract with an under-performing Subcontractor and notify the RTO of intent to terminate the Subcontractor. DHS reserves the right to terminate a contract for cause, in whole or in part, at any time that DHS concludes that the contractor fails to perform, make progress, or in any way breached the contract. Prior to terminating a contract for default, a delinquency notice will be sent to the contractor with proof of delivery requested.

**Step 27.1 – Issue Notice of Termination (TP – Prime Contractor)**

If the Subcontractor fails to cure the situation or provide a satisfactory explanation as requested, the contract may be terminated. The Termination Notice (refer to [Exhibit 7 – Sample Termination Notice](#)) contains the following:

- The contract number and date of contract;
- The effective date of the termination;
- Reference to the clause under which the contract is being terminated; and
- A concise statement of the facts justifying the termination.
- The contract may be terminated without any opportunity to cure, if any of the following events occurs:
  - Subcontractor becomes insolvent or liquidation or dissolution or a sale of the Contractor’s assets begins,
  - Subcontractor violates or fails to comply with any applicable provision of federal or state law or regulation,

- Subcontractor knowingly provides fraudulent, misleading or misrepresentative information to any DHS /DBHDD consumer,
- Subcontractor has exhibited an inability to meet its financial or services obligations under the contract,
- A voluntary or involuntary bankruptcy petition is filed by or against the Subcontractor under the U.S. Bankruptcy Code or any similar petition under any state insolvency law,
- An assignment is made by the contractor for the benefit of creditors, or
- A proceeding for the appointment of a receiver, custodian, trustee, or similar agent is initiated with respect to the Subcontractor.
- DHS deems that such termination is necessary if the Subcontractor fails to protect or potentially threatens the health or safety of any consumer and/or fails to prevent or protect against fraud or otherwise protect the State of Georgia's personnel, consumers, facilities, or services.
- Subcontractor is debarred or suspended from performing services on any public contracts and/or subject to exclusion from participation in the Medicaid or Medicare Programs.
- If the contract is terminated for any reason, in whole or in part, the Subcontractor is required to cooperate as requested by DHS to effectuate the smooth and reasonable transition of the services for consumers. This will include, but not be limited to the transfer of the consumer records, personal belongings and funds as directed by DHS.
- Should the Subcontractor go out of business and/or cease to operate, all original records of consumers served under the contract shall be transferred by the contractor to DHS immediately and shall become the property of DHS.

**Step 27.2 – Close vendor relationship (TP – Prime Contractor)**

Once a Subcontractor is terminated, the Prime Contractor must update the TRIP\$ system accordingly to ensure the Subcontractor is no longer listed as an active provider. Assistance from RTO or TSS may be requested to complete this process.

**Step 28 – Send notification of contract termination (TP – Prime Contractor)**

Formally notify the Subcontractor by email of contract termination.

**Step 29 – Notify RTO (TP – Prime Contractor)**

Formally notify RTO by email of Subcontractor contract termination.

**Step 30 – (RTO)**

The RTO reviews the documentation of addressed deficiencies and makes a determination on whether the corrective actions have been completed. If issues have been addressed, the RTO notifies the TP and files the report. If the issues have not been addressed, the RTO determines if the corrective action applies to the Prime Contractor or Subcontractor; if it regards the Prime Contractor, the RTO issues the [Exhibit 6 – Sample Cure Notice](#) to the Prime Contractors, and if it regards the Subcontractor, it is issued by the Prime Contractor.

**Step 31 – Execute required actions (TP – Prime Contractor)**

Completes the CAP execution until all deficiencies have been satisfactorily resolved. The Prime Contractor has 10 days, to correct or cure the deficiency or violation.

**Step 32 – Review documentation of cure action taken by Prime Contractor (RTO)**

Provides documentation of Cure Notice corrective action taken.

**Step 33-34 – Review documentation of Cure Notice (RTO)**

Reviews documentation of cure action taken and determines if the CAP has been completed.

**Step 35 – Store and file report (RTO)**

RTO files the report for its own records.

**Step 36-37 – Terminate contract (RTO)**

It is the RTO's responsibility to terminate the contract with an under-performing Prime Contractor. DHS reserves the right to terminate a contract for cause, in whole or in part, at any time that DHS concludes that the contractor fails to perform, make progress, or in any way breached the contract. Prior to terminating a contract for default, a delinquency notice will be sent to the contractor with proof of delivery requested.

**Step 37.1 – Issue Notice of Termination (RTO)**

If the Prime Contractor fails to cure the situation or provide a satisfactory explanation as requested, the contract may be terminated. The Notice of Termination will contain the following:

- The contract number and date of contract;
- The effective date of the termination;
- Reference to the clause under which the contract is being terminated; and
- A concise statement of the facts justifying the termination.
- The contract may be terminated without any opportunity to cure, if any of the following events occurs:
  - Contractor becomes insolvent or liquidation or dissolution or a sale of the Contractor's assets begins,
  - Contractor violates or fails to comply with any applicable provision of federal or state law or regulation,
  - Contractor knowingly provides fraudulent, misleading or misrepresentative information to any DHS /DBHDD consumer,
  - Contractor has exhibited an inability to meet its financial or services obligations under the contract,
  - A voluntary or involuntary bankruptcy petition is filed by or against the contractor under the U.S. Bankruptcy Code or any similar petition under any state insolvency law,
  - An assignment is made by the contractor for the benefit of creditors, or
  - A proceeding for the appointment of a receiver, custodian, trustee, or similar agent is initiated with respect to the contractor.
- DHS deems that such termination is necessary if the contractor fails to protect or potentially threatens the health or safety of any consumer and/or fails to prevent or protect against fraud or otherwise protect the State of Georgia's personnel, consumers, facilities or services.



- Contractor is debarred or suspended from performing services on any public contracts and/or subject to exclusion from participation in the Medicaid or Medicare Programs.
- If the contract is terminated for any reason, in whole or in part, the contractor is required to cooperate as requested by DHS to effectuate the smooth and reasonable transition of the services for consumers. This will include, but not be limited to the transfer of the consumer records, personal belongings and funds as directed by DHS.
- Should the contractor go out of business and or cease to operate, all original records of consumers served under the contract shall be transferred by the contractor to DHS immediately and shall become the property of DHS.

**Step 37.2 – Close vendor relationship (RTO)**

Once a Prime Contractor is terminated, the RTO must update the TRIP\$ system accordingly to ensure the Prime Contractor is no longer listed as an active provider. Assistance from TSS may be requested to complete this process.

**Step 38 – Send notification of contract termination (RTO)**

Formally notify Prime Contractor by email of contract termination.

**Step 39 – Notify TSS State Office (RTO)**

Formally notify TSS State Office (SO) by email of Prime Contractor contract termination.

**e) References and Related Documents**

Document	Description
<a href="#">Exhibit 4 – Sample Quarterly Report Card</a>	Provides measurement of performance criteria/standards against contractual obligations over a given period. <a href="#">Exhibit 2 – Sample FY20XX Evaluation Summary - Consumers</a> and <a href="#">Exhibit 3 – Sample HSP Satisfaction Survey Summary</a> are some of the inputs used to form the Quarterly Report Card.
<a href="#">Exhibit 5 – Sample Corrective Action Plan</a>	Identifies areas noted in the report card requiring deficiency action and correction.
<a href="#">Exhibit 6 – Sample Cure Notice</a>	Notice of failure to complete corrective action. This is the pre-termination notice.
<a href="#">Exhibit 7 – Sample Termination Notice</a>	Notice of contract being terminated.

### 3. Contractor Annual Renewal Review Process

#### a) Roles and Responsibilities Overview

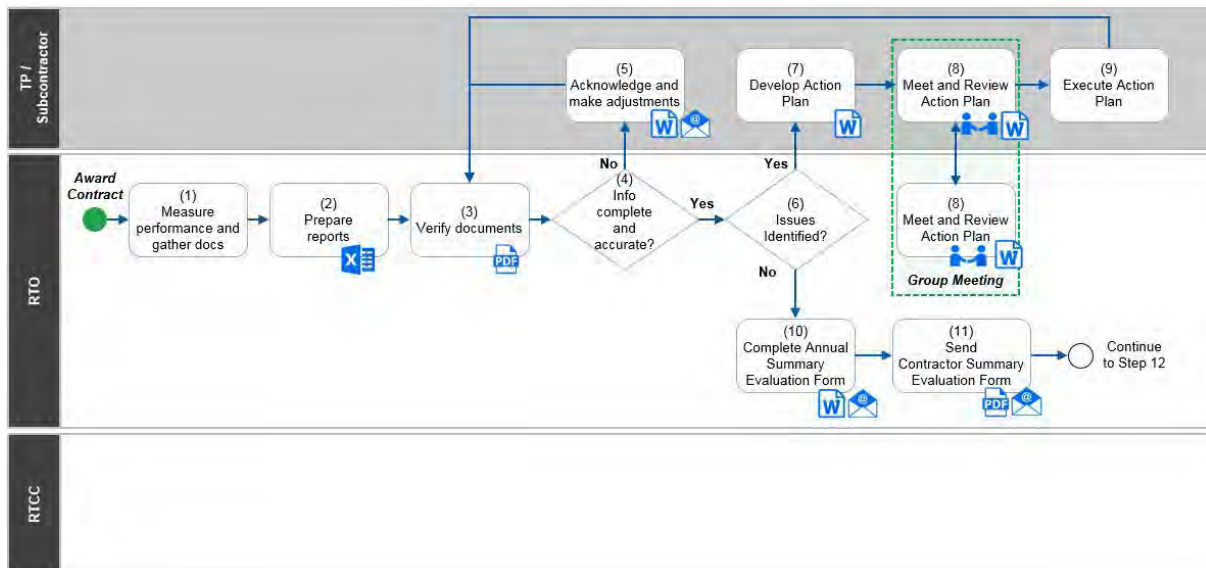
Role	Responsibility
<b>Transportation Provider (TP)/Subcontractor</b>	<ul style="list-style-type: none"> <li>Reviewing action and executing plans.</li> </ul>
<b>Regional Transportation Office (RTO)</b>	<ul style="list-style-type: none"> <li>Measuring performance, verifying accuracy, developing plans, informing TP of outcomes and closing out evaluation.</li> </ul>
<b>Regional Transportation Coordinating Committee (RTCC)</b>	<ul style="list-style-type: none"> <li>Reviewing plans, making decisions on whether to proceed with contractor renewal.</li> </ul>

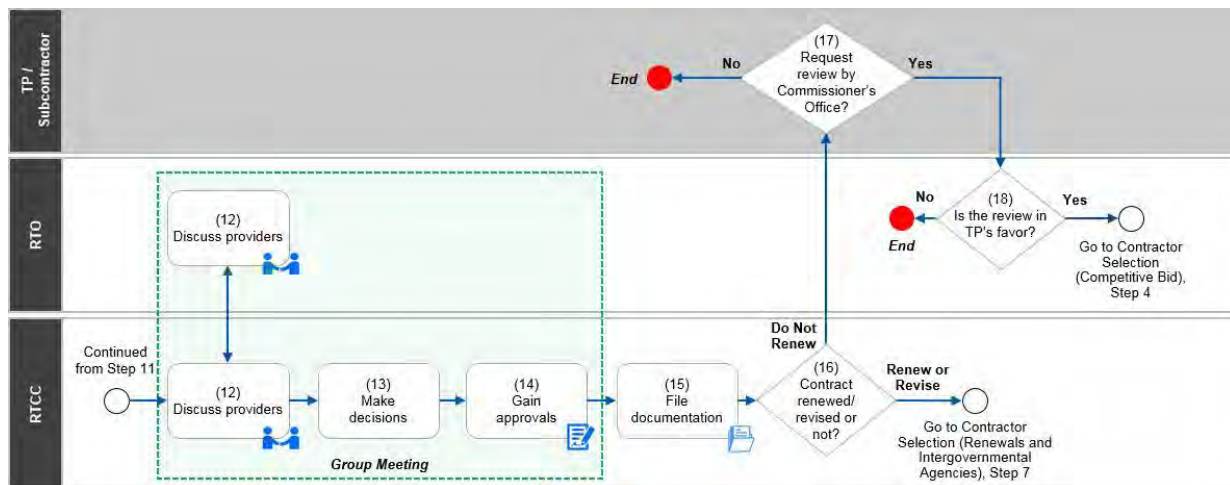
#### b) Application(s)

Application	Definition
None	None

#### c) Process Flow – Contractor Annual Renewal Review

The following process flow illustration depicts the full Contractor Annual Renewal process from the point that the transportation provider is 180 days prior to their annual contract end date to the point the RTCC approves the renewal. This process flow shows each responsible party and its steps throughout the process. The highlighted area(s) in the process flow depict the TP and Subcontractor roles within the process. The TP and Subcontractor specific steps are described after the process flow.





#### d) Procedures – Contractor Annual Renewal Review

The procedural steps and details outlined below are those that are the responsibility of the TP or Subcontractor and correspond to the steps highlighted in the process flow above.

##### Steps 1-7 – (TSS)

The TSS reviews performance reports. If issues are identified, TSS develops an [Exhibit 5 – Sample Corrective Action Plan](#) for the TP and/or Subcontractor to resolve the issues and meets with the TP and/or Subcontractor to review the plan. Steps 8 and 9 only apply if an Action Plan is developed. Otherwise, the TP begins the process at Step 12.

##### Step 8 – Meet and review Action Plan (TP/Subcontractor)

If an Action Plan is needed, as determined in Step 6 by the RTO, the TP meets with the RTO to review and get approval on the CAP.

##### Step 9 – Execute Corrective Action Plan (TP/Subcontractor)

Once the RTO has reviewed and approved a proposed CAP, the TP has 60-90 days, as determined by the RTO depending on the severity, to complete the Corrective Action Plan. This step continues until all deficiencies have been satisfactorily resolved.

##### Steps 10-16 – (TSS)

The TSS completes its evaluation (see [Exhibit 8 – Sample Annual Contract Evaluation Summary](#)) and sends the information to the RTO, TP, and Subcontractor, if applicable. The RTO and RTCC reviews the TP and its Subcontractor(s), if applicable, and all other available providers. Following the evaluation process completed by the RTCC and the RTO, a decision is made on whether to renew the TP contract. Renewals continue to Step 7 in the Contractor Selection process for Renewals and Intergovernmental Agencies.

##### Step 17 – Request review by Commissioner's Office? (TP)

TPs not selected for renewal by the RTO and RTCC may appeal the decision and request a review by the Commissioner's Office. If the Commissioner's Office denies the appeal, the process ends.

##### Step 18 – (RTO)

If the Commissioner's Office approves the appeal, the TP may compete in a competitive bid for the contract. The process continues to Step 4 of the Contractor Selection process for Competitive Bid.

**e) References and Related Documents**

Document	Description
<a href="#">Exhibit 8 – Sample Annual Contract Evaluation Summary</a>	Identifies TP annual performance, summarizing the results of the HSP Satisfaction Survey and Evaluation Summary from Consumers
<a href="#">Exhibit 5 – Sample Corrective Action Plan</a>	Identifies areas noted in the report card requiring deficiency action and correction.

## B. RIDER AND TRIP TYPE ELIGIBILITY DETERMINATION

This section applies to Human Service Providers (HSP), whose staff are responsible for determining eligibility and ordering transportation services. Transportation Providers (TP) are encouraged to be familiar with the criteria used for eligibility determination.

Consumers may qualify for transportation services under a variety of programs administered by DHS and other participating agencies. Eligibility criteria vary based on DHS Division or other Department/Agency, Division, or Office. HSPs determine consumer eligibility.

The Regional Transportation Office (RTO), working in coordination with the pertinent Department/Agency, Division, or Office, also reserves the right to recommend an attendant, provided by the consumer or consumer's caregiver, to travel with any consumer whose actions dictate the need for an attendant, as documented by the transportation provider and reviewed by the RTO and Department/Agency, Division, or Office.

DHS seeks to provide the maximum amount of essential transportation services that can be accomplished with available funding. A priority listing of essential trips is established for each Division or Department based on statewide input gathered through needs assessments. Priorities are updated as needed, based on the input and needs of the partner agencies. Transportation funding is committed to transportation for access to the services listed as highest priorities first. As transportation funding increases or decreases, the priority lists are used to determine which essential trips will be performed.

Rider eligibility and trip type criteria are provided below for each DHS Division or Office and for other Departments/Agencies or programs served by Coordinated Transportation.

### 1. Rider Eligibility

#### a) Division of Aging Services (DAS)

DAS HSP staff (e.g., Senior Centers) use standard assessment instruments to determine eligibility. Individuals age 60+ are eligible. Priority is given to those with the greatest social and economic need, with emphasis on persons who fall into the categories of low-income, minority, limited English speaking, rural, and/or functionally impaired.

For the most up-to-date information regarding eligibility, refer to the DAS manual (MAN5300) on the state's Online Directive Information System (ODIS) at <http://odis.dhs.ga.gov>. On the ODIS homepage, you can navigate to the manual by going to the *Manuals* tab, then select *Division of Aging Services*, and finally click on *Home and Community Based Services*. The information is in Chapter 218 – Transportation Requirements.

#### b) Division of Child Support Services (DCSS)

The Parental Accountability Court (PAC) program is a joint effort of the Division and Superior Court Judges to offer an alternative to incarceration and to help chronic nonpayers of child support make regular payments. The goal of PAC is to reduce recidivism, reduce the burdens and cost of jail, and reduce the public debt for public assistance and public medical care. Through judicial oversight and partnership with public agencies and community-based organizations, PAC will assist and transition noncustodial parents in overcoming barriers to gain self-sufficiency with the integration of screening, assessment, treatment, and the use of rehabilitative services.

For information regarding eligibility and funding, contact the Regional Transportation Office (RTO).

**c) Division of Family and Children Services (DFCS)**

Eligible DFCS consumers for Temporary Assistance to Needy Families (TANF) and Supplemental Nutrition Assistance Program (SNAP) are eligible for transportation assistance to support their participation in job search activities, work activities, or to meet personal responsibilities. DFCS case management staff may authorize transportation for additional child welfare trips and other trips for non-TANF trip purposes. If you are uncertain about the availability of funding for non-TANF transportation needs, contact the RTO to inquire. Transportation assistance for DFCS consumers requires prior-approval by a DFCS case manager.

#### **d) Department of Behavioral Health and Disabilities (DBHDD)**

Eligible consumers within DBHDD are those consumers who meet the consumer eligibility requirements for disability services of the Department and have no other reasonable and affordable means of accessing Holman DBHDD services. Holman services are those services that are outlined on the consumer's Individual Service Plan (ISP) and, as needed, approved by a physician, which applies to individuals with IDD (Intellectual and Developmental Disabilities). Holman services are varied and wide-ranging depending upon the severity of the consumer's disability and the need for intervention.

#### **e) Georgia Vocational Rehabilitation Agency (GVRA)**

Eligible consumers within GVRA require a vocational counselor to determine eligibility for transportation services.

## **2. Trip Type Eligibility**

#### **a) Division of Aging Services (DAS)**

Essential Trips for DAS are listed below, in order of priority:

- Trips to and from Senior Centers,
- Trips to and from medical appointments (including dialysis, chemotherapy, etc.),
- Trips to and from preventative health screenings and appointments (including dental, vision, hearing, etc.),
- Trips for shopping (groceries, medications, etc.),
- Trips to and from work/employment,
- Field trips,
- Trips that support application and management of public benefits,
- Trips to pay bills, conduct banking, etc.,
- Trips that support civic engagement and continued involvement in the community (including cultural activities),
- Trips that support evidence-based programs offered through DAS and health/wellness activities offered in the community,
- Trips that facilitate attendance at support group meetings for both caregiver services and kinship care services.

For the most up-to-date information regarding eligibility, refer to the DAS manual (MAN5300) on the state's Online Directive Information System (ODIS) at <http://odis.dhs.ga.gov>. On the ODIS homepage, you can navigate to the manual by going to the *Manuals* tab, then select *Division of Aging Services*, and finally click on *Home and Community Based Services*. The information is in Chapter 218 – Transportation Requirements.

#### **b) Division of Child Support Services (DCSS)**

Essential Trips for the DCSS are listed below:

Trips in support of the Parental Accountability Court (PAC) to and from court.

#### **c) Division of Family and Children Services (DFCS)**

Essential Trips for the DFCS are listed below, in order of priority:

- Trips in support of TANF and SNAP Works Program recipients (employment, job training, job search, etc.),
- Trips to and from technical schools and adult education,

- Trips to and from work experience sites for food stamp recipients,
- Trips to and from medical appointments,
- Trips to and from mental health centers,
- Transitional support service trips,
- Other non-TANF trips,



- Trips to and from substance abuse treatment,
- Trips for Social Service consumers,
- Trips for children in foster care and under child protective services.

#### **d) Department of Behavioral Health and Disabilities (DBHDD)**

Essential Trips for DBHDD are listed below:

- Trips to and from employment locations,
- Trips to and from mental health appointments,
- Trips to and from community training and integration activities,
- Trips to and from medical appointments,
- Trips for social services.

#### **e) Georgia Vocational Rehabilitation Agency (GVRA)**

Essential Trips for GVRA are listed below, in order of priority.

- Trips to and from school,
- Trips to and from employment,
- Trips for job search and job placement,
- Trips to and from job training,
- Trips to and from workshops and assessment sites.

### **3. Suspension of Eligibility**

The RTO reserves the right to deny services to any DHS consumer due to excessive no shows, safety concerns, budget constraints, or other situations as deemed appropriate.

## C. GENERAL TRIP INFORMATION

Operation requirements apply to Transportation Providers (TP) operating under contracts for the DHS Coordinated Transportation and any Subcontractors they may contract with to conduct transportation services. Both are referred to as Transportation Providers in the requirements in this section. Local Regional Transportation Coordinating Committee (RTCC) policy provides detailed definitions of service requirements and may be more restrictive than the guidelines below. The Regional Transportation Offices (RTO) are responsible for providing the local RTCC policy to the TPs and Human Service Providers (HSP); HSPs are responsible for providing the policy to consumers.

### 1. Types of Service

The needs of DHS consumers and programs vary. TPs perform the following types of service in Coordinated Transportation:

- **Subscription Trips** – Subscription service trips are scheduled with a pre-determined notice to meet the repetitive travel needs of passengers. Subscription trips are performed on a continuing basis.
- **Scheduled Response** – Trips that are scheduled with a pre-determined notice and are not performed on a continuing basis.
- **Demand Response Service** – Trips requested and performed on short notice.
- **Group Trips** – Trips that involve transporting multiple passengers with the same point of origin and the same destination, and who intend to travel together. Field Trips are an example of a group trip.

Attempts must be made to work trips of all types into the schedule with full responsiveness given to urgent situations and importance of request. There shall be no right of refusal for trips scheduled within time frames dictated by local policy. If a trip cannot be accommodated, the TP will document the date and time of the request, the name of the requesting HSP, the name of the individual making the request, and the reason why the trip is not accommodated.

### 2. Coordination of Services

The TP coordinates all routes and schedules, integrating passengers from multiple agencies when feasible, and to the maximum extent possible, on a single vehicle route.

### 3. Days and Hours of Service

Transportation services are made available 24 hours per day, 7 days per week. The core hours are between the hours of 6:00 am and 6:00 pm, Monday through Friday, and the majority of trips occur during these times and days; however, the TP must provide scheduled trips beyond these core hours and days as demand warrants meeting the needs of DHS consumers.

TPs respond to telephone calls and emails from 8:00 am to 5:00 pm, Monday through Friday, at a minimum. Additionally, TPs must have a voicemail system to provide consumers the ability to leave messages after hours and on weekends.

#### 4. On-Time Performance

Drivers must be on time for the scheduled appointment time unless there are extenuating circumstances beyond the control of the TP or the driver. The TP must notify the consumer and/or HSP in the event of unavoidable delays.

#### 5. Pick Up Time

The TP is responsible for providing the consumer with an estimated time of pick up. A 20-minute pick up window is allowed (10 minutes before estimated pick up time and 10 minutes after estimated pick up time). Exception: consumers are not to be picked up prior to the end of an appointment, activity, or scheduled work hours.

#### 6. No-Shows

A consumer who is not at the appointed pick up location at the estimated time, and the trip has not been cancelled according to local policy, is considered a no-show. The driver must wait 5 minutes after the appointed pick up time before a consumer is considered a no-show.

The TP is required to notify the ordering HSP of any no-show within 3 business hours. DHS is responsible for payment of no-shows as long as notification requirements are met. A no-show is billed to DHS at the same rate as a completed trip. Due to system limitations, marking the consumer as “no-show” in TRIP\$ does not alert the HSP, and thus the HSP must be notified outside of TRIP\$ to ensure payment for no-shows.

When a consumer is a no-show on leg A of the trip, leg B (if one was ordered) is automatically cancelled. The ordering HSP must contact the transportation provider to request the return trip if it is needed and must enter the information in TRIP\$.

After 3 consecutive no-shows and notifications to the HSP, the consumer is deactivated in the system and all future trips in the system are canceled. The TP does not attempt to transport the passenger again until the ordering organization has discussed the repeated no-shows with the consumer and has re-entered trips in the TRIP\$ system for the consumer.

#### 7. Consumer Assistance

The driver must exit the vehicle to offer assistance to consumers each time a consumer boards or departs the vehicle, as well as load, unload, and secure all wheelchairs and mobility devices, assure that all passengers are wearing the available seatbelts, and assure that child safety seats are properly secured.

#### 8. Child Safety Seats

Child safety seat requirements are controlled by Georgia’s Child Passenger Safety Law. The complete text of the law, which includes compliance rules and exemptions, can be found at the Governor’s Office of Highway Safety website. Current requirements for car seats in Georgia can be found by going to <http://www.gahighwaysafety.org> and searching for the terms *Child Passenger Safety in Georgia*. Parents or guardians must provide child safety seats for the safe

and lawful transport of children. The HSP notifies the TP at the time services are ordered if a child safety seat will be used. At no time is a TP to transport a child without seating that is in compliance with the law.

## 9. Duration of Transport

The TP must ensure that the duration of each consumer's transport is no more than forty-five (45) minutes longer than the average travel time required for direct transport from the consumer's point of pick up to the consumer's destination.

It is DHS' intent to transport consumers to the nearest access point of needed services. Though consumers have a right to choose their point of access, it may not be feasible to transport them long distances if equal services can be accessed at a closer destination point. Long distance trips can be stressful to consumers and financially inefficient. Requests for long distance transports when comparable services are available within shorter distances are to be considered on a case-by-case basis. HSPs must consider the impact of long-distance transports when planning changes in services and/or programs that affect transport distances.

## 10. Prohibitions

All vehicle occupants shall refrain from smoking, eating, and drinking in the vehicle. Drivers shall abide by this rule as well as enforce this rule with consumers. Violent behavior or actions are not tolerated and will result in suspension or termination of services.

## 11. Solicitation

Drivers and TPs are prohibited from political, religious, and financial solicitation. The drivers and TPs are prohibited from soliciting or accepting any tips or other forms of gratuity from consumers.

## 12. Destination Supervision

Individuals who require a higher level of supervision (as designated by an HSP) shall not be left unattended at destination points without the supervision of an adult. It is the responsibility of the ordering HSP to ensure the consumer's trip order clearly states the consumer is not to be left unattended. In the event that no adult is present at the point of destination to receive the consumer, the driver contacts the dispatcher, who will contact the HSP and begin efforts to locate the consumer's emergency contact. If said emergency contact cannot be located by telephone, and/or the HSP is closed or unavailable, the consumer will be taken to an emergency management facility, such as the police department or hospital.

## 13. Inclement Weather

Inclement weather refers to any weather condition that in any way interferes with the safe transport of consumers.

The TP will monitor weather conditions as necessary and keep drivers apprised of impending weather conditions. In the event of inclement weather when public schools are in session, cancellations of transportation services will be consistent with school closings. If the Governor declares a State of Emergency, cancellations of transportation services will be consistent with the areas included in the declaration. If inclement weather occurs and schools are not in session and

the Governor does not declare a State of Emergency, the TP assesses the need to cancel service or conduct early return trips. These assessments are based on communications with drivers and HSPs, RTO staff, and information gathered through the news media, Emergency Management Agencies, and/or the Georgia State Patrol. Once a determination is made, the TP will contact local radio and TV stations with public service announcements regarding closures and/or notify HSPs of closures.

If a road is impassable due to weather conditions, the TP contacts the affected riders to discuss reasonable accommodations for any return trip pick-ups. The TP also notifies the HSPs and the RTO of the situation.

In the event that inclement weather conditions develop while passengers are on a vehicle, the driver will deviate from his route and will make every effort to remove the passengers from harm's way. The contractor will also notify the HSPs of the situation.

RTOs will educate HSPs on inclement weather procedures, including radio and TV station(s) used for public service announcements and the need to watch news programs to monitor Governor declared State of Emergencies and public school closings (when school is in session). HSPs ensure consumers and caregivers are educated on the process.

TPs will provide drivers with training for responding to weather/road emergencies.

In the event of inclement weather resulting in service cancellation not prompted by school closures or a Governor's declared State of Emergency, the TP is responsible for notifying the RTO and the HSPs of the necessity to cancel routes or provide early return trips. The RTO and HSPs must provide emergency contact numbers for notifications that must occur before or after office hours. The following must be included in the TP's notification to the RTO and HSPs:

1. Sources consulted to determine cancellation of service
2. Date(s) of cancellation of coordinated transportation (if necessary)
3. Times of early pick-up (if applicable)
4. Date/time that transport will resume (if known)
5. Emergency contact number for transportation provider

## D. TRANSPORTATION SERVICE AND PAYMENT (INCLUDING TRIP\$ APPLICATION)

This section applies to Human Service Providers (HSP) that are authorized to order Coordinated Transportation Services and to contractors of the DHS Coordinated Transportation. Staff members of authorized HSPs order Coordinated Transportation services. The Regional Transportation Office (RTO) staff provides system access to those authorized to order services within an HSP, as well as to Transportation Provider (TP) staff, to access the trip requests and submit the actions taken on each trip.

### 1. Consumer Registration and Initial Transportation Orders

A consumer is registered prior to receiving trips funded by DHS. To register a consumer and order initial services, the HSP determines and enters the information in the TRIP\$ application. The appropriate RTO should be contacted for questions and/or further instruction.

### 2. Updating Transportation Orders

After the initial Consumer Registration and Transportation Order, the HSP may add trips or change orders by updating the client record or trip order in the TRIP\$ system.

### 3. Canceling Trips

TPs are required to have a system in place to accept cancellations 24 hours per day, 7 days per week.

Trips may be cancelled by the ordering agency 24 hours per day, 7 days per week in the TRIP\$ automated system. However, if a trip is to be cancelled less than 24 hours prior to the appointment time, the HSP must contact the TP before canceling in the TRIP\$ system. Local policies, as determined by the Regional Transportation Coordinating Committee (RTCC), set the time frames required to prevent a cancellation from qualifying as a no-show. Additionally, these local policies shall dictate which consumers have the authority to cancel trips and which consumers must work with their ordering HSP to cancel trips.

The first leg of any trip not canceled prior to the pre-determined local policy time frame is marked as a no-show and the second leg of the trip will be cancelled by the provider. The HSP is responsible for booking another return trip for the consumer if one is needed after the initial no-show. Refer to the [General Trip Information](#) section in this chapter for additional information concerning no-shows, notifications, and permanent cancellation due to no-shows.

It is the responsibility of the ordering HSP to cancel all future trips in the TRIP\$ system for consumers that need to be removed from transportation services permanently. Consumers that will no longer receive transportation services should also be inactivated in the TRIP\$ system.

### 4. Transportation Ordering, Approval, and Invoicing Process (using TRIP\$ Application)

This procedure is intended to offer a reference for Funding Partners/HSPs, and TPs by describing the process to register new transportation clients, order transportation trips, and review and approve completed transportation trips. This section covers the critical day-to-day process of providing trips to customers of the Coordinated Transportation System.

**a) Roles and Responsibilities Overview**

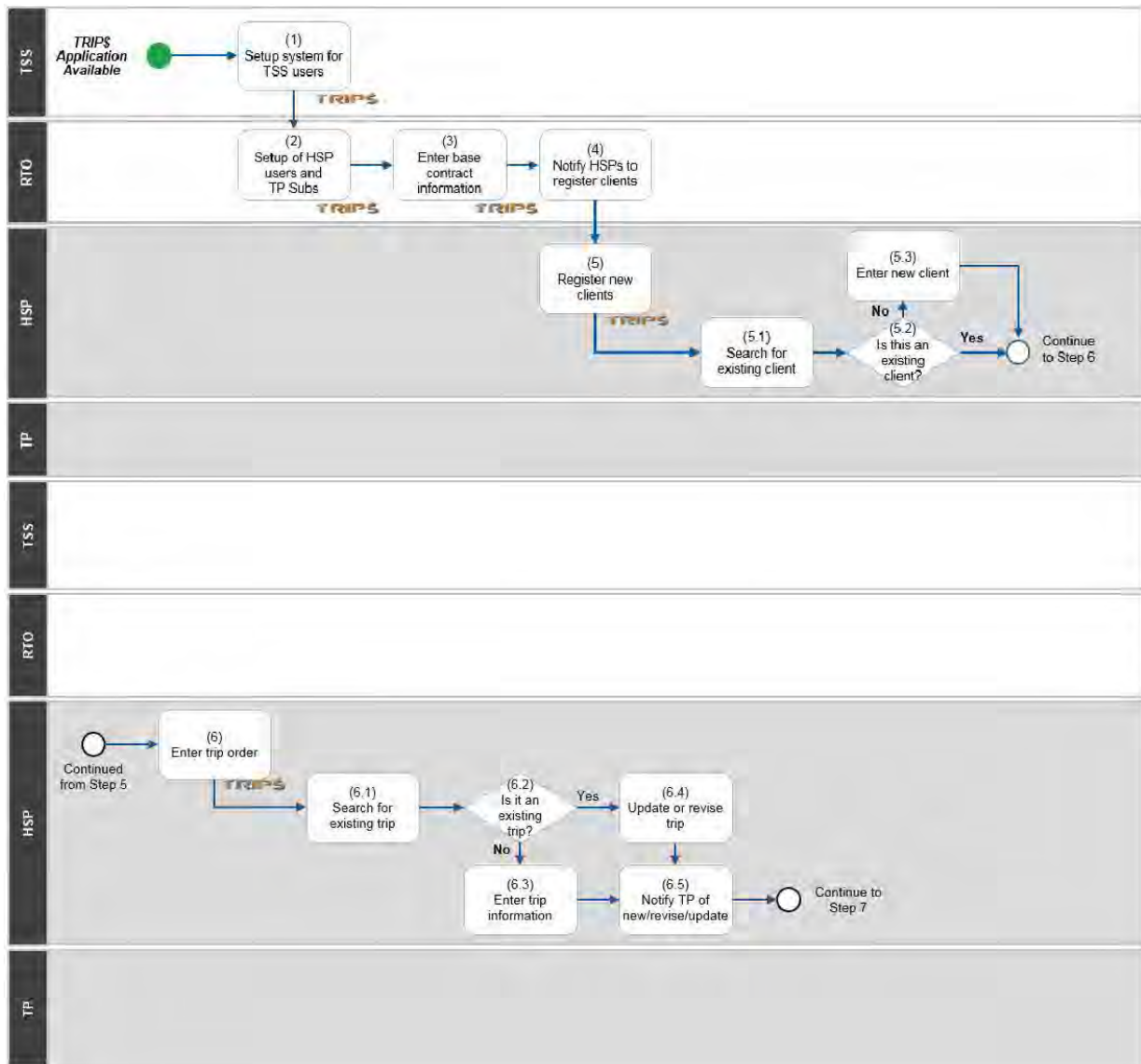
Role	Responsibility
<b>Transportation Services Section State Office (TSS)</b>	<ul style="list-style-type: none"> <li>Manages the Trip Ordering application – TRIP\$.</li> </ul>
<b>TSS Regional Transportation Office (RTO)</b>	<ul style="list-style-type: none"> <li>Adds and deletes HSP and TP users of the TRIP\$ application.</li> <li>Enters and maintains contract information in the TRIP\$ application.</li> </ul>
<b>Human Service Providers (HSP)</b>	<ul style="list-style-type: none"> <li>Manages client registration and transportation orders in TRIP\$, reviews for accuracy, and conducts final review for approval.</li> </ul>
<b>Transportation Providers – (Prime Contractor and/or Subcontractors) (TP)</b>	<ul style="list-style-type: none"> <li>Conducts transportation for TRIP\$ orders, resolves issues if needed, and submits invoice for payment once service is complete.</li> </ul>

**b) Application(s)**

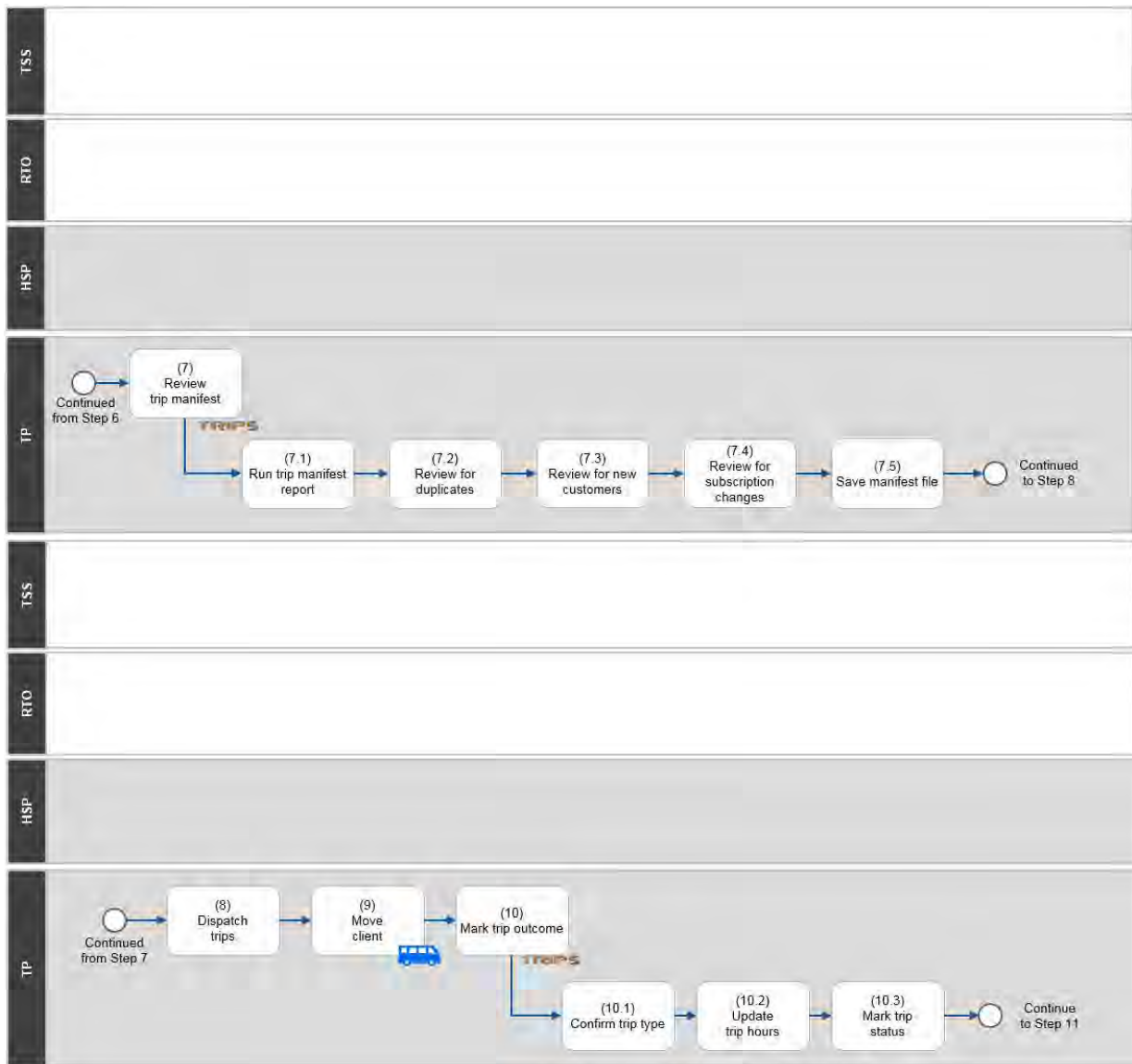
Application	Description
<b>TRIP\$</b>	Transportation Request Information Processing System, the application for client registration and trip ordering.

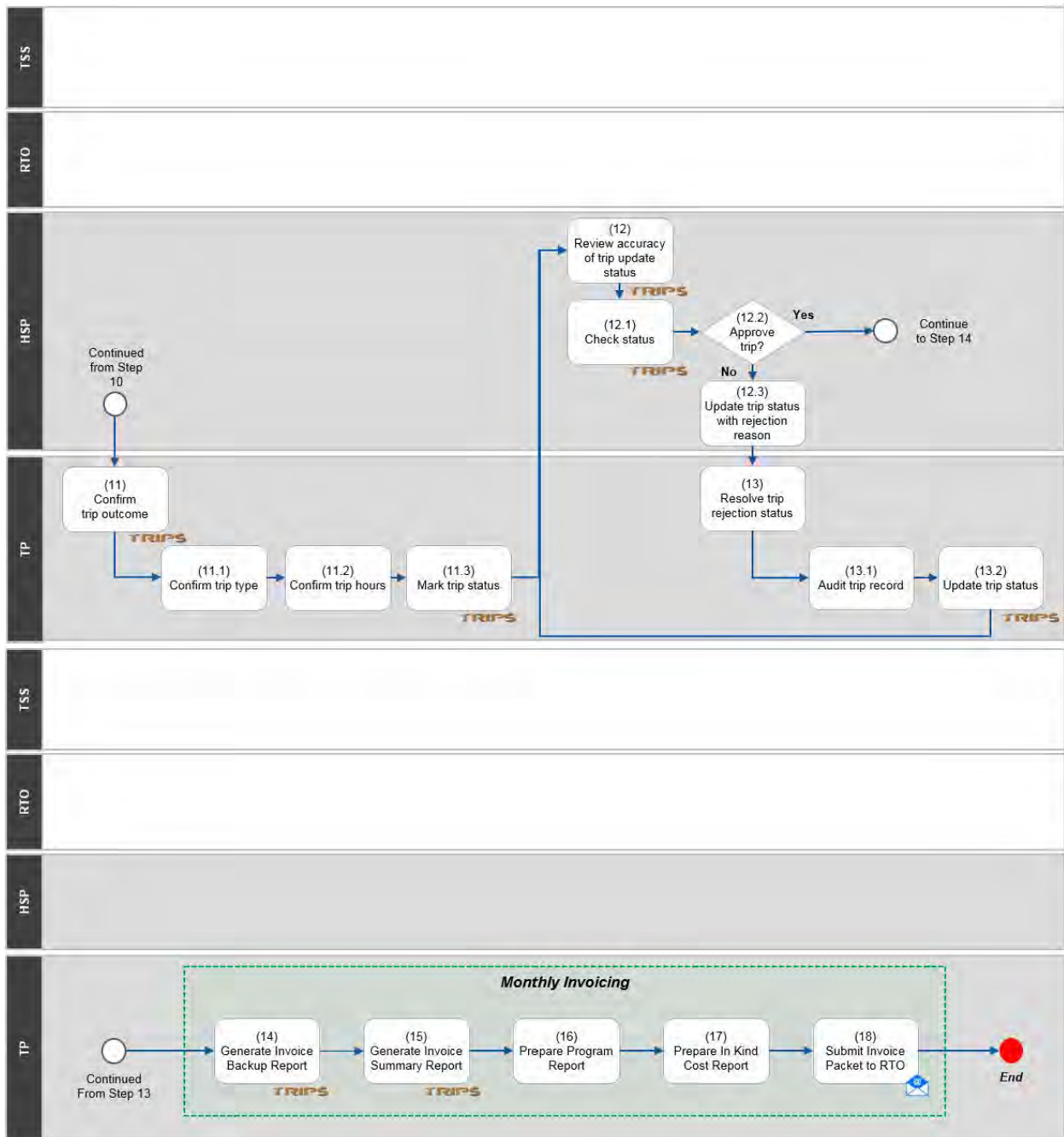
**c) Process Flow – Transportation Ordering, Approval, and Invoicing Process**

The following process flow illustration depicts the process to establish HSPs and TPs in the TRIP\$ application, and the process to order and approve consumer transportation using the TRIP\$ application. This process flow shows each responsible party and its steps throughout the process. The highlighted area in the process flow depicts the TP, Subcontractor, and the HSP roles within the process. The TP, Subcontractor, and HSP specific steps are described after the process flow.









**d) Procedures – Transportation Ordering and Approval Process**

The procedural steps and details outlined below are those that are the responsibility of the TP and the HSP and correspond to the steps highlighted in the process flow above. Additional information is provided to explain what happens before and the process activities handled by the TPs and HSPs.

**Steps 1-4 – (TSS and RTO)**

In steps 1-4, TSS and RTO setup each HSP in the TRIP\$ application. These activities only happen when contract terms are updated and/or when there is a need to add a new HSP to the TRIP\$ application.

## **Step 5 – Register new clients (HSP)**

### **Step 5.1 – Search for existing client**

When an HSP has a new client that needs transportation services, the HSP first uses SEARCH in the TRIP\$ application to see if the consumer already exists in the application. The important fields to use in the search are the new consumers LAST NAME and DATE OF BIRTH using the “Quick Search” option.

### **Step 5.2 – Is this an existing client?**

If there is not a match, then the new consumer can be added by accessing the “Add Client” section (Step 5.3). If the client already exists then the HSP can book a trip for the consumer.

### **Step 5.3 – Enter new client**

In the “Add Client” section, add the appropriate information for the consumer. The required fields are: First Name, Last Name, Date of Birth, Gender, Ethnicity, Race, Client Status, Address Type, Street, City, State, Zip, County, Eligibility List, HSP List, and Emergency Contact Name and Phone

Note:

Do not use special characters when entering information. Examples of special characters include: - . \ / \* \$ &

To enter the consumer’s date of birth, use the calendar function in the application.

## **Step 6 – Enter trip order (HSP)**

To schedule a consumer’s trip in the TRIP\$ application, the HSP first ensures the trip does not already exist and then enter the specific trip information.

### **Step 6.1 – Search for existing trip**

It is important for the HSP to first confirm that a trip request does not already exist for a consumer when entering a new trip request. Go to “Trip” on the Main Menu to access “Search Trip.”

### **Step 6.2 – Is it an existing trip?**

If the trip does not exist, enter the trip request (step 6.3); if it does exist, update or revise the trip (step 6.4).

### **Step 6.3 – Enter trip information**

To enter a new trip, go to “Trip” on the Main Menu and select “Book a Trip.” Select the consumer name by placing a check mark in the box to the left and “Request a Trip” to start the request process.

Note:

Always validate that a Subcontractor has been added to the request.

### **Step 6.4 – Update or revise trip**

The HSP can make changes to existing trips in the TRIP\$ application. Typical updates could include: adding or removing consumers from a group trip,

changing Subcontractors, Trip Type, and/or Special Accommodations, canceling a trip, and updating Trip Origin or Trip Destination.

**Step 6.5 – Notify TP of new, revised, or updated trip**

Always notify the TP via email if a new trip has been added or modified. In many cases, TPs use a separate routing or dispatch application that need to be updated.

**Step 7 – Review trip manifest (TP - Subcontractor)**

At a designated daily time determined by the TP, the TP generates a TRIP\$ transportation manifest and review for duplicates, new customers, and subscription changes.

**Step 7.1 – Run trip manifest report**

On a daily basis, the TP reviews the trip manifest for the trips scheduled for the next day. The manifest is in the Reports section of the TRIP\$ application main menu.

**Step 7.2 – Review for duplicates**

A duplicate could occur where there is an exact match for name, time, AND destination. Any duplicate trip shall be removed before routing. Confirmed duplicate trips need to be marked as canceled in the TRIP\$ application during Step 10.

**Step 7.3 – Review for new customers**

It is important to check for new customers because TPs need to update their dispatch / routing software applications with the new information.

**Step 7.4 – Review for subscription changes**

It is important to check for subscription updates because TPs need to update their dispatch / routing software applications with the new information.

**Step 7.5 – Save manifest file**

TSS recommends that TPs save a copy of their daily manifests in case there are disputes that need to be resolved at a later point in time. Daily transportation manifests in TRIP\$ are not guaranteed to be accurate as trips entered or canceled after the predetermined cutoff times are not reflected in the manifest.

**Step 8 – Dispatch trips (TP - Subcontractor)**

TP's internal process for dispatching the daily trips.

**Step 9 – Move client (TP - Subcontractor)**

TP's internal process that covers the actual movement of the consumers on the requested trips.

**Step 10 – Mark trip outcome (TP - Subcontractor)**

Once a scheduled trip has been completed, it is the TP's responsibility to update the outcome of the trip in the TRIP\$ application through the Trip Approval/Update Trip Status screen. This must be done whether for completed trips, no-show occurrences, or for cancelations. Marking the outcome of the trip must be completed by the next business day after the scheduled trip.

**Step 10.1 – Confirm trip type**

The Subcontractor confirms that the "trip type" and the passenger are a correct match. For example, a Division of Aging Services-related trip should have the passenger marked as a Division of Aging Services consumer.

**Step 10.2 – Update trip hours**

If the trip hours were different from what was originally planned, update the hours. If the services were provided by the Subcontractor, the Prime Contractor reviews and the Subcontractor updates as needed.

**Step 10.3 – Mark trip status**

The final status of the trip can be recoded as either: “Provided,” “No Show,” or “Cancelled.”

Once a trip status is updated it is removed from the screen.

Note:

Use the “Comment” section to explain any issues that would help another reviewer understand with situations related to “No Shows” or “Cancelled” trips.

**Step 11 – Confirm trip outcome (TP – Prime Contractor)**

After the Subcontractor updates the trip status, the workflow in the TRIP\$ application submits the completed trips to the Prime Contractor to review and approve. It is the Prime Contractor’s responsibility to confirm the outcome of the trip in the TRIP\$ application through the Trip Approval/Update Trip Status screen. Confirming the Subcontractors’ entry for the outcome of the trip must be completed by the next business day after the scheduled trip. Prime Contractors may use data provided by their Subcontractors to confirm the trip outcome.

**Step 11.1 – Confirm trip type**

The Prime Contractor confirms the “trip type” and the passenger are a correct match. For example, a Division of Aging Services-related trip should have the passenger marked as a Division of Aging Services consumer.

**Step 11.2 – Update trip hours**

If the trip hours were different than originally planned, update the hours as necessary. If the services were provided by the Subcontractor, the Prime Contractor reviews and the Subcontractor updates as needed.

**Step 11.3 – Mark trip status**

The final status of the trip can be recoded as either: “Provided,” “No Show,” or “Cancelled.”

Once a trip status is updated it is removed from the screen.

Note:

Use the “Comment” section to explain any issues that would help another reviewer understand with situations related to “No Shows” or “Cancelled” trips.

**Step 12 – Review accuracy of trip update status (HSP)**

After the Prime Contractor confirms the Subcontractor’s trip status entries, the workflow in the TRIP\$ application submit the completed trips to the HSP to review and approve. It is the HSP’s responsibility to confirm the outcome of the trip in the TRIP\$ application through the Trip Approval/Update Trip Status screen. Confirming the Prime Contractor’s entry for the outcome of the trip must be completed by the next business day after the scheduled trip.

**Step 12.1 – Check status**

The HSP verifies all trip information – checking dates and times, Approval Status, Trip Type and Hours. The HSP can either select “Approved” or “Unapproved” after the review.

### **Step 12.2 – Approve trip?**

If the trip is approved, the trip is completed in the TRIP\$ application. If the trip is not approved, the HSP moves to Step 12.3.

### **Step 12.3 – Update trip status with rejection reason**

If “Unapproved” is selected, the HSP updates the “Comments” section with a reason the trip was “Unapproved.” “Unapproved” trips are routed via workflow back to the Prime Contractor to review and update – see Step 13.

### **Step 13 – Resolve trip rejection status (TP – Prime Contractor)**

If an HSP updates a particular trip to “Unapproved” status, the trip re-enters the Prime Contractors TRIP\$ application Approve and Update queue.

#### **Step 13.1 – Audit trip record**

The Prime Contractor works with the Subcontractor to review the “Unapproved” reason in the “Comments” box.

#### **Step 13.2 – Update trip status**

Once a decision is reached on the status to address the HSP’s concerns, the Prime Contractor updates the trip status AND provide the outcome of the review in the “Comments” section.

### **Step 14 – Generate the Invoice Backup Report (TP)**

The Invoice Backup Report ([Exhibit 9 – Sample Invoice Backup Report](#)) needs to be generated and submitted to the RTO by the 10<sup>th</sup> working day of each month.

- a) Go to Reports on the TRIP\$ application Main Menu and select “Invoice Backup Report”
- b) Select Transportation Provider, Confirm Fiscal Year and Region #, enter Start and End Date (\*required)
- c) Select the HSP
- d) Select “Export to Excel”
- e) Save document

### **Step 15 – Generate the Invoice Summary Report (TP)**

The Invoice Summary Report ([Exhibit 10 – Sample Invoice Summary Report](#)) needs to be generated and submitted to the RTO by the 10<sup>th</sup> working day of each month.

- a) Go to Reports on the TRIP\$ application Main Menu and select “Invoice-Summary”.
- b) Select Transportation Provider, Confirm Fiscal Year and Region #, enter Start and End Date (\*required)
- c) Click on “Draft Invoice” button to display report on screen or “Export to Excel” button to display report in Excel. Review for accuracy
- d) Add items to the invoice that are not maintained in the TRIP\$ application, e.g., bus passes
- e) Save documents

### **Step 16 – Prepare Program Report (TP)**

The TP prepares the Program Report ([Appendix 4 – Monthly Program Report – Trip, Miles, and Hour Analysis](#)) each month with the total number of miles, hours, and reimbursement for each agency/program. TPs obtain this information from Prime Contractor or Subcontractors.

### **Step 17 – Prepare In-Kind Cost Report (TP)**

The In-Kind Cost Report ([Appendix 5 – Report of Certified or In-Kind Cost](#)) should be prepared by the TP when funds requiring a match are used.

**Step 18 – Submit Invoice Packet to RTO (TP)**

- a) Submit the invoice packet via email to the RTO no later than the 10th working day of each month for invoices to be paid to the TP and/or Subcontractor for trips made on behalf of the TP.
- b) The invoice packet should include:
  - i. Invoice Backup Report from TRIP\$
  - ii. Invoice Summary Report from TRIP\$
  - iii. Program Report – TRIP\$, Miles, and Hours
  - iv. In-Kind Cost Report, if applicable

The RTO reviews the draft invoice (see [Exhibit 11 – Sample Draft Invoice](#)) provided by the TP and compares it against the draft invoice summary report in the TRIP\$ application. In case of errors or questions, the RTO emails the TP to resolve or correct the issues and the TP resubmits the corrected documents in the Draft Invoice packet.

Once the above process steps are completed by the TP, the RTO and TSS Operations Manager manage the Accounts Payable process to generate a payment to the TP.

**e) References and Related Documents**

Document	Description
<a href="#">TRIP\$ Application User Guide</a>	Web-based client registration and trip ordering system user guide.
<a href="#">Exhibit 11 – Sample Draft Invoice</a>	Sample of invoice submitted by the TP for payment for services rendered.
<a href="#">Exhibit 9 – Sample Invoice Backup Report</a>	Summary of all transportation services trips provided in a given time period, organized by agency/program.
<a href="#">Exhibit 10 – Sample Invoice Summary Report</a>	Summary of all transportation services trips provided in a given time period.
<a href="#">Appendix 4 – Monthly Program Report – Trip, Miles, and Hour Analysis</a>	Summary of total number of miles, hours, and reimbursement for each agency/program.
<a href="#">Appendix 5 – Report of Certified or In-Kind Cost</a>	Report completed when funds requiring a match are used.

**5. Financial Reporting Process**

This procedure is intended to offer a comprehensive reference to Funding Partners and HSP by describing TSS’s annual, quarterly, and monthly financial reporting processes. TPs are not directly involved in the Financial Reporting processes.

The financial reports are an important opportunity to understand what is funded annually and how the funds are being used on a monthly and quarterly basis. In some cases, decisions need to be made about reducing transportation trips if funds are used faster than expected.

This procedure provides an overview of the Financial Reporting process and includes detailed information for process activities that relate directly to Funding Partners and HSPs. Three Financial Reporting processes are included in this section:

- Annual Funding Allocation Setup and Review
- Monthly Funding and Use Reporting
- Quarterly Funding and Use Reporting

**a) Roles and Responsibilities Overview**

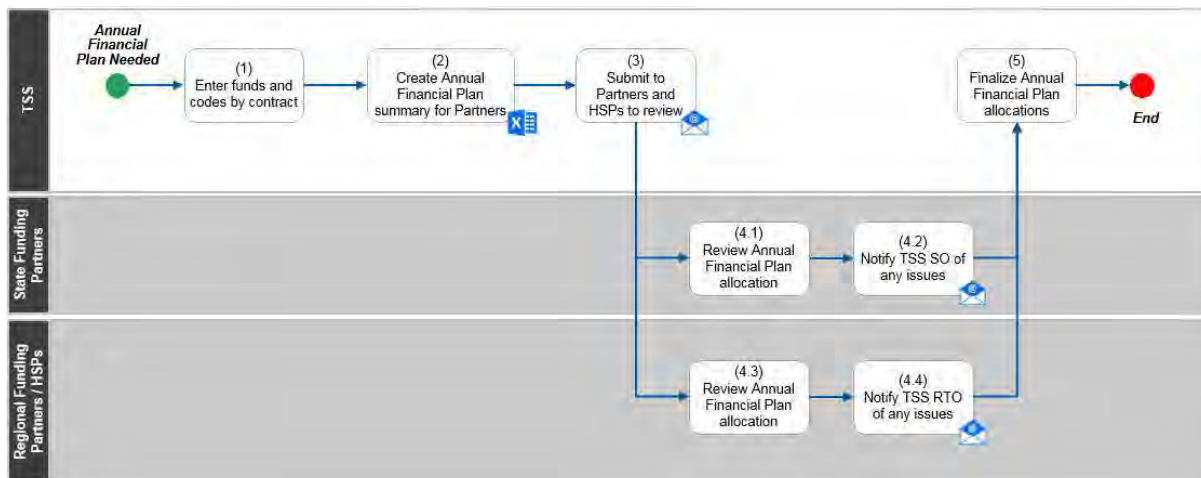
Role	Responsibility
<b>Transportation Services Section (TSS)</b>	<ul style="list-style-type: none"> <li>Creates and distributes the quarterly funding reports and annual plan summary for Funding Partners.</li> </ul>
<b>TSS Regional Transportation Office (RTO)</b>	<ul style="list-style-type: none"> <li>Coordinates region-level annual allocations with Regional Funding Partners and compiles and distribute monthly financial reports for Regional Funding Partners and HSPs.</li> </ul>
<b>State Funding Partners</b>	<ul style="list-style-type: none"> <li>Review and approve annual funding plan and provide input as needed on quarterly financial reports.</li> </ul>
<b>Regional Funding Partners / Human Service Providers (HSP)</b>	<ul style="list-style-type: none"> <li>Review and provide input on monthly financial reports and use monthly reports to manage and monitor the use of funds and number of trips allowed.</li> </ul>

**b) Application(s)**

Application	Description
None	None

**c) Process Flow 1 – Annual Financial Plan Allocation Setup and Review**

The following process flow illustration depicts the process to prepare, review, and approve the Annual Funding Allocation plan. This process flow shows each responsible party and its steps throughout the process. The highlighted area(s) in the process flow depict the Regional Funding Partners/HSP and the State Funding Partners roles within the process. The Regional Funding Partner/HSP and the State Funding Partners specific steps are described after the process flow.





## d) Procedures 1 – Annual Financial Plan Allocation Setup and Review

The procedural steps and details outlined below are those that are the responsibility of the State Funding Partners and the Regional Funding Partners/HSPs and correspond to the steps highlighted in the Process Flow above.

### Steps 1 – 3 (TSS)

On an annual basis, TSS creates an Annual Financial Plan ([Exhibit 12 – Sample Annual Financial Plan](#)) for each Funding Partner detailing how the Funding Partner's funds are allocated across the state. TSS sends the report to the State Funding Partners and the Regional Funding Partners to review.

### Step 4

#### Step 4.1 – Review Annual Financial Plan allocation (State Funding Partner)

Funding Partners review the information and provide feedback if there are issues.

#### Step 4.2 – Notify TSS State Office of any issues (State Funding Partner)

Funding Partners should notify TSS of any issues with the annual report. TSS responds to the request and provide the appropriate report updates as needed.

#### Step 4.3 – Review Annual Financial Plan allocation (Regional Funding Partners and HSPs)

On an annual basis, the RTO prepares an Annual Financial Plan for the Regional Funding Partners and HSPs detailing how the funds are allocated across the region. It is important for the Regional Funding Partners and HSPs to review this information and provide feedback if there are issues.

#### Step 4.4 – Notify the RTO of any issues (Regional Funding Partners and HSPs)

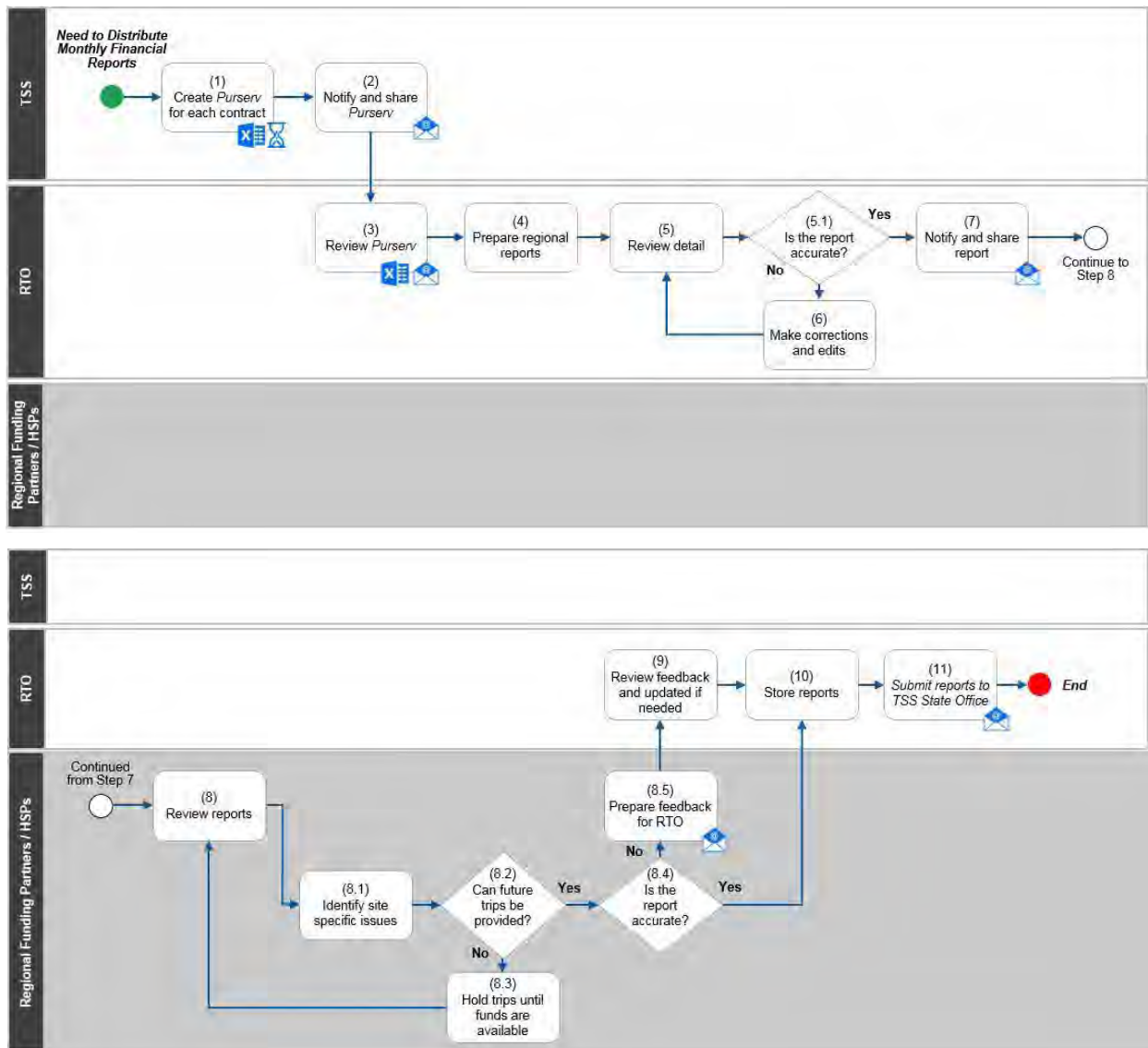
After reviewing the Annual Financial Plan allocation, the Regional Funding Partners and HSPs notify the RTO of any issues with the annual allocations. The RTO responds to the request and provide the appropriate updates as needed.

### Step 5 – (TSS)

At the conclusion of the Annual Financial Plan review process, TSS finalizes the Annual Financial Plan and use as input for the Monthly and Quarterly reports.

## e) Process Flow 2 – Monthly Financial Reporting

The following process flow illustration depicts the monthly reporting process for sharing budget and funding information with Regional Funding Partners and the HSPs. This process flow shows each responsible party and its steps throughout the process. The highlighted area(s) in the process flow depict the Regional Funding Partners/HSPs role within the process. The Regional Funding Partners/HSPs specific steps are described after the process flow.



## f) Procedures 2 – Monthly Financial Reporting

The procedural steps and details outlined below are those that are the responsibility of the Regional Funding Partner/HSPs and correspond to the steps highlighted in the process flow above.

### Steps 1 – 7 (TSS and RTO)

On a monthly basis, TSS and the RTO prepare a Monthly Financial Report ([Exhibit 13 – Sample Monthly Financial Report](#)) for each Regional Funding Partner / HSP detailing the number of trips taken and dollars used through the report date. TSS and the RTO provide comments as needed on the report.

### Step 8 – Review Monthly Financial Reports (Regional Funding Partners and Human Service Providers)

The RTO sends the Monthly Reports to the Regional Funding Partners and Human Service Provider to review.

#### Step 8.1 – Identify site specific issues

It is important to review the reports monthly to understand current projections (surplus or deficit) results and determine if actions need to be taken to address any issues. For example, if funds are not available for future trips, the HSPs shall make sure that trips are not scheduled until the funding issue is resolved.

**Step 8.2 – Can future trips be provided?**

After reviewing the reports, the Regional Funding Partners and HSPs decide whether funds are available for future trips. If funds are not available, then go to Step 8.3. If funds are available, go to step 8.4.

**Step 8.3 – Hold trips until funds are available**

If the report indicates that funds are not available for future trips, trips shall not be scheduled. The HSP must work with the RTO to discuss options to address the funding shortage.

**Step 8.4 – Is the report accurate?**

Even if funds are available for future trips, Regional Funding Partners and HSPs review the report to verify the spending projections match expectations and their understanding of recent trip activity.

**Step 8.5 – Prepare feedback for the RTO**

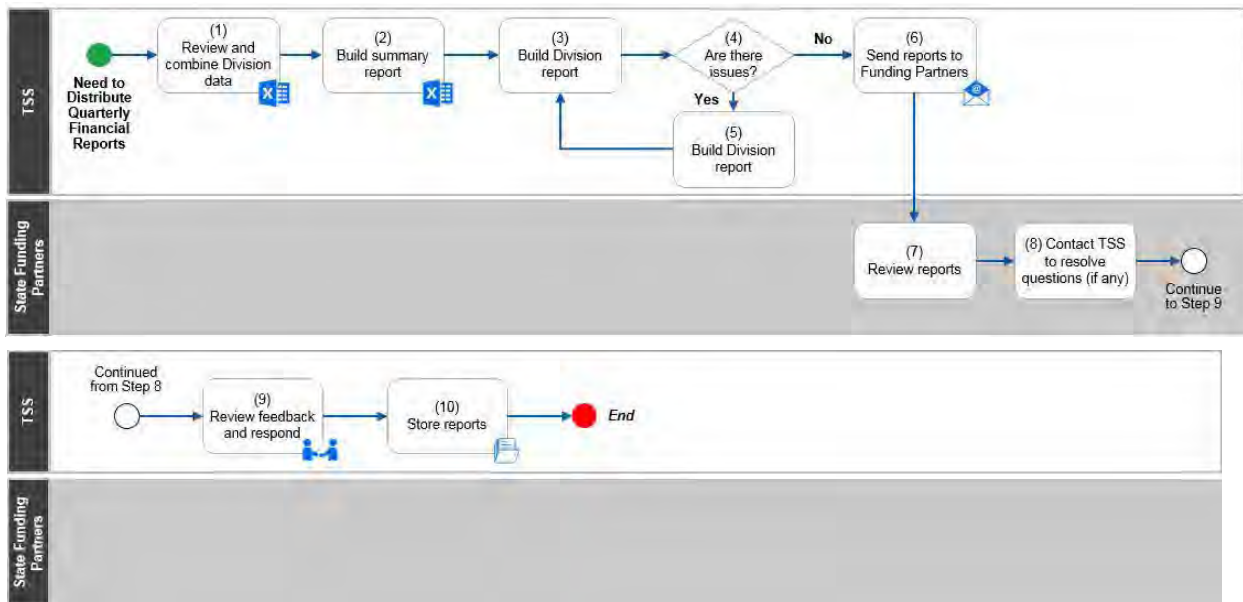
Regional Funding Partners and HSPs contact their RTO to discuss any report issues or in case they need help addressing funding issues.

**Step 9-11 – (RTO)**

The RTO responds and addresses any questions from the Regional Funding Partners and HSPs regarding the monthly report. Each report is then stored at the RTO.

**g) Process Flow 3 – Quarterly Financial Reporting**

The following process flow illustration depicts the quarterly reporting process for sharing budget and funding information with state Funding Partners. This process flow shows each responsible party and its steps throughout the process. The highlighted area(s) in the process flow depict the State Funding Partners role within the process. The State Funding Partners specific steps are described after the process flow.



## h) Procedures 3 – Quarterly Financial Reporting

The procedural steps and details outlined below are those that are the responsibility of the State Funding Partner and correspond to the steps highlighted in the process flow above.

### Steps 1-6 – (TSS)

On a quarterly basis TSS prepares Excel reports ([Exhibit 14 – Sample Quarterly Financial Report](#)) that contain information about trips taken, cost for the trips, and total funding information. These reports are distributed to all State Funding Partners.

### Step 7 – Review Reports (State Funding Partners)

It is important to review the reports quarterly to understand current projections (surplus or deficit) results and determine if actions need to be taken to address any issues. TSS includes comments in the report to indicate special areas that should be reviewed.

### Step 8 – Contact TSS to Resolve Issues (State Funding Partners)

If there are questions about the report or the comments in the report, the Funding Partners contact TSS for resolution.

### Steps 9-10 – (TSS)

TSS resolves any questions from the Funding Partners and stores the reports for future reference.

## i) References and Related Documents

Document	Description
<a href="#">Exhibit 12 – Sample Annual Financial Plan</a>	Report that details how the Funding Partner's funds are allocated across the state on an annualized basis.
<a href="#">Exhibit 13 – Sample Monthly Financial Report</a>	Report that details the number of trips taken and dollars used through the report date.
<a href="#">Exhibit 14 – Sample Quarterly Financial Report</a>	Report that contain information about trips taken, cost for the trips, and total funding information.

## E. COMPLAINTS

Complaints regarding the DHS Coordinated Transportation System, transportation providers, vehicles, drivers, and/or passengers shall be handled promptly and objectively. Transportation Providers (TP) may file a complaint directly with the Regional Transportation Office (RTO); all other parties, including consumers, must work with their Human Service Provider (HSP) to file a complaint. The HSP shall complete a Complaint Form ([Appendix 6 – Complaint Form](#)) and send it to the appropriate RTO on behalf of the party submitting a complaint.

The RTO maintains records of all complaints filed and routes them to the appropriate parties for investigation and resolution. Information is gathered from both the Complainant and the Subject of the Complaint to determine the issue at hand and develop appropriate steps for resolution, if necessary.

Transportation Providers must submit to the Regional Transportation Office a written document that details their processes/protocols to report and respond to accidents, incidents, and complaints. The protocols must address sub-contractor compliance and outline remedies for poor performance (to include poor drive behaviors). Under no circumstances should a driver secure and transport a consumer using a wheelchair with receiving wheelchair securement training.

### 1. Accident and Incident Reporting

All urgent incidents and accidents must be reported to the authorities by calling 911 and to the RTO. Refer to Chapter 3 for additional information on incident and accident reporting.

### 2. Vehicle Incidents

Events that are health or safety hazards, such as the presence of bodily fluids or vermin in the vehicles or the lack of passenger assistance from the driver when required and resulting in an accident, are classified as incidents, not complaints. Refer to Chapter 3 for additional information on incident and accident reporting.

### 3. Passenger Incidents

The TP shall inform the RTO of any incidents experienced while transporting a consumer, whether related to safety, behavior or other reason. The RTO then informs the HSP and any other relevant parties of the incident. Refer to Chapter 3 for additional information on incident and accident reporting.

#### a) Behavior Incidents:

Any conduct or action by a consumer that places himself/herself or other consumers in harm's way while being transported by the DHS Coordinated Transportation System or in a state owned or leased vehicle is considered a behavior incident.

If behavior or actions are serious enough to require immediate assistance or intervention by police or other authorities, transportation service is immediately suspended pending a review of the incident. Behavior or actions include, but are not limited to, suicidal gestures or attempts, assaults, possession or use of weapons, homicide, frequent medical disruptions, aggressive behavior, and running away.

To remediate a behavior incident, follow the steps for Accident/Incident Reporting:

- Call 911, if applicable
- Call the emergency contact for each consumer involved in the incident
- Call the appropriate RTO

See Chapter 3 for additional information and requirements on accident and incident reporting.

### b) Disruptive or Unsafe Behavior

Other disruptive or unsafe behavior on the vehicle that has the potential of placing consumers in harm's way can be addressed using the Complaint Process. This includes behavior that a consumer exhibits that does not endanger anyone but causes discomfort for other consumers.

Examples include, but are not limited to, refusal to stay buckled and seated, playing loud music, and distracting the driver.

## 4. Complaint Process

In the case of dissatisfaction in the quality of service provided by the Coordinated Transportation System, a complaint may be filed by the aggrieved party. Only non-emergency complaints that do not address vehicle accidents, consumer-related accidents, behavior incidents, nor disruptive or unsafe behavior may follow the complaint process to file a complaint. Complaints may address such issues as the timeliness of the transportation service, vehicle condition, driver behavior, and other passengers of the vehicle.

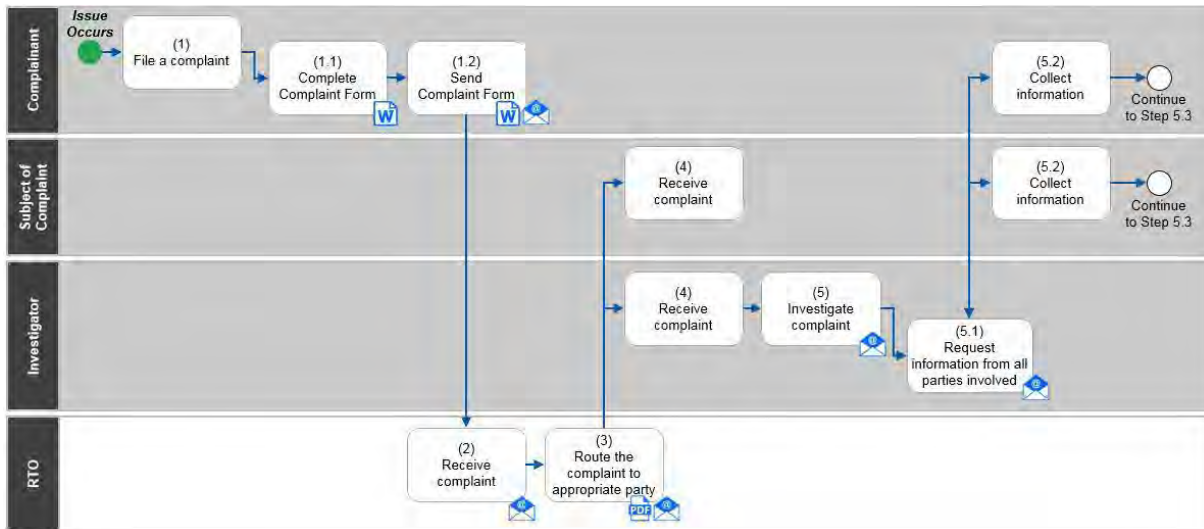
### a) Roles and Responsibilities Overview

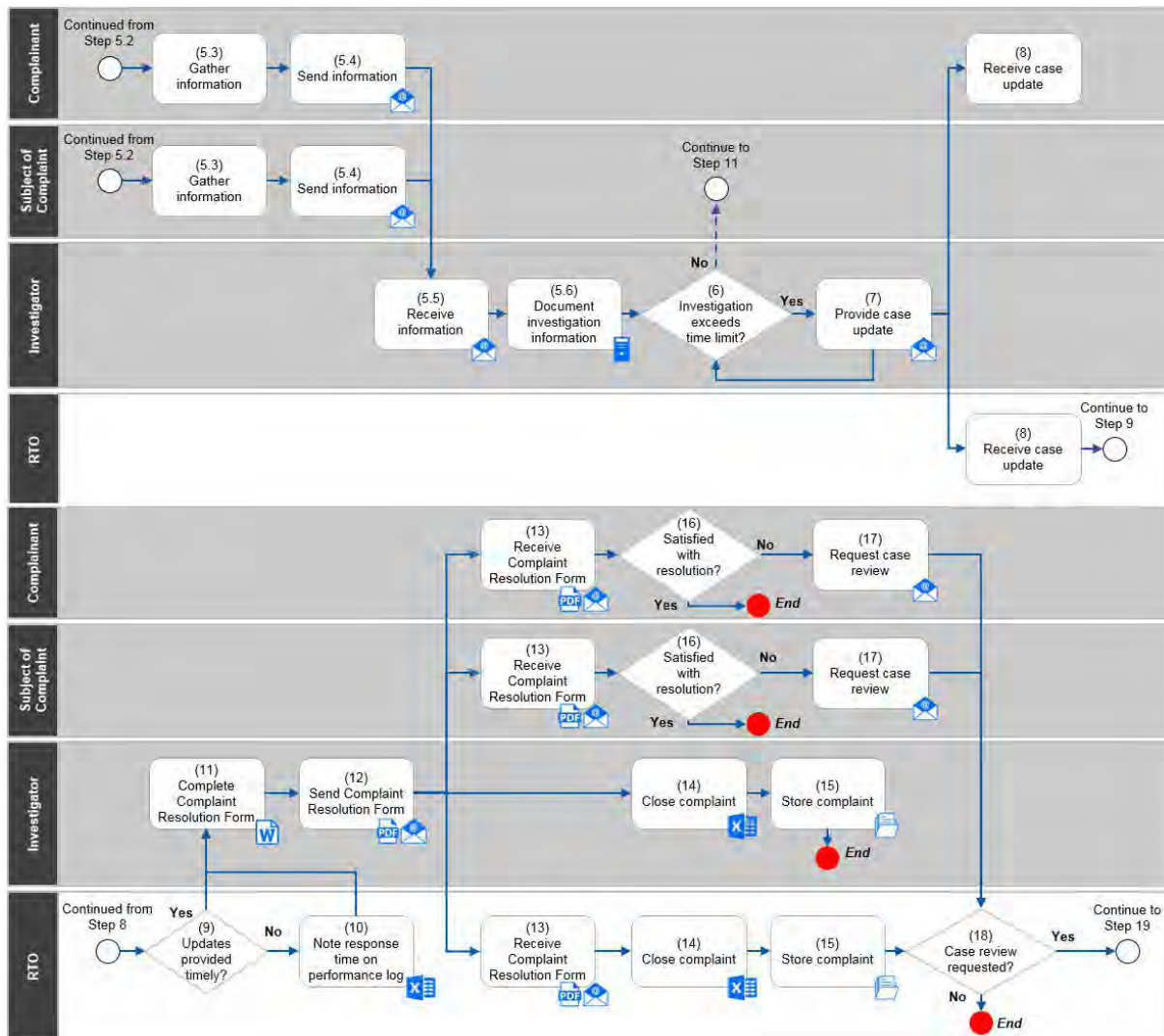
Role		Responsibility
<b>Complainant</b>		<ul style="list-style-type: none"> <li>• Files complaint, provides information to the investigator and participates in a group meeting as requested,</li> <li>• and may request a case review in the event of an unsatisfactory resolution.</li> </ul>
<b>Subject of the Complaint</b>		<ul style="list-style-type: none"> <li>• Provides information to the Investigator and participate in a group meeting as requested, and if issued, executes the Action Plan to resolve issue or prevent similar issues in the future.</li> </ul>
<u>Subject of the Complaint</u>	<u>Investigator</u>	
Consumer	HSP	
HSP*	Prime Contractor, RTO	
Subcontractor	Prime Contractor	
Prime Contractor	(RTO)	
<b>Investigator</b>		<ul style="list-style-type: none"> <li>• Investigates complaint by compiling information gathered from all parties involved and notifies them of the outcome of the investigation.</li> </ul>
<u>Subject of the Complaint</u>	<u>Investigator</u>	
Consumer	HSP	
HSP*	Prime Contractor	

Role		Responsibility
Subcontractor	Prime Contractor	
Prime Contractor	(RTO)	
<b>Regional Transportation Office (RTO)</b>		<ul style="list-style-type: none"> <li>Provides overall oversight of the complaint investigation process</li> <li>Manages distribution of complaints and monitors the investigation's timeliness and updates TP performance log, if needed.</li> </ul>

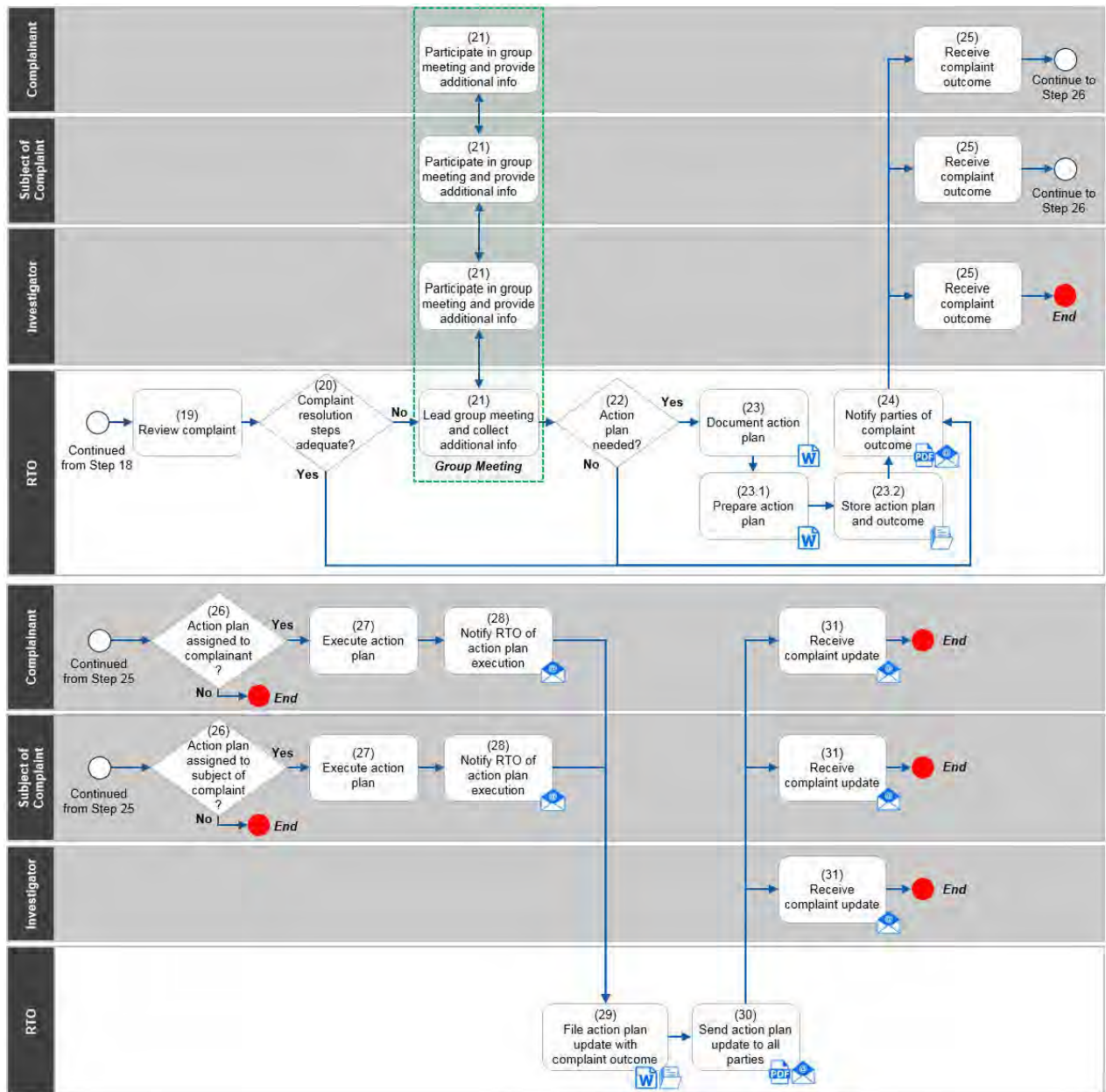
### b) Process Flow: Complaint Process

The following process flow illustration depicts the full Complaint process from the filing of a complaint through the complaint resolution and communication of outcome to all parties involved. This process flow shows each responsible party and its steps throughout the process. The highlighted area(s) in the process flow depict the Complainant, the Subject of the Complaint, and the Investigator roles within the process. The Complainant, the Subject of the Complaint, and the Investigator specific steps are described after the process flow.









### c) Procedures – Complaint Process

The procedural steps and details outlined below are those that are the responsibility of the Complainant, Subject of the Complaint, and Investigator and correspond to the steps highlighted in the process flow above. Refer to the Roles and Responsibilities, above, to determine who fulfills each role in the complaint process, dependent upon whom the complaint is against.

#### Step 1 – File a complaint (Complainant)

TPs file their complaints directly with the RTO. All other Complainants, including consumers, must work with their HSP to file a complaint. The TP or HSP completes the [Appendix 6 – Complaint Form](#) and sends it to the appropriate RTO by email.

#### Steps 2-3 – (RTO)

The RTO receives the complaint, logs the complaint, and determines the Investigator of the complaint based on the Subject of the Complaint. The RTO sends a copy of the complaint to both the Subject of the Complaint and the Investigator.

**Step 4 – Receive complaint (Subject of the Complaint and Investigator)**

Both the Subject of the Complaint and the Investigator, as determined by the RTO based on the Complaint Form, receive a copy of the complaint. Refer to the Roles and Responsibilities section above to determine who fulfills each role in the complaint process, dependent upon whom the complaint is against.

**Step 5 – Investigate complaint (Investigator, Complainant, and Subject of the Complaint)**

The Investigator is responsible for leading the investigation into the complaint. The Investigator requests information from both the Complainant and the Subject of the Complaint. The Investigator receives the information from both parties and documents the investigation findings with the complaint.

Both the Complainant and the Subject of the Complaint are responsible for gathering their own documentation, such as photographs and videos, doctors' notes, records, driver logs, Individual Service Plan (ISP), etc., and sending it to the Investigator by email.

**Steps 6 and 7 – Is the investigation exceeding the predefined time limit? (Investigator)**

The Investigator has 3 days to provide an update or close the investigation and relay the findings to the RTO for distribution back to all involved parties. If the Investigator cannot complete the tasks within this time frame, the Investigator must provide a case update to both the RTO and the Complainant. The process restarts and the Investigator has 3 more days to provide an update or close the investigation and relay the findings to the RTO.

**Step 8 – Receive case update (Complainant and RTO)**

In the case of an investigation taking longer than the predefined time limit, the Investigator provides a case update to the Complainant and RTO.

**Steps 9-10 – (RTO)**

The RTO notes of any lag in resolving the complaint in the performance log (see [Exhibit 15 – Sample DHS Complaint Performance Log](#)).

**Step 11 – Complete the Complaint Resolution Form (Investigator)**

Once the investigation is complete, the Investigator fills out the [Appendix 7 – Complaint Resolution Form](#) based on the information gathered by the Complainant and the Subject of the Complaint.

**Step 12 – Send Complaint Resolution Form (Investigator)**

The Investigator sends the completed Complaint Resolution Form by email to the RTO and all parties involved. The Complaint Resolution Form may detail steps the Subject of the Complaint should follow to correct the issue and/or prevent the issue from reoccurring.

**Step 13 – Receive Complaint Resolution Form (Complainant, Subject of the Complaint, and RTO)**

The Complainant, Subject of the Complaint, and RTO receive a copy of the Complaint Resolution Form sent by the Investigator.

**Step 14 – Close complaint (Investigator and RTO)**

The Investigator and RTO close the complaint.

**Step 15 – Store complaint (Investigator and RTO)**

The Investigator and RTO store the complaint for future reference, if needed.

**Step 16 – Satisfied with resolution?**

The Complainant and the Subject of the Complaint have the option to review the Complaint Resolution Form and decide if the outcome is satisfactory.

If the complaint is resolved with proper satisfaction from all parties, the process ends.

**Step 17 – Request a case review (Complainant and Subject of the Complaint)**

This step occurs only if the Complainant or Subject of the Complaint finds the results of the complaint unsatisfactory (Step 17), in which case either party has 10 days to request a case review by email to the RTO. The case is subsequently re-opened and investigated by the RTO.

**Steps 18-20 – (RTO)**

If a case is appealed and a review is requested by the Complainant or Subject of the Complaint, the RTO reopens the case and reviews the complaint and resolution to determine if appropriate steps were taken to resolve the issue.

If the RTO determines appropriate action was taken, it may close the complaint and alert parties of the decision (continue to Step 24).

**Step 21 – Lead/participate group meeting and collect additional info (Complainant, Subject of the Complaint, Investigator, and RTO)**

This step occurs only if the RTO deems the appropriate steps were not taken to resolve the issue. If the RTO deems the steps to resolve the complaint were inadequate, the RTO requests and leads a group meeting, in-person or by phone, with all parties involved to discuss the matter and review the evidence.

**Steps 22-24 – (RTO)**

The RTO decides on the appropriate action steps for the outcome of the meeting. If an Action Plan is not needed, it may close the complaint and alert parties of the decision (continue to Step 24). If one is needed, the RTO develops an Action Plan with the appropriate steps to be taken by either the Complainant or the Subject of the Complaint, files the Action Plan with the complaint, and notifies all parties of the outcome.

**Step 25 – Receive complaint final outcome (Complainant, Subject of the Complaint, and Investigator)**

The RTO notifies all parties involved of the final outcome of the case review by email, including the Action Plan if one was developed.

**Step 26 – Was an Action Plan assigned? (Complainant and/or Subject of the Complaint)**

If no Action Plan was developed, the process ends.

In the case the RTO finds additional steps need to be taken by the Complainant and/or the Subject of the Complaint to adequately resolve the issue and/or prevent recurrence, the Complainant and/or the subject of the complaint must execute the Action Plan.

**Step 27 – Execute Action Plan (Complainant and/or Subject of the Complaint)**

The Complainant and/or Subject of the Complaint must execute the steps assigned in the Action Plan within 3 days, or as instructed in the Action Plan. Failure from TPs to abide by the Action Plan may affect the Corrective Action Plan (and thus, the contract) for the TP; failure from the consumer or HSP to abide by the Action Plan may result in the restriction of transportation privileges.

**Step 28 – Notify RTO of Action Plan execution**

The party executing the action plan steps notify the RTO by email that the plan has been executed.

**Steps 29-30 – (RTO)**

The RTO updates the complaint with the information received regarding steps taken to implement the Action Plan and updates all parties involved in the investigation.

**Step 31 – Receive complaint update**

All parties involved in the investigation receive an update from the RTO on the complaint and steps taken on the Action Plan.

**d) References and Related Documents**

Document	Description
<a href="#">Appendix 6 – Complaint Form</a>	Form used for a TP or HSP to submit a formal complaint to the RTO.
<a href="#">Appendix 7 – Complaint Resolution Form</a>	Form filled out by an Investigator once a complaint investigation is completed; it details steps the Subject of the Complaint should follow to correct the issue and/or prevent the issue from reoccurring.
<a href="#">Exhibit 15 – Sample DHS Complaint Performance Log</a>	Log used by the TSS State Office to track TP performance issues and their resolution.

# **CHAPTER 2**

## **VEHICLE MANAGEMENT**

# INTRODUCTION

This chapter provides instructions for vehicle management and associated requirements, vehicle acquisition and disposal, and driver qualifications. Except where otherwise noted, the information in this chapter pertains to management of all vehicles owned or leased by the Department of Human Services (DHS), the Department of Behavioral Health and Developmental Disabilities (DBHDD), and those operated by the DHS Coordinated Transportation System's providers. The agency has a Fleet and Risk Manager that serves as the liaison with DOAS and other applicable agencies. The Fleet and Risk Manager provides guidance and training to DHS staff. All aspects of vehicle management at the local level are to be directed to the Regional Transportation Office (RTO). The RTO communicates with the Fleet and Risk Manager regarding vehicle acquisitions and disposals.

## A. AUTHORIZED LEVELS OF VEHICLES

### 1. Considerations

These procedures apply to all DHS/DBHDD organizations, and state operated hospitals, that operate DHS or DBHDD owned or leased vehicles.

All requests to acquire (purchase, transfer, rent, or lease), or surplus a DHS/DBHDD vehicle must be sent through the Office of Facilities and Support Services (OFSS), Transportation Services Section (TSS) Regional Transportation Office (RTO).

Procedures for DHS and DBHDD vehicle acquisitions, transfers, and disposals are provided in checklist formats in the exhibits of this manual. Organizations are encouraged to copy and use the procedures/checklists as needed when working with DHS/DBHDD vehicles.

Organizations using DHS/DBHDD vehicles should review the operating principles listed in this manual in the [Vehicle Obligations](#) section in this chapter and consider the following points of information prior to seeking approval to acquire a vehicle.

Use of current vehicle(s):

- What is the average mileage your vehicle(s) accumulates?
  - Low mileage may indicate under-utilization or may simply indicate that the vehicle(s) are primarily used for local driving. In either case, does the mileage justify replacement or acquiring additional vehicles or does it indicate a need for a closer look at the agency's vehicle use patterns?
- Does the workload of the organization demand additional acquisition?
- What type of vehicle assignment is being used?
  - Too many individual assignments often lead to under-utilization. Would it be more economical to use rental vehicles as needed rather than to purchase?
- Are you currently reimbursing employees for driving personal vehicles?
- Condition of current vehicle(s).
  - Do any of your vehicles require excessive repairs that make it economically advisable to replace them?
- Type of current vehicle(s).
  - The mix of wheelchair and seated passengers and the frequency with which you transport wheelchair users must be considered when choosing a vehicle. The provisions of the Americans with Disabilities Act (ADA) may apply. Matching the proper vehicle with the type of service can strongly improve the efficiency of your operation. For example, vans and modified vans may be uncomfortable for passengers over long distances due to the limited interior space. A minibus may be more suitable for carrying wheelchair passengers.

## 2. Authorized Vehicle Counts and Vehicle Redistribution

The Governor's Office of Planning and Budget (OPB) establishes authorized levels of vehicles (sometimes referred to as "capped" vehicles) for state operated organizations. Organizations that have authorized counts include state hospitals, outdoor therapeutic programs, and general administration. These state operated organizations must limit their possession of state-owned vehicles to the level authorized.

The Fleet and Risk Manager maintains information on authorized vehicle levels. Each year Fleet and Risk Manager submits an updated vehicle listing to DHS' Office of Budget Administration (OBA) to report details of the vehicles filling the authorized count. OBA supplies the information to the Governor's Office of Planning and Budget (OPB).

### a) Vehicle Count Adjustments

As programs expand or reduce services, there may be a need to adjust the number of vehicles operated in support of services. Any increases in the vehicle count for the state operated programs listed above require the approval of OPB. For increases, the vehicle acquisition approval process must be followed in order to justify the increase in the authorized vehicle count and to seek approval for the added acquisition (for additional information, refer to [Vehicle Acquisition \(Purchase, Transfer, Rental/Lease\)](#) section in this chapter).

### b) Vehicle Redistribution

Circumstances such as a facility closing, or contract termination may dictate the redistribution of DHS and/or DBHDD vehicles. A vehicle redistribution team will be led by the Fleet and Risk Manager convened to redistribute the agency's vehicles based on consumer needs. Other factors, such as available drivers and the financial capabilities of the receiving organization, may also be taken into account. The vehicle redistribution team will work under the guidance of the DHS Transportation Services Section (TSS) and relevant parties within DBHDD. At a minimum, the redistribution team will include the District Operations Manager (DOM), the RTO, and the Regional Services Administrator for DBHDD.

## B. VEHICLE LIFECYCLE

There are three ~~four~~ methods available to acquire DHS/DBHDD vehicles:

- Purchase
- Transfer (within DHS/DBHDD)
- Rental/Leasing

The following is information regarding requirements and guidelines for acquiring and operating a state vehicle, followed by instructions on completing the process.

The state of Georgia uses an enterprise (statewide) fleet management system, Holman Insights. The system streamlines the vehicle request and acquisition process, provides visibility and tracking of a request as it moves through the process and, after acquisition, tracks the life cycle costs of a vehicle until disposal.

As such, the vehicle request process is automated and written requests are not accepted. HOLMAN Insights is the state's system of record, and all vehicle requests must be submitted via this system.

In accordance with Section 8 of the [Georgia Fleet Management Manual](#), DHS and DBHDD use HOLMAN Insights for all vehicles. Cost data and reporting data for **all** DHS and DBHDD vehicles must be captured via the HOLMAN Insights system. For additional information regarding reporting requirements in HOLMAN Insights system, refer to [Driver Requirements, Programs, and Recordkeeping](#) section in this chapter.

The Department of Administrative Services Office of Fleet Management (DOAS-OFM) issued Vehicle Request Approval Criteria (refer to [Exhibit 16 – GA DOR Motor Vehicle Tag/Title](#)) which must be met before agency vehicle requests are presented to the Governor's Office of Planning and Budget (OPB) for further approval. Fleet Manager (FM) will evaluate all vehicle requests using these criteria prior to being presented to DOAS-OFM for review.

The U.S. Department of Energy's (DOE) Alternative Fuel Transportation program (10 C.F.R. Part 490), also referred to as the Energy Policy Act (EPAAct), requires state agencies whose motor vehicle fleet meet certain criteria to purchase 75% of their light duty vehicles as Alternative Fuel Vehicles (AFV) during the model year. To comply with this federal mandate, DHS strongly encourages requesting organizations to consider the purchase of these vehicle types, as the Department of Administrative Services (DOAS) may deny the purchase of non-AFV's. Complete information regarding the EPAAct can be found at <https://epact.energy.gov/>, or once on the site's homepage, by navigating to the *Guidance Documents* area in the *Compliance* section.

In addition, any request for vehicle acquisitions requires agencies must show the need for a vehicle replacement, funding is available and be under the agency's vehicle allocation. In most instances, agencies will be required to surplus an existing vehicle for each new vehicle being requested to ensure vehicle allocations are not exceeded. Agencies will have one year to use a surplus vehicle as a replacement in a vehicle request.

HOLMAN Insights ® is a role-based security system; Access to be requested via [https://service.doas.ga.gov/app/answers/detailopa/a\\_id/1361](https://service.doas.ga.gov/app/answers/detailopa/a_id/1361).



## 1. DHS/DBHDD Vehicle Acquisition (Purchase, Transfer, Rental/Lease)

### a) Acquisition via Purchase

#### (i) Roles and Responsibilities Overview

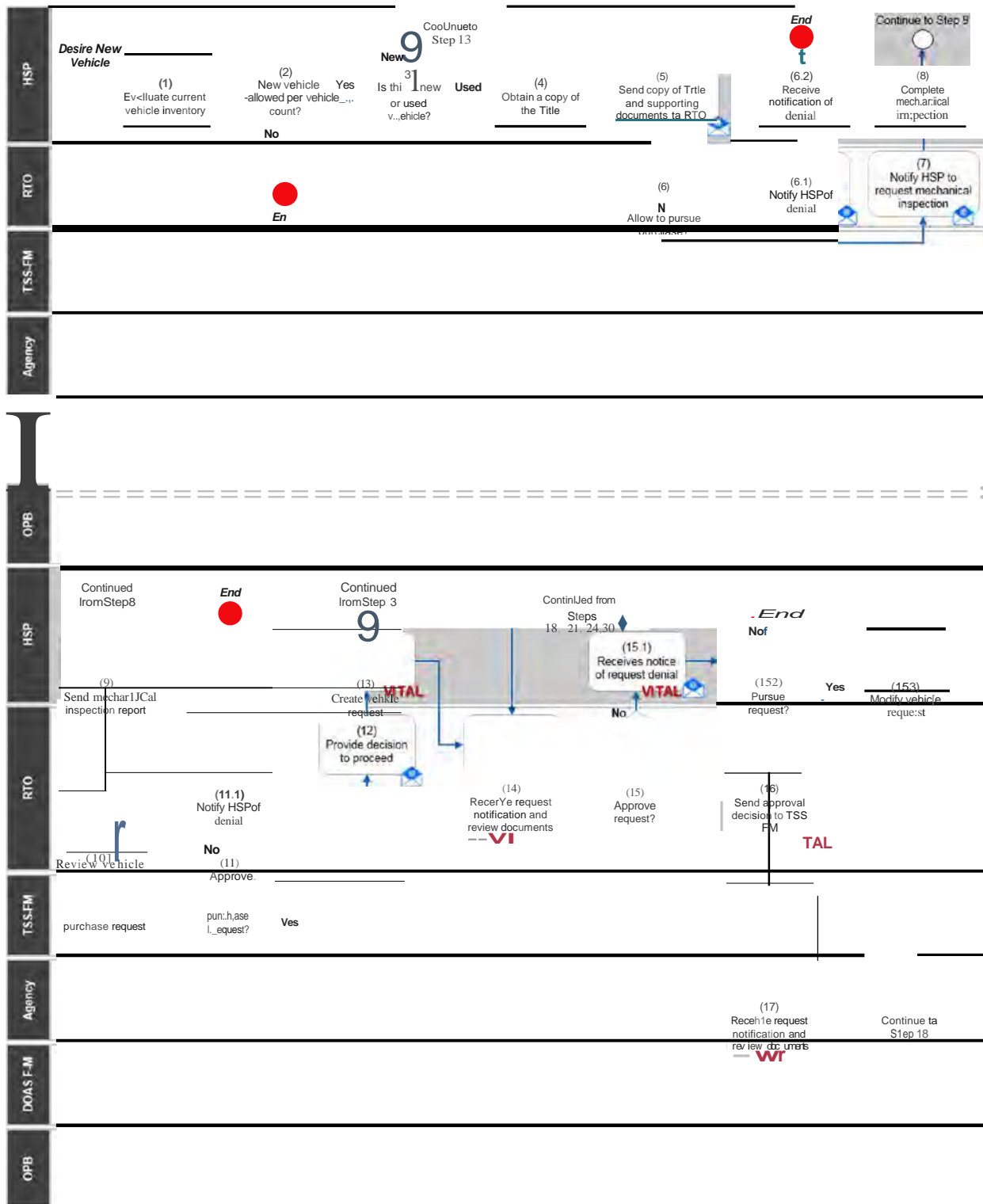
Role	Responsibility
<b>Human Service Provider (HSP)</b>	<ul style="list-style-type: none"> <li>Requests to purchase a vehicle, purchases the vehicle if approved, and prepares the vehicle for operation</li> </ul>
<b>Regional Transportation Office (RTO)</b>	<ul style="list-style-type: none"> <li>Serves as a liaison between the HSP and FM and completes activities in the vehicle purchase process</li> </ul>
<b>Fleet Manager (FM)</b>	<ul style="list-style-type: none"> <li>Serves as the primary DHS point of contact at the State Office to execute activities in completing the vehicle purchase process</li> </ul>
<b>Agency</b>	<ul style="list-style-type: none"> <li>Participates in the approval process to determine if a vehicle purchase is accepted</li> </ul>
<b>Department of Administrative Services – Fleet Manager (OFM)</b>	<ul style="list-style-type: none"> <li>Participates in the approval process to determine if a vehicle purchase is accepted</li> </ul>
<b>Office of Planning and Budget (OPB)</b>	<ul style="list-style-type: none"> <li>Participates in the approval process to determine if a vehicle purchase is accepted by verifying budget allocation</li> </ul>

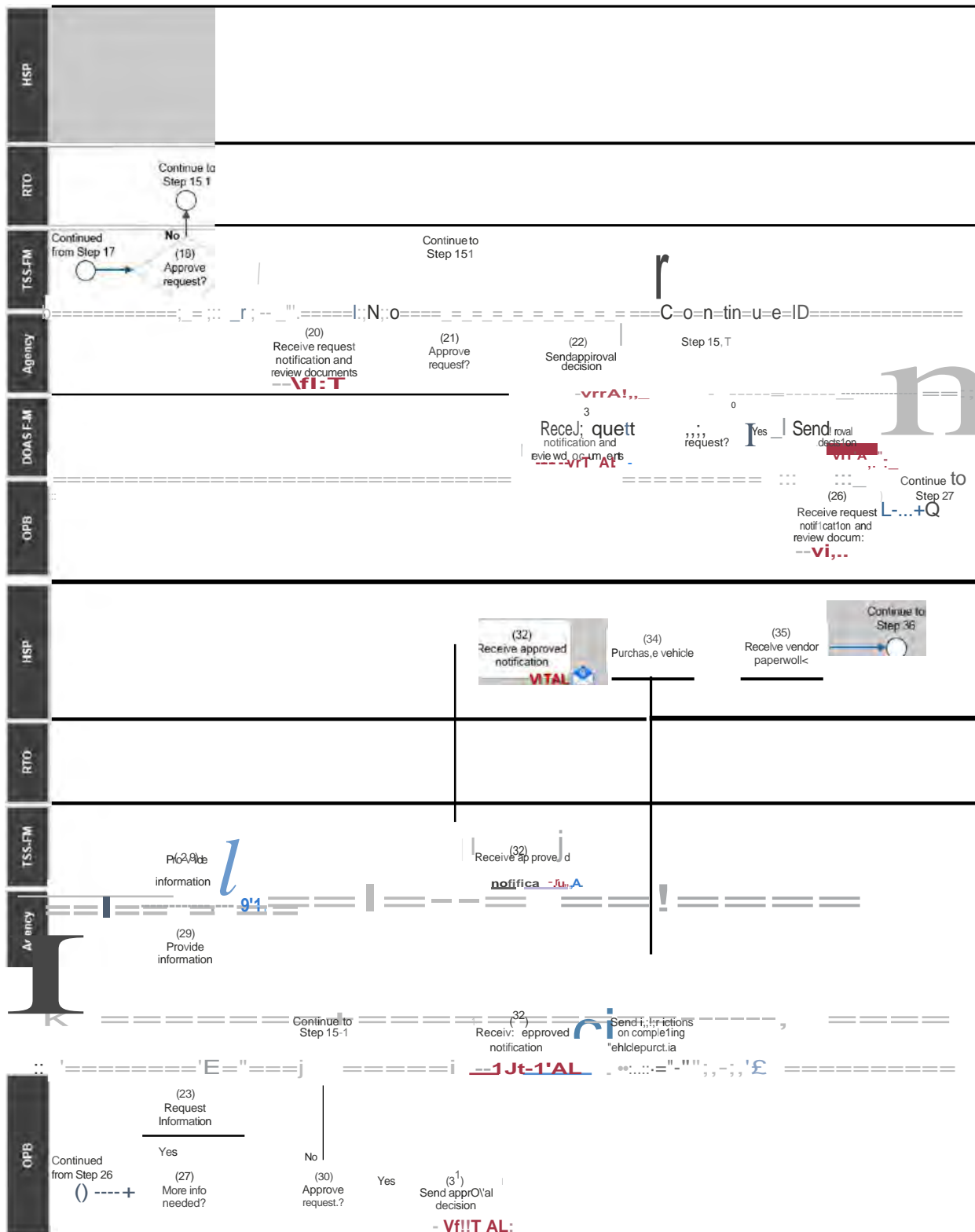
#### (ii) Application(s)

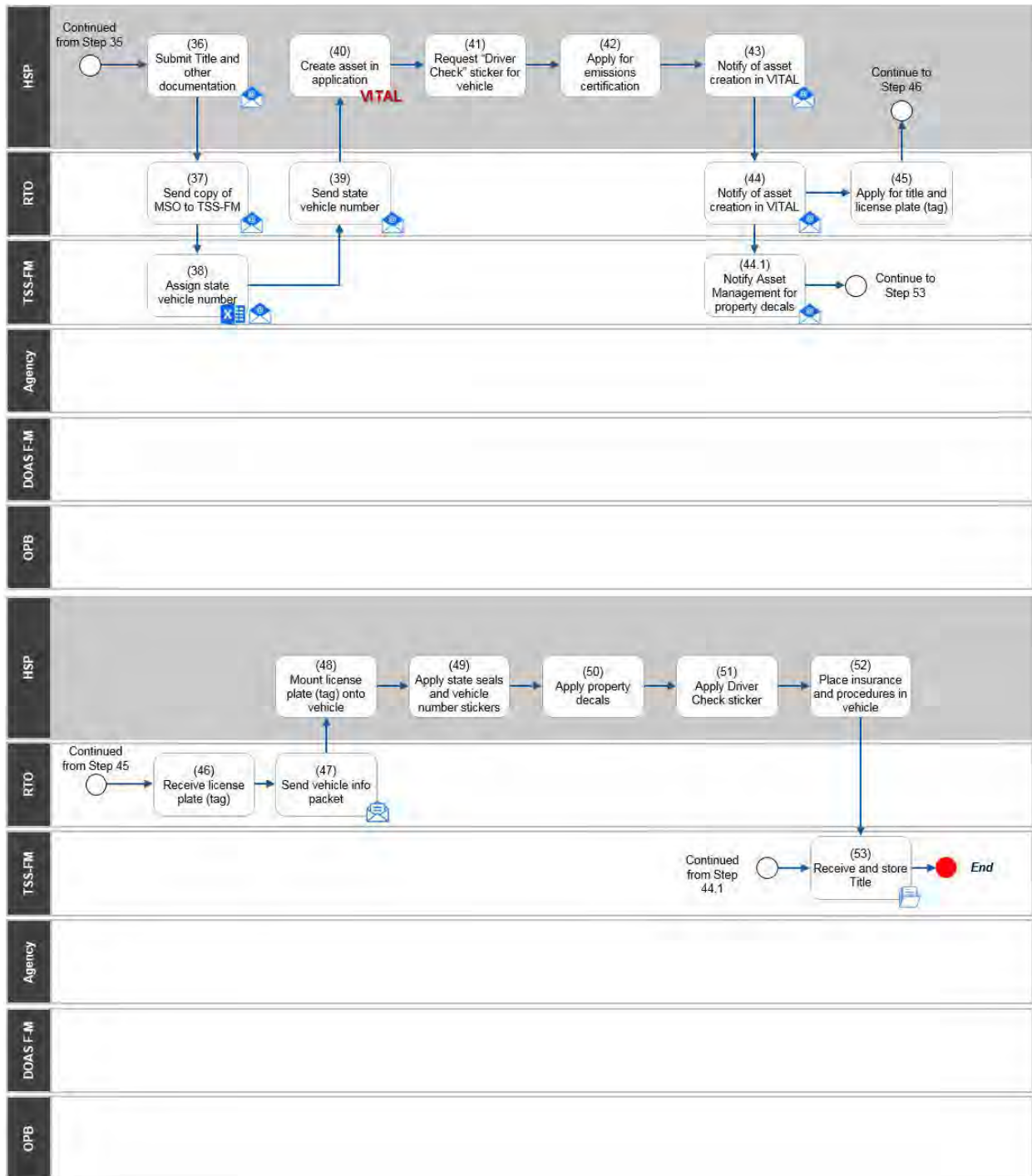
Application	Definition
<b>HOLMAN Insights</b>	The online statewide fleet management system that captures and monitors vehicle transactions and utilization. HOLMAN enables the State of Georgia to maximize how critical fleet assets are purchased, maintained, and optimized throughout their useful life. As a central repository for vehicle-related information, this system has comprehensive and specific data pertaining to vehicle mileage, cost, assignment, repair, acquisition, and disposal.

#### (iii) Process Flow – Acquisition via Purchase

The following process flow illustration depicts the full Vehicle Acquisition via Purchase process from the desire to acquire a new vehicle through the approval process and set up of the vehicle for operation. This process flow shows each responsible party and its steps throughout the process. The highlighted area below depicts the HSP role within the process. The HSP specific steps are described after the process flow.







**(iv) Procedures – DHS/DBHDD Vehicle Acquisition via Purchase**

The procedural steps and details outlined below are those that are the responsibility of the HSP and correspond to the steps highlighted in the process flow above.

**Step 1 – Evaluate current vehicle inventory (HSP)**

The HSP reviews the current vehicles and determines if a new vehicle is needed to meet the requests of the transportation services and its consumers. The vehicle purchase

request must qualify per the approval criteria (refer to [Exhibit 17 – Vehicle Request Approval Criteria](#)). The HSP should refer to [Appendix 8 – Vehicle Acquisition via Purchase Checklist](#) for a checklist of process steps to complete the addition of a new vehicle to the fleet through a purchase.

**Step 2 – Is the new vehicle allowed per the vehicle count? (HSP)**

The HSP will determine if the vehicle being offered may be accepted into its inventory. The vehicle count must remain at a 1:1 ratio and therefore another vehicle must be surplus in order to complete a new vehicle request. If the vehicle is not within the vehicle count, the HSP may not pursue the request.

**Step 3 – Is this a new or used vehicle purchase? (HSP)**

The HSP determines whether the purchase is for a new or used vehicle. The purchase of a vehicle that had a previous owner is categorized as a used vehicle and will need to receive approval from the RTO and FM, as well as complete a mechanical inspection prior to pursuing a formal request to purchase the vehicle.

Note:

Per Policy 10 section 5-4: “unless granted specific authority by OFM, all automobiles purchased by agencies must be new; however, agencies may request authorization to purchase used automobiles”. Once reviewed by the RTO and FM, approval to purchase a used vehicle must be obtained from the DOAS Office of Fleet Management.

A new vehicle is one that is brand new and has no previous owner. For a new vehicle, skip steps 4-12 and continue to step 13.

**Step 4 – Obtain a copy of the Title (HSP)**

The HSP obtains a copy of the Title from the vendor.

**Step 5 – Sends copy of the Title and supporting documents (HSP)**

The HSP sends the copy of the Title and supporting documents, such as photos, pricing, etc., to the RTO to determine if the vehicle can be accepted into its inventory.

Note:

The state cannot accept vehicles under conditions that may restrict use, assignment, or disposition, or that have existing liens upon them.

**Step 6 – (RTO)**

The RTO reviews the vehicle type and condition and determines if the vehicle purchase request can continue. If not, continue to step 6.1; if yes, proceed to step 7.

**Step 6.1**

By e-mail, the RTO notifies the HSP of the denial.

**Step 6.2**

The HSP receives the notification of denial. The process ends.

**Step 7 – (RTO)**

The RTO communicates to request to the HSP to complete a mechanical inspection on the vehicle being considered for purchase.

**Step 8 – Complete a mechanical inspection (HSP)**

The HSP takes the vehicle to a certified mechanic for a mechanical inspection. The HSP pays for the inspection.

Note:

A certified mechanic for the purposes of the DHS TSS Transportation Manual is the following:

- Current Automotive Service Excellence (ASE) certified mechanic,
- HOLMAN Insights certified vendor mechanic, or
- A mechanic certified through a technical school or college.

#### **Step 9 – Send mechanical inspection report (HSP)**

The HSP sends the inspection report and verification of any identified repairs that were identified on the report and completed by the “certified mechanic” to the RTO. The HSP maintains a copy of the inspection report and verification for its records.

#### **Steps 10-12 – (RTO)**

The RTO receives the information from the HSP for the mechanical inspection. The RTO determines whether the vehicle acquisition should continue in HOLMAN and notifies the HSP of the outcome.

#### **Step 13 – Create a vehicle request (HSP)**

The HSP creates a vehicle request using HOLMAN Insights. The HSP contacts the RTO, who will in turn contact the FM for access. The entry page for logging in can be found using the following web address:

<https://insights.holman.com/AriAccessWeb/LoginForm.aspx?ReturnUrl=%2FAriAccessWeb%2Fdefault.aspx>

To acquire HOLMAN Insights access, the HSP notifies the RTO, who will notify the FM for access.

#### **Steps 14-15 – (RTO)**

The RTO receives the request notification from HOLMAN Insights and reviews the provided documentation. The RTO makes a determination on whether to approve the request. If the RTO does approve the request, the request continues through the approval process. If the RTO does not approve the request, the RTO updates the request in HOLMAN Insights with the status and a notification email is sent to the HSP. The HSP continues to step 15.1.

#### **Steps 15.1 – 15.3 – Receives notification of request denial (HSP)**

The HSP receives a notification of the denial from HOLMAN Insights. The HSP chooses whether to pursue the request further or ceases its efforts. The HSP may modify the vehicle request by resubmitting information in the HOLMAN Insights application (Step 13).

#### **Steps 16-33 – (RTO, FM, Agency, OFM, and OPB)**

The request continues through approval process to the FM, the Agency that it will serve, OFM for insurance requirements, and OPB for budget verification. If at any point any organization denies the vehicle request, the organization updates the request in HOLMAN Insights with the status and a notification email is sent to the HSP. The HSP continues to step 15.1.

If all organizations approve the request, the FM, OFM, and HSP receive the email notification of the approval in HOLMAN Insights. The OFM emails the HSP with further instructions for completing the purchase.

#### **Step 34 – Purchase vehicle (HSP)**

The HSP purchases the vehicle from the vendor.

#### **Step 35 – Receive vendor paperwork (HSP)**

Upon purchase, the vendor where the vehicle is purchased will issue to the HSP a completed:

- [Exhibit 16 – GA DOR Motor Vehicle Tag/Title Application \(MV-1 Form\)](#)

- [Exhibit 18 – Sample Manufacturer Statement of Origin](#)
- [Exhibit 19 – Non-Leased Vehicles Odometer Disclosure Statement \(Form GA-25\)](#)

For vehicles owned by **DHS**, these documents **must list the owner exactly as follows**:

GA Department of Human Services  
47 Trinity Avenue, SW  
Atlanta, Georgia 30334

For vehicles owned by **DBHDD**, these documents **must list the owner exactly as follows**:

GA Department of Behavioral Health and Developmental Disabilities  
Floyd Building -West Tower  
2 Martin Luther King Jr. Drive SE  
Atlanta, Georgia 30334

It is very important that the owner and address be correctly listed on these forms. The appropriate agency is the owner on record and will receive the vehicle title by U.S. Postal Service mail.

#### **Step 36 – Submits Title and other documentation (HSP)**

The HSP e-mails a copy of the documents below, then mails the original documents via certified USPS, UPS or FedEx to the RTO no later than 15 days after receipt of the purchased vehicle. The aforementioned includes the following:

- Department of Motor Vehicle Safety Application for Tag and Title (Form MV-1)
- Manufacturer’s Statement of Origin (MSO)
- Non-Leased Vehicle Odometer Disclosure Statement (Form GA-25)

#### **Steps 37-39 – (RTO and FM)**

The RTO sends the relevant information to the FM to obtain an assigned state vehicle number. The state vehicle number assignment is drawn from a spreadsheet, maintained by the FM. Upon receipt, the RTO forwards the assigned vehicle number to the HSP.

#### **Step 40 – Create asset in system (HSP)**

The HSP creates a vehicle record (asset creation) in HOLMAN Insights upon receipt of the vehicle number.

If a WEX fuel program card will be used, check the box to apply for the WEX card program. For additional information on the WEX card, refer to the [WEX \(Fuel\) Program Overview](#) section in this chapter.

Refer to [Exhibit 20 – Sample Asset Creation Form](#) for a sample of the entry fields required to be completed.

#### **Step 41 – Request “Report My Driving” sticker for vehicle (HSP)**

The HSP requests a “Report My Driving” sticker from Driver-Check via the secure [www.drivercheck.net](http://www.drivercheck.net) website (refer to [Exhibit 21 – Sample Driver-Check Sticker Application](#)). The sticker must be affixed to the vehicle prior to operating the vehicle. The HSP should contact their RTO in the event they need access to the “Driver-Check” website.

#### **Step 42 – Apply for emissions certification (HSP)**

If purchasing a used vehicle more than 3 model years old, an emissions inspection is needed prior to the RTO's application for tag and title. The HSP visits a local emissions testing center to receive an emissions certification. You can visit <https://www.cleanairforce.com/motorists/emissions-testing/> for more information about emissions testing requirements.

Note:

- Vehicle emissions testing is required annually in the thirteen metropolitan Atlanta counties (Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale).
- The three most recent model year vehicles are exempt from emissions testing each year. For registration in 2023, this includes all 2021 and newer model year vehicles.
- Additionally, vehicles that are 25 model years or older are exempt from emissions testing. This includes 1998 or older model year vehicles for -2023 registration.
- Certain vehicles are exempt from emissions testing, therefore do not require an emissions inspection. Those vehicles include:

- Vehicles with a gross vehicle weight rating (GVWR) of more than 8,500 pounds.

Note:

If the tag office states the vehicle must be tested, the motorist must complete the GVWR Letter Application and present the vehicle for a visual inspection at a Georgia's Clean Air Force (GCAF) Customer Service Center. Once the GVWR letter is issued, the motorist can use the GVWR letter when registering the vehicle in lieu of presenting proof of inspection.

- Vehicles operated exclusively on diesel or another alternative fuel, e.g., natural gas, propane, etc.

Note:

Bi-fuel or flexible fuel vehicles must be tested if one of the fuels burned is gasoline.

- Motorcycles, recreational vehicles (RVs) and motor homes.

#### **Step 43 – Notify of asset creation in HOLMAN (HSP)**

The HSP notifies the RTO by e-mail of the asset creation in HOLMAN Insights.

#### **Steps 44-47 – (RTO and FM)**

The RTO notifies the FM of the asset creation in HOLMAN Insights.

The RTO visits the local county tag office and applies for the license plate (tag) and title. Where applicable, the RTO brings a copy of the emissions certification or verification of exemption. The license plate (tag) is provided to the RTO, while at the local tag office, and the title is mailed to the FM.

The RTO prepares and sends the vehicle packet to the HSP. This includes the following items:

- One license plate (tag)
- Two sets of number decals (for the front and back of the vehicle respectively)
- Two state seals
- One insurance card
- One logbook, for administrative vehicles only ([Appendix 10 – DHS Administrative Vehicle Log](#))



**Step 48 – Mount plate (tag) onto vehicle (HSP)**

The HSP mounts the plate (tag) onto the vehicle. The RTO may assist the HSP in properly applying the items to the vehicle ([Exhibit 22 – Vehicle Identification/Markings](#)).

**Step 49 – Apply state seals and vehicle number stickers (HSP)**

The HSP applies the state seals and vehicle numbers onto the vehicle ([Exhibit 22 – Vehicle Identification/Markings](#)).

**Step 50 – Apply property decals (HSP)**

The HSP applies the property decals onto the vehicle ([Exhibit 22 – Vehicle Identification/Markings](#)). Apply the property decal on the inside of the driver's door frame next to the manufacturer's identification plate.

Note:

- DBHDD sends the property decals directly to the DBHDD vehicle operators after the vehicle has been acquired. The FM sends the DBHDD Asset Manager copies of the TSS inspections for DBHDD titled vehicles as they are completed. DBHDD will use the data to verify the vehicles that have a decal and will follow-up and send decals to those vehicles missing this sticker.
- For DHS, the FM will alert DHS Asset Management there is a vehicle added and provide the necessary information to load it into PeopleSoft. The property decal will be provided by DHS Asset Management or FM. The vehicle operator applies the decal when it is sealed and numbered.

**Step 51 – Apply “Report My Driving” sticker (HSP)**

The HSP applies the “Report My Driving” sticker onto the vehicle ([Exhibit 22 – Vehicle Identification/Markings](#)). The sticker is received in the mail following the request in Step 41.

**Step 52 – Place insurance card and procedures in vehicle (HSP)**

The HSP places the insurance card and procedures in the vehicle. If the vehicle is for administrative use, also include a logbook.

**Step 53 – (FM)**

The FM receives the original title, via USPS, and stores it in the vehicle files at the State Office.

**(v) References and Related Documents**

Document	Detail
<b>Vehicle Acquisition via Purchase process map</b>	Document describing step by step activities by a task owner to purchase a vehicle and add it to the fleet
<b>HOLMAN Insights</b>	A user manual can be obtained by visiting: <a href="https://insights.holman.com/AriAccessWeb/LoginForm.aspx?ReturnUrl=%2FAriAccessWeb%2Fdefault.aspx">https://insights.holman.com/AriAccessWeb/LoginForm.aspx?ReturnUrl=%2FAriAccessWeb%2Fdefault.aspx</a> A training webinar is available on YouTube by searching for the terms <i>HOLMAN Insights Vehicle Request Training Webinar</i> .
<a href="#">Appendix 8 – Vehicle Acquisition via Purchase Checklist</a>	Checklist of steps for RTO to acquire approval and purchase a vehicle to be added to the fleet.

Document	Detail
<a href="#">Appendix 10 – DHS Administrative Vehicle Log</a>	Document to track the use of administrative vehicles.
<a href="#">Exhibit 16 – GA DOR Motor Vehicle Tag/Title Application (MV-1 Form)</a>	State-issued form for a tag and title application.
<a href="#">Exhibit 17 – Vehicle Request Approval Criteria</a>	Guide for DHS and DBHDD on the criteria for approving vehicle requests.
<a href="#">Exhibit 18 – Sample Manufacturer Statement of Origin</a>	Document indicating origin of vehicle from the original seller.
<a href="#">Exhibit 19 – Non-Leased Vehicles Odometer Disclosure Statement (Form GA-25)</a>	Form filled by dealer selling the vehicle indicating the odometer reading.
<a href="#">Exhibit 20 – Sample Asset Creation Form</a>	Sample screen shot image of the fields needing to be completed in HOLMAN Insights
<a href="#">Exhibit 21 – Sample Driver-Check Sticker Application</a>	This is for the Report My Driving Program. Note: on the application form under “Vehicle Number” use the ARI vehicle number with the 3-digit agency prefix followed by the vehicle number. The actual form can be found on the website at <a href="http://www.drivercheck.net">www.drivercheck.net</a> .
<a href="#">Exhibit 22 – Vehicle Identification/Markings</a>	Document provided to illustrate the placement of state decals, stickers, property numbers etc.

## b) Acquisition via Intra-Agency Transfer (DHS transfer to DHS or DBHDD transfer to DBHDD)

Vehicles may be acquired from other organizations within the same department operating vehicles that are surplus to their needs. For vehicles used in the DHS Coordinated System, all vehicles shall be in good working condition in accordance with the DHS contract to be eligible for a possible transfer.

### (i) Roles and Responsibilities Overview

Role	Responsibility
<b>Vehicle Owner</b>	<ul style="list-style-type: none"> <li>Conducts vehicle inspection prior to transfer and provides vehicle information and Transfer Questionnaire to the RTO</li> </ul>
<b>TSS Regional Transportation Office (RTO)</b>	<ul style="list-style-type: none"> <li>Reviews and approves/denies transfer requests and updates HOLMAN Insights with the new Vehicle Owner information.</li> </ul>

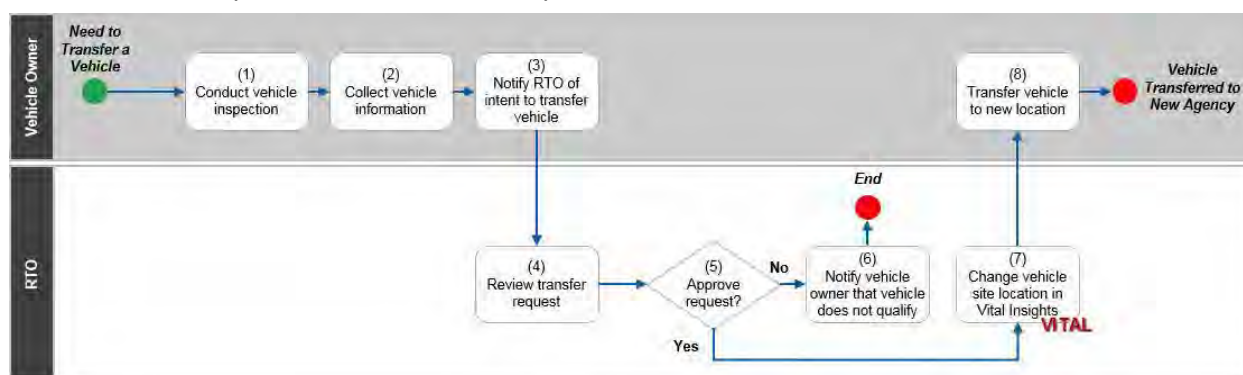
### (ii) Application(s)

Role	Responsibility
<b>HOLMAN Insights</b>	The online statewide fleet management system that captures and monitors vehicle transactions and utilization. HOLMAN

Role	Responsibility
	enables the State of Georgia to maximize how critical fleet assets are purchased, maintained and optimized throughout their useful life. As a central repository for vehicle-related information, this system has comprehensive and specific data pertaining to vehicle mileage, cost, assignment, repair, acquisition and disposal.

### (iii) Process. Flow – DHS/DBHDD Vehicle Acquisition via Intra-Agency Transfer

The following process flow illustration depicts the process to transfer vehicles. The transfer can either be from DHS to DHS or DBHDD to DBHDD. This process flow shows each responsible party and its steps throughout the process. The highlighted area below depicts the current Vehicle Owner's role within the process. The Vehicle Owner's specific steps are described after the process flow.



### (iv) Procedures – DHS/DBHDD Acquisition via Intra-Agency Transfer

The procedural steps and details outlined below are those that are the responsibility of the Vehicle Owner/Operator and correspond to the steps highlighted in the process flow above. Additional information is provided to explain what happens before and after the process activities handled by the Vehicle Owner/Operator.

#### Step 1 – Conduct vehicle inspection (Vehicle Owner/Operator)

The Vehicle Owner/Operator completes an inspection of the vehicle by completing the [Appendix 22 – DHS Vehicle Requirements and Monitoring Form](#).

#### Step 2 – Collect vehicle information (Vehicle Owner/Operator)

The Vehicle Owner/Operator shall collect and document the Vehicle Identification Number (VIN), Odometer reading, and the Vehicle Make, Model, and Year.

#### Step 3 – Notify RTO of intent to transfer vehicle (Vehicle Owner/Operator)

Using the information from Step 1 and Step 2, the Vehicle Owner/Operator completes and submits the [Appendix 12 – RTO Vehicle Transfer/Surplus Questionnaire](#) via email to the RTO. The Vehicle Owner/Operator also submits the completed inspection to the RTO.

#### Steps 4-6 – (RTO)

The RTO will review the Questionnaire and the inspection form and work with the Vehicle Owner/Operator to determine if the transfer request is approved.

If the request is approved, the RTO will update the vehicle's new location in HOLMAN Insights and notify the Vehicle Owner to complete the transfer to the new owner.

If the transfer request is not approved the RTO will discuss surplus options with the Vehicle Owner.

**Step 7 – Transfer vehicle to new location (Vehicle Owner/Operator)**

The current Vehicle Owner/Operator completes the actual transfer of the vehicle to the new owner.

**(v) References and Related Documents**

Document	Detail
<a href="#">Appendix 12 – RTO Vehicle Transfer/Surplus Questionnaire</a>	Document for RTO to complete when submitting a vehicle for transfer or surplus from the network.
<a href="#">Appendix 22 – DHS Vehicle Requirements and Monitoring Form</a>	Physical vehicle inspection report.

**c) Rental/Leasing**

Vehicle rental or leasing is available to state agencies/organizations under limited circumstances. Organizations may enter into lease agreements for vehicles in lieu of purchasing only with prior approval. Please contact the FM for additional information. Leased vehicles are considered Administrative vehicles. Refer to the [Administrative Vehicles](#) section located in this chapter for more information.

**2. Vehicle Surplus (Disposal/Turn-In) of State-Owned Vehicles**

**a) General Vehicle Disposal Guidelines**

- The Department of Administrative Services Surplus Property Division (DOAS-SPD) is responsible for redistributing and/or disposing of all state-owned property, including vehicles.
- The RTO reserves the right to determine disposal of a vehicle via surplus. All requests to the RTO for surplus vehicle turn-ins without an accompanying vehicle request will be evaluated for condition and if in good condition, possible in-region transfer will be made instead of disposal via surplus.
- Any requests for vehicle acquisitions will require mandatory surplus of one existing vehicle that meets surplus criteria. Agencies will have one calendar year to use the surplus vehicle as a replacement in a vehicle request.
- In accordance with state law, vehicles must be disposed of or may be transferred to another organization through DOAS Surplus Property.

**b) Vehicle Surplus Process**

This procedure is intended to offer a reference for Vehicle Owners/Operators by describing the process to surplus vehicles.

A vehicle that is no longer cost effective to operate or is potentially unsafe shall be disposed of promptly. Keeping a vehicle of this nature is not an efficient use of state resources and more importantly, may put occupants at risk.

There are three typical surplus/disposal methods listed below from most common to least common:

- Live Auction (AD-Authorized Disposal)** – this is a process where the vehicle is towed to an auction location and sold to the public.
- On-site Sale (IS-Internet Sale)** – this is a process where the vehicle remains at the custodian facility and is sold through an internet auction to the highest bidder.
- Redistribution (DNS-Direct Negotiated Sale)** – this is a process where a vehicle is first offered at no cost to other state entities then to an eligible local government or a non-profit

at a fixed price. Fixed price sales to Vehicle Owners/Operators would only be considered if they are an eligible non-profit organization. Otherwise, they may acquire the vehicle through the public sales process.

**(i) Roles and Responsibilities Overview**

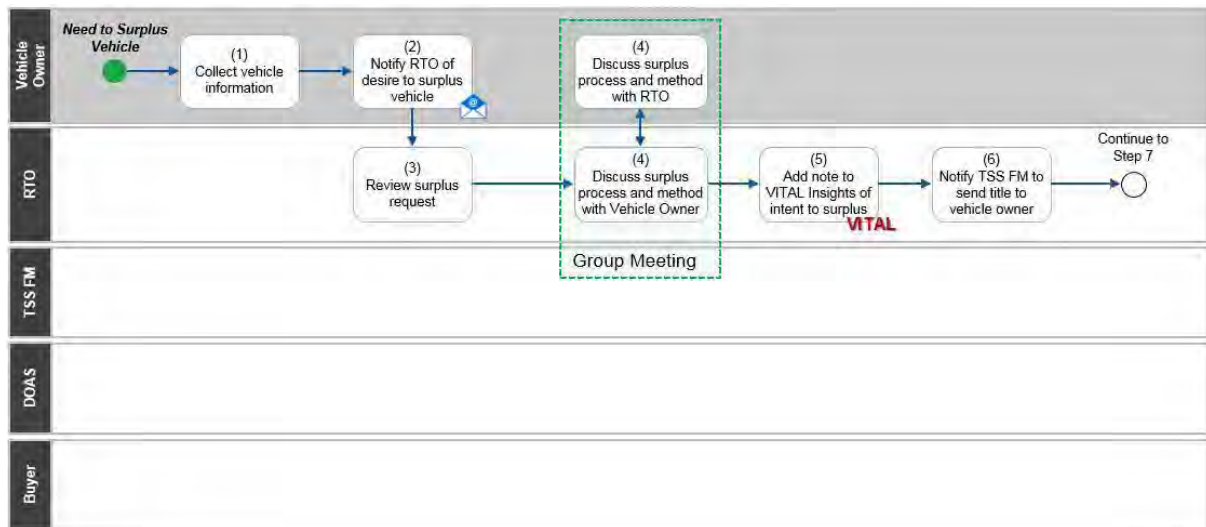
<b>Role</b>	<b>Responsibility</b>
<b>Vehicle Owner/Operator</b>	<ul style="list-style-type: none"><li>Manages the entry of vehicle information in in DOAS system Asset Works and interfaces with RTO, buyer, and towing company to transfer the vehicle and proper documentation</li></ul>
<b>TSS Regional Transportation Office (RTO)</b>	<ul style="list-style-type: none"><li>Provides guidance to Vehicle Owner on surplus options, collaborates with the TSS-FM on obtaining the vehicle title, and confirms vehicle information is correct in Asset Works</li></ul>
<b>Fleet Manager (FM)</b>	<ul style="list-style-type: none"><li>Provides Title to Vehicle Owner and confirms vehicle information in Asset Works</li></ul>
<b>Department of Administrative Services (DOAS)</b>	<ul style="list-style-type: none"><li>Reviews surplus request and approve surplus method before procuring Towing Company for authorized disposal option</li><li>Advertises vehicle, process payment, and issue Bill of Sale for internet sale process</li></ul>
<b>Vehicle Buyer / Vehicle Towing Company</b>	<ul style="list-style-type: none"><li>Schedules time with Vehicle Owner to pick up vehicle and obtain possession of the vehicle</li></ul>

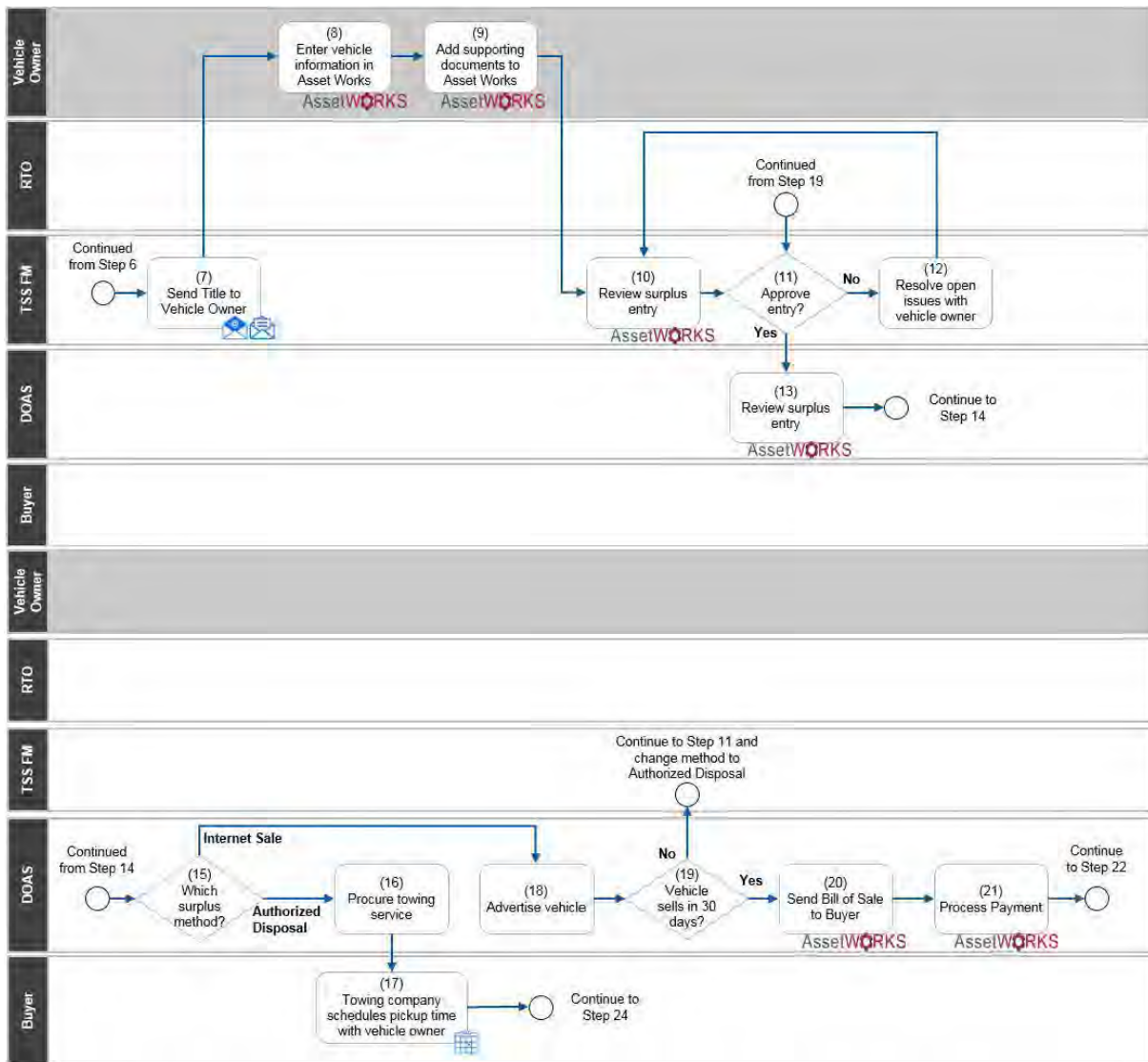
**(ii) Application(s)**

<b>Application</b>	<b>Definition</b>
<b>Asset Works</b>	The Department of Administrative Services' (DOAS) application for managing the disposal of assets.

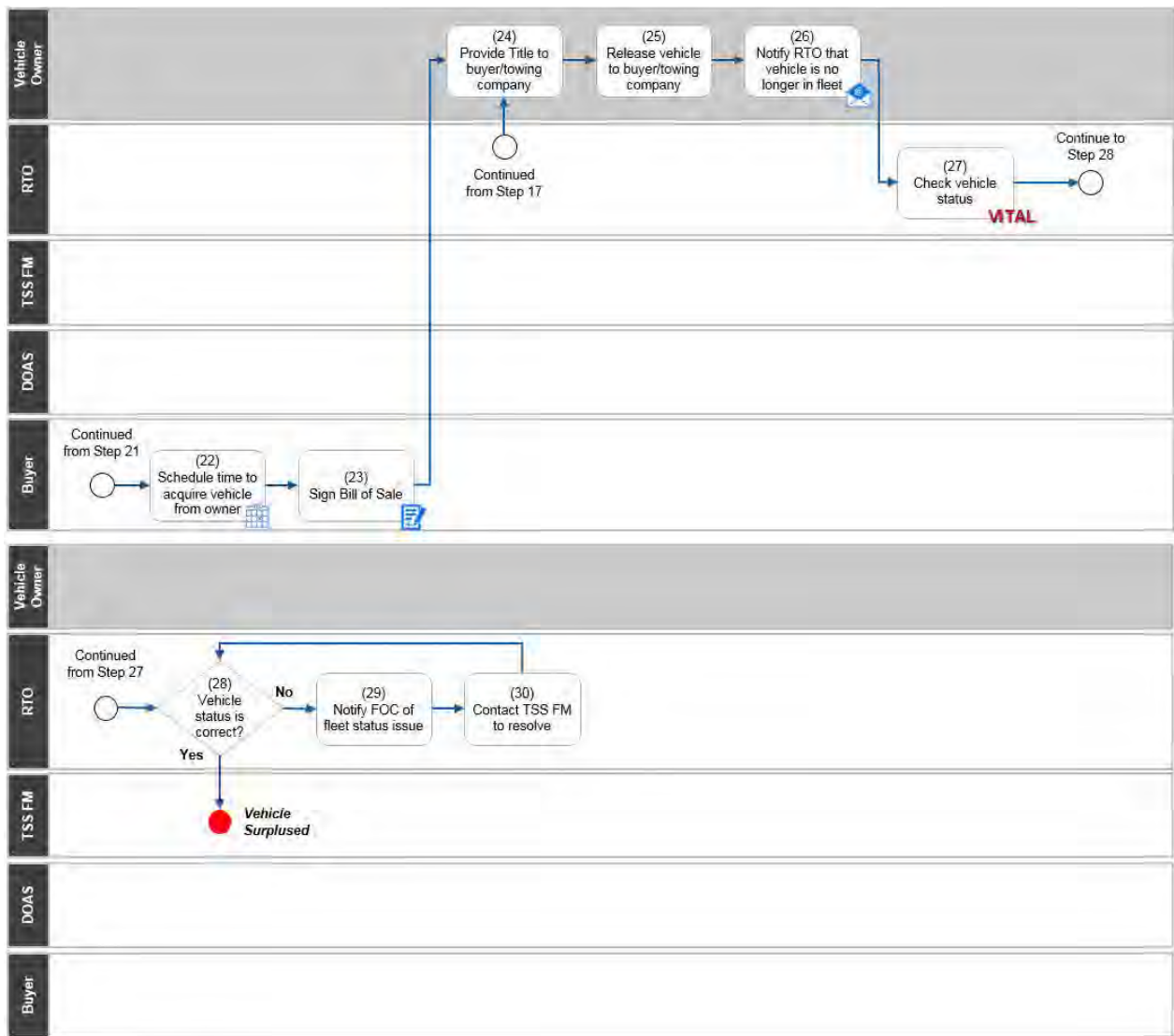
**(iii) Process Flow – Vehicle Surplus**

The following process flow illustration depicts the process to surplus vehicles. This process flow shows each responsible party and its steps throughout the process. The highlighted area below depicts the current Vehicle Owner/Operator and the Buyer/Towing Company roles within the process. The Vehicle Owner/Operator and Buyer/Towing Company specific steps are described after the process flow.









#### (iv) Procedures – Vehicle Surplus

The procedural steps and details outlined below are those that are the responsibility of the Vehicle Owner/Operator and the Buyer/Towing Company and correspond to the steps highlighted in the process flow above. Additional information is provided to explain what happens before and after the process activities handled by the Vehicle Owner/Operator and Buyer/Towing Company.

##### Step 1 – Collect vehicle information (Vehicle Owner/Operator)

The Vehicle Owner/Operator shall collect the following information:

- Vehicle Identification Number (VIN)
- Vehicle Make, Model, and Model Year
- Current odometer reading
- Completed [Appendix 14 – DOAS Surplus Vehicle Inspection Form](#)
- Completed [Appendix 12 – RTO Vehicle Transfer/Surplus Questionnaire](#)

##### Step 2 – Notify RTD of desire to surplus vehicle (Vehicle Owner/Operator)

The Vehicle Owner/Operator shall notify the RTO of the need to surplus a vehicle by sending the RTO an email with the vehicle information and documents from step 1.

### **Steps 3-7 – (RTO and FM)**

The RTO will review the vehicle information and submitted documents and work with the Vehicle Owner/Operator to determine if the surplus is approved and the best surplus method to follow. The RTO adds a memo in HOLMAN Insights of the intent to surplus. The RTO will also notify the FM to send the vehicle Title to the Vehicle Owner/Operator if approval is given to proceed with the surplus process.

The FM sends the Title to the Vehicle Owner/Operator. The Title is needed by the Vehicle Owner/Operator in order to enter a scanned copy in Asset Works and to provide the original Title to the Buyer/Towing Company.

The FM will also email instructions about the Title to the Vehicle Owner/Operator ([Exhibit 23 – Vehicle Title Handling Instructions](#)).

### **Step 8 – Enter vehicle information in Asset Works (Vehicle Owner/Operator)**

Once the Vehicle Owner/Operator receives the Title from the FM, the Vehicle Owner/Operator can start the surplus process by entering the vehicle information in Asset Works. Detailed information for using Asset Works is found on the DOAS website (<https://doas.ga.gov/state-purchasing>) and searching for *Asset Works User Guide*.

The Vehicle Owner/Operator shall contact the FM if there are any issues accessing Asset Works.

Below are additional points to supplement the Asset Works User Guide information:

- i. The “Method” in Asset Works is typically either “IS – Internet Sale,” “AD – Authorized Disposal,” or “DNS – Direct Negotiated Sale).  
Note:  
For Direct Negotiated Sales, the acquiring local government or non-profit’s information shall be added to Asset Works. DOAS will use that information to contact the Buyer and establish a price.
- ii. For Authorized Disposals enter the Vehicle Condition as “Poor” and an odometer reading entry is not required.
- iii. Enter the Vehicle Identification Number (VIN) in both the VIN field AND the Serial Number field.
- iv. The Accounting Date = current date
- v. The Accounting Description can remain blank
- vi. The Accounting Cost = 0
- vii. “Notes 1” and “Notes 2” will appear on the vehicle surplus advertisement as added information. “Notes 3” is information that is only viewed by DOAS.

### **Step 9 – Add supporting documents to Asset Works (Vehicle Owner/Operator)**

To complete the initial listing in Asset Works, the Vehicle Owner/Operator shall enter required documents to the Asset Works record.

Below are additional points to supplement the Asset Works User Guide information:

- There is a limit of 5 photos / documents per asset;
- The four recommended photos for Internet Sales are: view from front driver door, view from rear passenger corner, one interior picture with driver’s door open, and one picture of the engine;
- The front and back of the Title shall always be submitted;

- The Inspection Form shall be submitted for all Internet Sale disposals.
- Select “Create New Asset” to enter more than five documents. The NSN group code shall be “Miscellaneous,” the Description shall be “Additional Photos and Documents,” the Condition shall be “Fair,” and add “-“to all other required fields.

Once the documents are submitted in Asset Works the status of the request changes to “Waiting for Approval.”

**Steps 10-12 – (FM)**

As part of the Asset Works process, the FM is notified via email of a surplus request in Asset Works. The FM reviews the entered information and approves if the information is entered correctly. The FM will follow up with the Vehicle Owner/Operator if there are any entry issues.

**Steps 13-17 – (DOAS and Towing Company)**

After approval is provided by the FM, DOAS review the entered information and establish the next steps based on the surplus method entered. If the request is for “Authorized Disposal” then DOAS will start the process to procure a Towing Company to obtain the vehicle from the Vehicle Owner/Operator.

**Steps 18-21 – (DOAS)**

For Internet Sale disposal methods, DOAS will advertise the vehicle for up to 30 days.

If a Buyer is found within 30 days, DOAS will send the Buyer a Bill of Sale and process the payment.

If a Buyer is not found within 30 days, DOAS will notify the Vehicle Owner/Operator to change the Disposal process to “Authorized Disposal.”

**Steps 22-23 – (Buyer/Towing Company)**

When a Buyer receives the Bill of Sale (Internet Sale) or the Towing Company is notified to pick up a vehicle (Authorized Disposal), they will contact the Vehicle Owner/Operator to schedule a time to complete the transaction and take ownership of the vehicle. The Buyer signs the Bill of Sale.

**Step 24 – Provide Title to Buyer/Towing Company (Vehicle Owner/Operator)**

The Vehicle Owner/Operator shall provide the Title to the Buyer/Towing Company when the vehicle is turned over to the Buyer/Towing Company.

**Step 25 – Release vehicle to Buyer/Towing Company (Vehicle Owner/Operator)**

This is the point in the process where the vehicle leaves the Vehicle Owner/Operator’s possession.

**Step 26 – Notify RTO that vehicle is no longer in the fleet (Vehicle Owner/Operator)**

Once the Vehicle Owner/Operator is no longer in possession of the vehicle, the Vehicle Owner/Operator notifies the RTO.

**Steps 27-30 – (RTO)**

When the RTO is notified that the vehicle surplus process is over, the RTO confirms the vehicle information is correct in HOLMAN Insights. If the vehicle status is not correct, the DOM notifies the FM to resolve the issue.

**(v) References and Related Documents**

Document	Detail
<a href="#">Appendix 12 – RTO Vehicle Transfer/Surplus Questionnaire</a>	Document for RTO to complete when submitting a vehicle for transfer or surplus from the network.

Document	Detail
<a href="#">Appendix 14 – DOAS Surplus Vehicle Inspection Form</a>	Inspection to be completed before removing the vehicle from inventory.
<a href="#">Appendix 15 – DOAS Form RMS101-4 Driver Safety Tips</a>	Tips on maintaining a safe and properly running vehicle.
<a href="#">Exhibit 23 – Vehicle Title Handling Instructions</a>	Document indicating the process for handling the vehicle title transfer to the new owner.
Asset Works User Guide	Search the Georgia DOAS website: <a href="#">(state-purchasing (ga.gov))</a> for <i>Asset Works User Guide</i>

## C. VEHICLE OBLIGATIONS

The primary concerns of all vehicle operators should be the safe operation and use of vehicles. All vehicles used in the performance of transportation under any agreements with DHS must meet the requirements listed below as appropriate for each vehicle. Administrative Vehicle Requirements differ from vehicles used for consumer transportation. Information on [Administrative Vehicles](#) is in Section F below. Any vehicle failing to meet all the listed requirements, at any time, can and will be removed from service until the repairs or replacements are made to allow the vehicle to operate in compliance with the safety standards listed below.

Prior to implementation of services under Coordinated Transportation contracts, Transportation Providers (TPs) must provide certification that vehicles have been inspected and meet the DHS requirements. An up-to-date certification must be provided annually for each renewal contract. Refer to [Vehicle Monitoring and Inspections](#) section located in this chapter for additional information on certifications.

### 1. General Requirements

#### a) Vehicle Requirements

All vehicles utilized in the performance of transportation under any agreements with DHS must meet the requirements listed below.

- a. Passenger occupancy will not exceed vehicle manufacturer's approved seating capacity.
- b. Each vehicle must have a valid tag.
- c. Each vehicle operated in Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale counties must have emissions testing or emissions exemption verification. Visit <https://www.cleanairforce.com/motorists/emissions-testing/> for more information regarding emissions testing requirements.
- d. Each vehicle must not be greater than 15 years old (Difference between vehicle model year and current calendar year) and must have an operational speedometer, odometer, horn, windshield wipers, windows, headlights, front and back turn signals, parking lights, brake lights, reverse lights, and emergency flashers.
- e. Each vehicle's windows must be free from cracks and/or damage.
- f. Each vehicle must have at least two exterior mirrors (one on each side of the vehicle) and a rearview mirror free from cracks and/or damage for monitoring the passenger compartment.
- g. Each vehicle must be free of excessive body damage or body damage that interferes with the operation of doors and/or windows. The vehicles' exterior should be clean and free of excessive grime, rust, chipped paint or major dents, which detracts from the overall appearance of the vehicle.
- h. Each vehicle must have adequate tires for the vehicle based on manufactures specifications. The tires should have proper tread depth and be free from excessive wear, exposed wire, and/or damage.
- i. Each vehicle must have a spare tire and jack for emergency situations. If the vehicle is not manufactured with a spare tire and jack, the driver must explain the process for obtaining assistance in the event of a tire emergency.
- j. Each vehicle must include a step, or a safe-step stool to aid in passenger boarding. The step stool shall be used to minimize ground-to-first-step height, should have four (4) legs with anti-skid tips, sturdy metal with non-skid tread, with a height of 8.25", a width of 15", and a depth of 14" or an equally suitable replacement. (Under no circumstances will a

milk crate, plastic stool or similar substitute be considered a viable alternative for a step stool. Milk crates, plastic stools or similar substitutes shall not be permitted on any vehicle.) Step stools must be secured away from aisles and doorways while the vehicle is in motion in order to avoid obstructing the paths of passengers in the event of an emergency evacuation.

- k. Each vehicle must have functioning, clean, and accessible seat belts for each passenger seat position and each shall be stored off the floor when not in use.
- l. Each vehicle shall have access to a seat belt cutter for use in emergency situations.
- m. Each vehicle must have a standard first aid kit including, but not limited to:
  - Box of adhesive bandages
  - Antiseptic cleansing wipes
  - Dressing Pads
  - Oval eye pad
  - Conforming gauze bandage
  - Triangular bandage
  - Triple antibiotic ointment
  - Sanitizing hand wipes
  - Cold Pack
  - Cotton-tip applicator
  - Latex gloves
  - Scissors and tweezers
  - Sterile eyewash
  - Insect sting relief pads
  - Aspirin

For a complete list of a well-stocked first aid kit, refer to the Red Cross website at [www.redcross.org/](http://www.redcross.org/), or once on the site's homepage, search for *Make a first aid kit*.

- n. Each vehicle must have a "spill kit" or "biohazard kit" including but not limited to:
  - Instructions
  - Spill absorbent
  - Pair of large vinyl gloves
  - Face mask with eye shield
  - Scoop/scrapper card
  - Hazardous waste disposal bag
  - Scrub brush
  - Bio-hand cleaner
  - Packet of solidifier solution
  - Germicidal wipes
  - Antimicrobial wipes
- o. Each vehicle must have on board 3 portable triangular reflectors mounted on stands. Use of flares is prohibited and may not be carried onboard.
- p. Each vehicle shall have at least 2 seat belt extensions available. This requirement may be waived for non-passenger vehicles.
- q. Each vehicle's interior must be clean and free from torn upholstery or floor covering, damaged or broken seats, protruding sharp edges, free of dirt, oil, grease, or litter. The vehicle must have adequate sidewall padding and ceiling covering.
- r. Each vehicle door must be functioning and free from obstructions.
- s. Each vehicle must have a functioning interior light within the passenger compartment.
- t. Each vehicle must be equipped with adequate heating and air conditioning for drivers and passengers.
- u. Each vehicles floor must be covered with commercial anti-skid, ribbed rubber flooring, or carpeting. Ribbing in vehicles equipped to transport wheelchair passengers shall not interfere with wheelchair movement between the lift and the wheelchair positions.
- v. Each vehicle must be equipped with a multipurpose dry chemical fire extinguisher for use on Class A, B, and C fires, in accordance with the standards of the National Fire Protection Association's "NFPA 10" standard for portable fire extinguishers. Portable extinguishers that comply with this standard must meet or exceed the either the Fire Test

Standard-ANSI/UL 711, Standard for Rating and Fire Testing of Extinguishers, or the Fire Performance Standard-ANSI/UL 299, Standard for Dry Chemical Fire Extinguishers. Except for sedans, the fire extinguisher must be mounted securely within reach of the driver and visible to passengers for use in emergencies when the driver is incapacitated. In sedans, the extinguisher may be mounted securely in a rear compartment if there is no space for mounting it in the interior of the vehicle.

- w. Each vehicle must be clearly identified on the exterior in accordance with the [Vehicle Identification/Markings](#) section in this chapter.
- x. Each vehicle must have the following signs posted in the interior, easily visible from the passenger compartment:
  - “No Smoking, Eating or Drinking”
  - “All Passengers Must Use Seat Belts”
  - LEP Title VI Poster (contractors only)
- y. All vehicles must include an information packet. At a minimum, this packet will include:
  - Vehicle registration, if applicable
  - Insurance identification cards
  - Language/I Speak Card
  - *DHS LEP Client ID Number*
    - i. *For OFSS, the telephone number is 1-800-444-6627. The OFSS PIN is 2713-7874.*
- z. Unless exempt as defined in O.C.G.A. 40-8-76, each vehicle must utilize child safety restraints when transporting children. Child Safety seats must be properly secured according to manufacturer’s instructions. In sedans, child seats must be secured in the back seats of the vehicles and used in compliance with the manufacturer’s instructions. It is the responsibility of the parent or guardian to provide the appropriate safety seat.
- aa. Any items carried and or stored on the vehicle must be properly secured away from passenger pathways. Fire extinguishers, jacks, spare tires, walkers, client’s bags, etc. must be properly mounted/secured to avoid movement while the vehicle is in motion.
- bb. Each vehicle and all components must comply with or exceed the manufacturers, state and federal, safety and mechanical operating and maintenance standards for the particular vehicle and model.
- cc. Each vehicle that transports DHS consumers must have two-way communications capabilities.
- dd. Each vehicle must comply with all applicable state and federal laws and requirements including, but not limited to:
  - The Americans with Disabilities Act (ADA) regulations (visit the ADA website at [https://www.transit.dot.gov/sites/fta.dot.gov/files/docs/Final\\_FTA\\_ADA\\_Circular\\_C\\_4710.1.pdf](https://www.transit.dot.gov/sites/fta.dot.gov/files/docs/Final_FTA_ADA_Circular_C_4710.1.pdf)); for additional information);
  - [Georgia Department of Revenue, Motor Vehicle Division](#) (DOR-MVD) licensing requirements (for additional information, visit the Department of Revenue website at <http://dor.ga.gov> and navigate to the *Motor Vehicle Division* section);
  - Any registration requirements as set forth by the Georgia Department of Public Safety, Georgia Motor Carrier Compliance Office (visit <https://dps.georgia.gov/motor-carrier-compliance> ).

## **b) Wheelchair Accessible Vehicle Requirements**

Vehicles use in the DHS Coordinated Transportation System to transport consumers with wheelchairs and other mobility aids must be compliant with the Americans with Disabilities Act (ADA compliant). The United States Department of Transportation (DoT), Federal Transit

Administration issues minimum guidelines. The Federal Transit Administration offers some accessibility specifications for transportation vehicles in **Title 49, Subtitle A, Part 38 – Accessibility Specifications for Transportation Vehicles**. (see [ADA Regulations | FTA \(dot.gov\)](#)).

DHS contractors, sub-contractors, and other vehicle operators are responsible for ensuring compliance with the applicable minimum guidelines. Vehicle Owners/Operators must refer to **Title 49; Subtitle A, Part 38** to ensure their vehicles meet the minimum specifications prior to vehicle use. Additionally, drivers must receive the appropriate training on the securement of mobility devices. Verification of this driver training must be maintained in the driver's qualification folder.

At a minimum, the following items will be a general requirement for Wheelchair Accessible Vehicles:

- Raised roof with 56" clearance
- Functioning hydraulic/electric lift
- Handrails
- Inside/outside control access
- Shoulder restraint and lap belt
- Reflector tape on lift platform
- Four functioning floor straps free from damage and wear
- Emergency manual lift option

## 2. Required State Registrations

Non-state entities that operate vehicles to transport consumers for the state must be properly registered with the appropriate agencies, based on operator type and the service provided.

State-owned and operated vehicles operated by a non-state entity must be registered (this includes third-party operators of county transportation programs).

Governmental entities (state agencies, county government, Community Service Boards, etc.) AND vehicles titled to governments are exempt, no matter the size or type of vehicle.

A motor carrier cannot operate until a certificate is received from the Georgia Department of Public Safety; to do otherwise is a violation of Georgia Law.

- Non-governmental entities (DHS non-governmental Transportation Providers) operating vehicles **within Georgia only**, that are 10,001+ in gross vehicle weight, and/or have 10 passenger capacity (including the driver) are required to register with the Georgia Department of Public Safety's Georgia Intrastate Motor Carrier (GIMC) registration process.
  - To register or renew through the GIMC process, visit <https://dps.georgia.gov/motor-carrier-compliance> or once on the site's homepage, navigate to the *UCR GIMC* section, then to *GIMC Registration*.
- Non-governmental entities (DHS non-governmental Transportation Providers) operating vehicles **that cross state lines**, that are 10,001+ in gross vehicle weight, and/or have 10 passenger capacity (including the driver) are required to register with the federal Unified Carrier Registration (UCR) process.
  - To register or renew through the UCR process: <https://www.ucr.gov/>

For more information regarding registration requirements for the GIMC or UCR process, visit the Georgia Department of Public Safety website at <https://dps.georgia.gov/motor-carrier-compliance> and navigate to the *UCR GIMC* section.



### 3. Vehicle Identification/Markings

#### a) Identification for DHS Vehicles in the Coordinated Transportation System

Once vehicles are delivered and accepted, they must be properly identified with the state seals, state assigned vehicle numbers, Report My Driving sticker and inspection decals and stickers. This must be completed prior to the vehicles being placed into service. All vehicles must be properly identified as publicly owned vehicles, except those determined to be exempt by the Governor's Office of Planning and Budget. Refer to [Exhibit 22 – Vehicle Identification/Markings](#) for detailed information.

#### b) Identification for Non-DHS/DBHDD Vehicles in the Coordinated Transportation System

All non-DHS vehicles that are operated to transport consumers in the Coordinated Transportation System are required to have visible markings on the exterior of the vehicle that clearly identify the transportation provider operating the vehicle.

### 4. State-Owned and State-Leased Vehicle Control and Use

Organizations that are assigned DHS and/or DBHDD vehicles (also referred to as state-owned or state-leased vehicles where applicable) are responsible for ensuring vehicles are properly used, maintained (including repairs), and properly disposed. This section provides guidelines to help assure state-owned or state-leased vehicles are used in a cost effective and efficient manner and that all vehicles used to transport consumers are operated and maintained for maximum safety. The following covers: operating principles; assignment; authorized and unauthorized use; maintenance; disposal; and record keeping.

#### a) Operating Principles

Certain basic management principles must be followed when operating State owned or State leased vehicles. These include:

- Acquire the most economical vehicles needed to provide services.
- Restrict use to tasks or functions that require the use of vehicles.
- Locate vehicles as close to the work-site as use, personnel, service and security will permit.
- Pool vehicles whenever possible to maximize use.
- Establish rigid controls over vehicle use using these guidelines and include in [Appendix 10 – DHS Administrative Vehicle Log](#) (log book for administrative vehicles only)
- Restrict assignment of vehicles for exclusive individual use whenever possible.
- Monitor and maintain close control over each vehicle's operation, repair costs, preventive maintenance program, and deadline time.
- Drivers are to be made aware of their responsibilities, including the authorized and unauthorized use of vehicles, driver training, and accident reporting procedures.
- Unsafe vehicles are not to be used and should be disposed of per the appropriate procedures.
- To assure that vehicles titled to the state are used efficiently, effectively, and fully support state operated programs, the following guidelines will be used as a minimum requirement for the use of vehicles for passenger transportation:

Provide, at a minimum, 500 one-way passenger trips per month in support of consumer transportation,

- or -

Use a vehicle, at a minimum, 1,000 miles per month,

- or -

Use a vehicle, at a minimum, 80 hours per month.

## **b) Operational Assignment**

Historically, organizations ineligible for general assignment of a vehicle may receive an operational assignment from DHS and/or DBHDD or from an organization that has general assignment of a vehicle. Operational assignments are mostly used by contractors that subcontract transportation services to a direct provider. Operational assignment makes the operating organization responsible for vehicle maintenance, operation and insurance coverage.

Effective July 1, 2017, operational assignments are no longer permitted by TSS.

\*Minimum usage requirements also apply to operational assignments.

## **c) Individual/Personal Assignment**

Assignment means that an employee has exclusive control over or is the only employee who routinely drives the vehicle. State agencies are required to officially assign a vehicle to an employee when certain conditions exist, and it is not practical to share the use of the vehicle. The following requirements must be met before an individual is authorized exclusive use of a state-owned vehicle:

- The annual miles driven must be a minimum of 14,000. If an employee fails to drive 14,000 miles in one year and 3,500 miles the following quarter, vehicle assignment will be revoked. This minimum mileage refers only to miles driven exclusively for conducting state business.  
\*Miles driven between workstations and home are not state business miles.
- The justification for each vehicle assignment must be documented and approved by the Governor's Office of Planning and Budget (OPB) using the online [Exhibit 16 – GA DOR Motor Vehicle Tag/Title Application \(MV-1 Form\)](#) in the fleet management database. Each MV-1 form must be electronically signed by the agency head. Justification for an employee to drive a vehicle home on a routine basis must also be documented on this form. It is the responsibility of each agency to keep these records current (within 30 days of a change). MV-1 forms must be updated at each new and reassignment of a vehicle to an employee.

## **d) Authorized and Unauthorized Use**

DHS and DBHDD vehicles are authorized for use in the performance of all travel and transportation duties associated with providing services. These vehicles are not authorized for personal trips not related to the tasks for which they were assigned. When in doubt, the deciding factor should be whether the use is in the best interest of the state rather than of the driver, and if the use is defensible in the event of public criticism, questions from higher authority, or from a state or DHS auditor.

### **(i) Authorized Use**

- Travel between place of dispatch and place of performance of official business.
- When on official travel status, between the place of official business and the place of temporary lodging, dining, or emergency care.

- Transport of officers, employees or guests of the State when they are on official state business.
- Transport of consultants, contractors or commercial firm representatives when such transport is in the direct interest of the State.
- Transport of materials, supplies, parcels, luggage or other items belonging to or serving the interests of the State.
- Transport of any person or item in an emergency.
- Travel between the place of dispatch and place of performance of state business to your personal residence when specifically authorized by the proper authority.
- Transport of consumers on planned or supervised trips.

#### **(ii) Unauthorized Use**

Unauthorized use of DHS and DBHDD vehicles should result in immediate disciplinary action. State employees are not covered by liability insurance when engaging in unauthorized use of state vehicles. The following uses of state-owned vehicles are prohibited:

- Any use for personal purposes, other than preauthorized commuting.
- Transport of families, friends, associates or other persons who are not employees of the State or serving the interest of the State.
- Transport of cargo that is unrelated to the performance of official state business.
- Transport of acids, explosives, weapons, ammunition or highly flammable material except by specific authorization or in an emergency.
- Transport of any item or equipment projecting from the side, front or rear of the vehicles in a way that constitutes an obstruction to safe driving or a hazard to pedestrians or other vehicles.
- Attending sporting events, including hunting and fishing, that is unrelated to state business.
- Extending the length of time a vehicle is in your possession beyond that which is required to complete the official purpose of the trip.
- Volunteers, contracted employees, or employees who work for employment agencies are not authorized to operate DHS and DBHDD vehicles.

### **e) Vehicle Maintenance and Repair**

All vehicles must be properly maintained to provide safe and dependable service. Timely and thorough maintenance reduce interruptions in service, decrease downtime, and help minimize operating costs. Vehicle maintenance is monitored on all vehicles used for transporting consumers (refer to the [Vehicle Monitoring and Inspections](#) section in this chapter).

#### **(i) Types of Maintenance**

There are two types of maintenance programs. One is scheduled or preventive maintenance, and the other is unscheduled, also known as repair on demand service. DHS and/or DBHDD require a combination of these.

Scheduled maintenance allows an organization to operate safer and more dependable vehicles. With this program, all vehicles are checked at regular intervals. The maintenance schedule will depend upon the type of vehicles used, the accrual rate of miles, and the driving conditions under which they operate.

Unscheduled maintenance requires drivers that are conscientious and sufficiently technically proficient to identify, report, or repair all problems. Unscheduled maintenance involves greater risks than the preventive maintenance program, which includes regular driver inspections and regular maintenance checkups.

Two forms are included to assist in keeping vehicles well maintained. These forms must be used by your organization to assist in managing vehicle maintenance. These forms may be supplemented with items to be checked. However, the forms list the minimum areas to be checked on your vehicles periodically, whether it is on a daily or an annual basis. The forms are:

- The first, [Appendix 18 – Daily Vehicle Inspection Sheet](#) must be completed by the driver.
- The second, [Appendix 19 – Annual Safety Inspection Report](#), must be completed by a certified mechanic. A certified mechanic for the purposes of the DHS Transportation Manual is the following:
  - Current Automotive Service Excellence (ASE) certified mechanic,
  - HOLMAN Insights certified vendor mechanic (guidance on vendor location can be found in HOLMAN Insights user guides), or
  - a mechanic certified through a technical school or college, and
  - The inspection is valid for one calendar year.

### **(ii) Warranty Services**

All new passenger or utility vehicles should be issued some type of warranty or limitation document at time of delivery. This is provided as a resource for repair service without charge within a given time frame or mileage limitation. The minimum warranty is usually for 12,000 miles or 12 months and may have some specific limitations.

Vehicle operators must follow the manufacturer's warranty service as described on the agreement. Drivers should be aware of and report any defects, malfunctions or unusual noises. Once a deficiency is noted, a determination should be made as to whether the defect is covered under the basic warranty.

If repairs are covered under the warranty agreement, the authorized service center should be contacted immediately to avoid future costly repairs. Not reporting a small defect may develop into a costly repair bill later. Most warranties are categorized as: basic warranty; battery warranty; tire warranty; warranty period for items not covered; and a list of items not covered by warranty.

If there are any questions concerning warranties, contact a dealership or an authorized service center. Making full use of warranties can result in significant savings for your organization.

### **(iii) DOAS Contract Maintenance Program**

Department of Administrative Services' Office of Fleet Management (OFM) contracts with Automotive Resources International (ARI) for use of a call center, emergency roadside assistance and vehicle maintenance services for state owned or leased vehicles. For additional information, please visit the DOAS website at [www.doas.ga.gov](http://www.doas.ga.gov). To receive an estimate on the cost to place vehicles on this program, contact OFM by phone at 404-656-6295 or by email at [Michael.Marsh@doas.ga.gov](mailto:Michael.Marsh@doas.ga.gov).

Per Policy 10 Section 4.3: In order to facilitate the gathering of maintenance data and ensure proper maintenance of older motor vehicles, all light duty (under 9,000 lbs. gross vehicle weight rating) passenger motor vehicles must be enrolled in the maintenance program overseen by OFM unless the motor vehicles are being maintained at an on-site repair facility. However, all state motor vehicles, regardless of their participation in the OFM maintenance program, must be populated in the OFM database for proper record-keeping and documentation purposes. All new vehicles must be enrolled in the ARI maintenance program, in addition to any state vehicle that is greater than 10 years of age

or older as well as state vehicles with over 135,000 miles must also be enrolled in the program.

#### Toll Fees and Driving Violations Payments

The State of Georgia is not exempt from tolls charged on highways. Each individual driver is responsible for paying all tolls and filing for reimbursement with his/her individual agency as a part of the driver's travel expenses, if on official state business.

Fines for traffic violations incurred by individual drivers of state vehicles are the responsibility of the driver and will be paid by the driver. Additional penalties may be imposed on drivers for non-payment of fines incurred while operating a state vehicle.

## D. VEHICLE MONITORING AND INSPECTIONS

### 1. Vehicle Monitoring and Inspection Process

The Regional Transportation Office (RTO) monitors compliance with vehicle management requirements, including the use and compliance of the DHS and/or DBHDD owned or leased vehicles and vehicles used in the performance of Coordinated Transportation contracts. All vehicles will be monitored through site visits/physical inspections. The following methods will be used to accomplish monitoring/ inspection.

In instances where Prime Contractors use Subcontractors, the Prime Contractor is contractually responsible for monitoring and inspecting all vehicles and related files used by their Subcontractors in the delivery of coordinated transportation services. Additional information concerning this requirement is included in [Prime Contractor Directed Vehicle Monitoring and Inspection](#). The RTO conducts onsite random monitoring of 20% of the Prime Contractors' records, Subcontractors' vehicles, and subsequent administrative files. The RTOs are responsible for monitoring and inspecting 100% of the DHS/DBHDD owned/leased vehicles operated within their Regions and of Prime Contractor vehicles in cases where there are no subcontractors. These inspections are required to be physical inspections every fiscal year. In the event of a natural disaster, pandemic, or other event which would prevent physical inspections from being completed, desk reviews may be appropriate. The need for desk reviews will be determined by the TSS-Section Manager and SOMs for each impacted region.

The RTO conducts site visits in order to provide assistance in vehicle and property management to:

- Monitor vehicle compliance and use;
  - Monitor driver qualifications;
  - Verify and reconcile records maintained at all levels in support of human service programs.
- The monitoring and inspections consist of ensuring that: all vehicles comply with vehicle requirements; all vehicles maintain the appropriate administrative documentation; required safety equipment is present and in good working order; and all vehicles are properly maintained.

It shall be noted that heavy duty, maintenance, and administrative vehicles may not be subject to adherence to the same guidelines as vehicles that do transport consumers.

#### a) Roles and Responsibilities Overview

Role	Responsibility
<b>Regional Transportation Office (RTO)</b>	<ul style="list-style-type: none"> <li>▪ Party responsible for leading the monitoring and inspection process</li> </ul>
<b>Vehicle Operator</b>	<ul style="list-style-type: none"> <li>▪ Parties consisting of Prime and Subcontractors, Human Services Providers (HSPs) and State Agencies (State) responsible for complying with DHS requirements and for participating in the monitoring and inspection process</li> </ul>

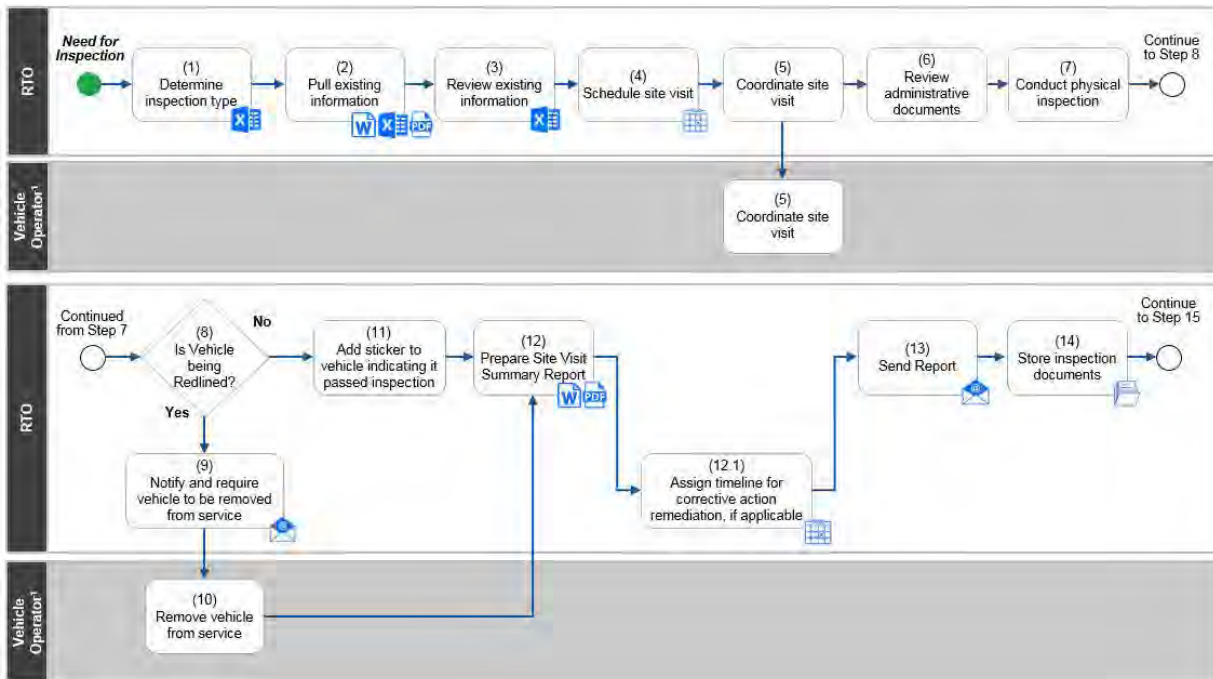
#### b) Application(s)

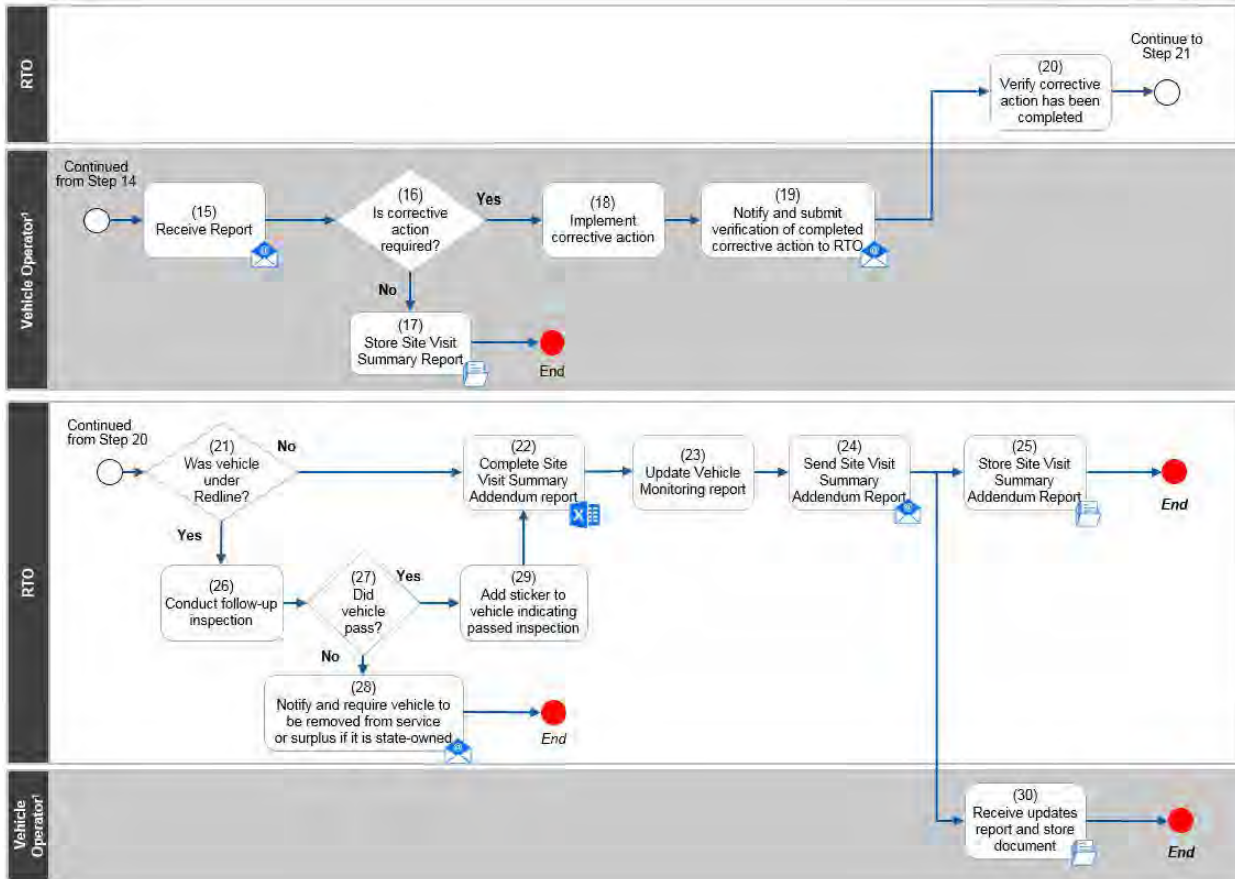
Application	Definition
<b>HOLMAN Insights</b>	The online statewide fleet management system that captures and monitors vehicle transactions and utilization. HOLMAN enables the State of Georgia to maximize how critical fleet

Application	Definition
	assets are purchased, maintained and optimized throughout their useful life. As a central repository for vehicle-related information, this system has comprehensive and specific data pertaining to vehicle mileage, cost, assignment, repair, acquisition and disposal.
eTrips	Transportation Request Information Processing System, the application for client registration and trip ordering

### c) Process Flow – Vehicle Monitoring and Inspection

The following process flow illustration depicts the Vehicle Monitoring and Inspection process from the point of a need for monitoring/inspection through the completed monitoring/inspection of the vehicles. This process flow shows each responsible party and its steps throughout the process. The highlighted area depicts the vehicle operator's roles within the process. The specific steps are described below in the process flow.





#### d) Procedures – Vehicle Monitoring and Inspection

The procedural steps and details outlined below are those that are the responsibility of the Vehicle Owner/Operator and correspond to the steps highlighted in the process flow above. Additional information is provided to explain what happens before and after the process activities handled by the Vehicle Owner/Operator.

##### Steps 1-4 – (RTO)

The RTO determines the inspection type, prepares for and schedules the site visit. The RTO provides a two-week notice of the scheduled site visit. The preparation process includes reviewing issues identified in the prior year’s inspections and the spreadsheet of the Vehicle Operator’s inspection of its Subcontractors and required fixes, if applicable. It also includes the [Appendix 20 – Driver Qualification Folder \(DQF\) Checklist](#) and HOLMAN Insights and TRIP\$ reports for vehicle and ride detail information

Inspections can be either scheduled or random inspection. The RTO extracts the vehicle inventory from an Excel spreadsheet listing all vehicles to be inspected.

##### *Random Inspections:*

Random inspections are used by both the RTO and the Vehicle Operator to ensure the overall safety, as well as compliance with manual requirements. The RTO has the right to randomly inspect vehicles and/or administrative files when a safety complaint has been received. Additionally, the RTO has the right to complete random inspections on Subcontractor vehicles and administrative files previously inspected by the Transportation Provider – Prime Contractor (TP).



The TP has the right to randomly inspect Subcontractor vehicles and/or administrative files when a safety complaint has been received in addition to any vehicles and/or files previously identified as needing corrective action.

*Safety related random inspections:*

If the RTO or TP receives any form of complaint concerning safety related issues, they are to immediately complete a random inspection of the vehicle and/or files. These inspections are not to be scheduled as to ascertain the actual condition of the vehicles and/or files without notice. Any corrective actions identified during a random inspection will be documented as a random inspection on the [Appendix 21 – Site Visit Summary Report](#) and must be corrected within the required time frames.

*Contractor monitoring random inspections:*

The TP is the responsible party for inspecting Subcontractor vehicles and administrative files; however, the RTO is responsible for monitoring the TP for manual and contract compliance. The RTO completes random inspections annually. The RTO will inspect 20% of the sub-contractor vehicles and administrative files that were inspected by the TP in that same year. The process for determining the 20% to be inspected involves using a random number generator as to ensure unpredictability in the selection of vehicles and files. Once the RTO has determined which vehicles and files are to be monitored, it schedules the inspections with the TP. The RTO does not indicate or include which vehicles or files will be checked during the inspections. The RTO completes Site Visit Summary Report to be sent to the TP summarizing the random inspections and indicating corrective actions identified. The TP is responsible for ensuring the Subcontractors complete the corrective actions within the required time frames.

In the event the TP has no subcontractors, the RTO will inspect 100% of the fleet and administrative files.

**Step 5 – Coordinate site visit (RTO and Vehicle Operator)**

The RTO coordinates the site visit with the Vehicle Operator.

Note:

Coordinating efforts to have vehicles located at a common site for RTO and vehicle operator for monitoring and inspections represents the most effective and efficient method. When preparing for vehicle inspections or site visits, the RTO and vehicle operator will coordinate to determine the best location for the vehicle monitoring and inspections. The date and time of the vehicle monitoring and inspections must not disrupt the transportation of consumers. If the majority of vehicles are housed or based at the same location, this should be designated as the common location for all vehicle monitoring and inspections.

During inspections at common locations, the site's designated Point of Contact's or driver's signature (when the Point of Contact is unavailable) is required on the Vehicle Monitoring and Requirements Form after the completion of the vehicle inspection.

The vehicle operator must have vehicle files and driver qualification folders, containing all required information as instructed in the Transportation Services Section (TSS) Transportation Manual, available for review at the designated common location. Exceptions to this mandate must be requested in advance and directed to the RTO. When justified, the RTO may grant an exception on a case-by-case basis.

**Steps 6-9 – (RTO)**

The RTO conducts the site visit and the physical inspection, completing both appendices ([Appendix 11 – Site Visit Questionnaire](#) and [Appendix 22 – DHS Vehicle Requirements and Monitoring Form](#)). The RTO reviews the following:

- Administrative documentation ([Appendix 3 – Administrative Documents Review](#))
- [Appendix 10 – DHS Administrative Vehicle Log](#) (for administrative use vehicles only)
- [Appendix 18 – Daily Vehicle Inspection Sheet](#)
- [Appendix 19 – Annual Safety Inspection Report](#) by certified mechanic. Verification of the mechanic's certificate is required. Acceptable forms of verification are the current Automotive Service Excellence (ASE) certificate, a certificate from the technical school or college, or via the ARI authorized vendors.

Note:

A certified mechanic for the purposes of the DHS TSS Transportation Manual is the following:

- Current ASE certified mechanic
- HOLMAN Insights certified vendor mechanic (guidance on vendor location can be found in HOLMAN Insights user guides), or
- A mechanic certified through a technical school or college
- [Appendix 20 – Driver Qualification Folder \(DQF\) Checklist](#)
- Repair and maintenance documents
- Insurance Declaration Page
- Site drug and alcohol policy
- Emissions certification (refer to [Step 45 Under Acquisition via Purchase](#))

Note:

The physical inspection is a non-mechanical inspection only with the exception of testing lifts.

Should the TSS-Section Manager and State Operations Managers determine desk reviews will be necessary, the RTO conducts the site visit and the desk reviews, completing the following:

- [Appendix 11 – Site Visit Questionnaire](#)
- [Appendix 18 – Daily Vehicle Inspection Sheet](#)
- [Appendix 19 – Annual Safety Inspection Report](#) by certified mechanic. Verification of the mechanic's certificate is required. Acceptable forms of verification are the current Automotive Service Excellence (ASE) certificate, a certificate from the technical school or college, or via the ARI authorized vendors.

Note:

A certified mechanic for the purposes of the DHS TSS Transportation Manual is the following:

- Current ASE certified mechanic
- HOLMAN Insights certified vendor mechanic (guidance on vendor location can be found in HOLMAN Insights user guides), or
- A mechanic certified through a technical school or college

- Repair and maintenance documents
- Insurance Declaration Page
- Site drug and alcohol policy
- Emissions certification (refer to [Step 45 Under Acquisition via Purchase](#))

The RTO makes a determination at the conclusion of the physical inspection/desk review as to whether the vehicle will be “Redlined”. The RTO immediately notifies the vehicle operator requiring the vehicle to be removed from service. The RTO places a “Redline” sticker on the vehicle at this time indicating it has failed the inspection process. The RTO alerts the Vehicle Owner in the event the vehicle has successfully passed the inspection.

Note:

State owned vehicles in “Redline” status that are not repaired within ninety days from date of inspection will be surplus. Additionally, state owned or stated leased vehicles may be directly placed into surplus in lieu of making repairs.

Note:

During a vehicle inspection, inspected items will fall into 2 categories, “Checked” and “Needs Attention”. If an inspected item “Needs Attention” based on the Inspector’s finding, the discrepancy may require either a corrective action or the vehicle may be “Redlined” by the inspector.

A vehicle, not “Redlined”, but requiring a corrective action can still be operated if the identified issue is corrected within an agreed upon timeframe, not to exceed 30 days. If the corrective action(s) is not corrected in the timeline specified, the vehicle may be “Redlined” until discrepancy(s) are **corrected**, and Inspector has re-inspected the vehicle.

A “Redlined” vehicle is designated with the placement of a sticker on the vehicle’s windshield. “Redlined” vehicles cannot be used for the transportation of staff, consumers or passengers. “Redlined” vehicles can only be driven to receive the needed repairs or corrections. The Redline sticker can only be removed by the Inspector. Redlining the vehicle will be the result of any of the redline Items listed below, or if another severe safety issue is found during a random or scheduled inspection.

Refer to [Exhibit 24 – Corrective Action and Redline Action Items List](#) for additional information.

#### **Step 10 – Remove the vehicle from service (vehicle operator)**

The vehicle operator removes the vehicle from service.

#### **Steps 11-14 – (RTO)**

The RTO places the pass or fail sticker on the vehicle, prepares an [Appendix 21 – Site Visit Summary Report](#), sends the report, via email in a PDF format, to the vehicle operator and stores the report in the regional transportation office. This report is sent within two weeks of the inspection. Additionally, the Site Visit Summary Report contains a timeline to correct deficiencies (deemed not serious enough to “Redline” the vehicle, see [Exhibit 24 – Corrective Action and Redline Action Items List](#) in the event there were corrective actions identified during the inspection process.

#### **Steps 15-18 – Receive report and evaluate outcome (vehicle operator)**

The vehicle operator receives an email containing a PDF of the Site Visit Summary Report and evaluates the outcome. The report is filed in the event corrective action is not required. The vehicle operator implements corrective action (see [Exhibit 5 – Sample Corrective Action Plan](#)) in the event such a notification was indicated on the Site Visit Summary Report. Corrective action must be completed within the timeline specified in the Site Visit Summary Report, unless a prior written rationale is received and authorized by the RTO.

**Step 19 – Notify and submit verification of completed corrective action to RTO (vehicle operator)**

The vehicle operator is required to show proof of remediation of corrective action items (non-Redline). The documentation to be provided includes but is not limited to the following:

- Repair records and receipts
- Maintenance records/logs
- Annual safety inspection form completed by a certified mechanic

The verification of documentation, at the discretion of the RTO, may be verified electronically. Documents shall be mailed via USPS, UPS, or FedEx to the attention of the RTO upon completion of the correction action, where electronic verification was not offered. A “Redlined” vehicle requires a follow-up site visit by the RTO.

**Steps 20-29 – (RTO)**

The RTO verifies the corrective action has been completed. The RTO conducts a follow up site visit in the event the vehicle is under “Redline” status. The RTO evaluates the vehicle against the earlier identified deficiencies looking for corrective action. The RTO determines if the vehicle is to remain under “Redlined” status or if it has successfully passed inspection. A “Redlined” vehicle in this stage that is state-owned or state-leased immediately becomes “surplus”. A “Redlined” vehicle in this state that is commercially owned/operated remains out of service until the corrective actions have been completed. A passing sticker ([Exhibit 25 – Pass/Fail Inspection Sticker](#)) is placed on the vehicle after the positive outcome from the inspection. A Site Visit Summary Report addendum is prepared and sent to the vehicle operator within two weeks of the follow-up inspection.

Finally, the RTO marks the outcome of the inspection on its Vehicle Monitoring Report and sends it along to the FM in the fiscal year quarters.

**Step 30 – Receive updated report and store (vehicle operator)**

The vehicle operator receives the updated report and stores it locally.

**e) References and Related Documents**

Document	Detail
<a href="#">Appendix 3 – Administrative Documents Review</a>	Reference document of administrative items to review.
<a href="#">Appendix 10 – DHS Administrative Vehicle Log</a>	Document to track the use of administrative vehicles.
<a href="#">Appendix 11 – Site Visit Questionnaire</a>	Document of items to review and mark status while on site.
<a href="#">Appendix 18 – Daily Vehicle Inspection Sheet</a>	Physical vehicle inspection report completed daily by the vehicle operator.

Document	Detail
<a href="#">Appendix 19 – Annual Safety Inspection Report</a>	Mechanical inspection report.
<a href="#">Appendix 20 – Driver Qualification Folder (DQF) Checklist</a>	Driver inspection report.
<a href="#">Appendix 21 – Site Visit Summary Report</a>	Narrative report summarizing the overall results of the inspection.
<a href="#">Appendix 22 – DHS Vehicle Requirements and Monitoring Form</a>	Physical vehicle inspection report.
<a href="#">Exhibit 5 – Sample Corrective Action Plan</a>	Document completed to identify areas of remediation.
<a href="#">Exhibit 24 – Corrective Action and Redline Action Items List</a>	List of vehicle issues that are qualified as either needing corrective action or redlining a vehicle from operations.
<a href="#">Exhibit 25 – Pass/Fail Inspection Sticker</a>	Marking to indicate whether the vehicle has passed or failed inspection.

## 2. Prime Contractor Directed Vehicle Monitoring and Inspection

### a) Roles and Responsibilities Overview

Role	Responsibility
<b>Transportation Provider (TP – Prime Contractor)</b>	<ul style="list-style-type: none"> <li>Party responsible for complying with DHS requirements and for leading the completion of the monitoring and inspection process for its Subcontractors, if applicable. Prime Contractor is also known as a vehicle operator.</li> </ul>
<b>Transportation Provider (TP – Subcontractor)</b>	<ul style="list-style-type: none"> <li>Party responsible for complying with DHS requirements and for participating in the monitoring and inspection process. Subcontractor is also known as a vehicle operator.</li> </ul>

### b) Application(s)

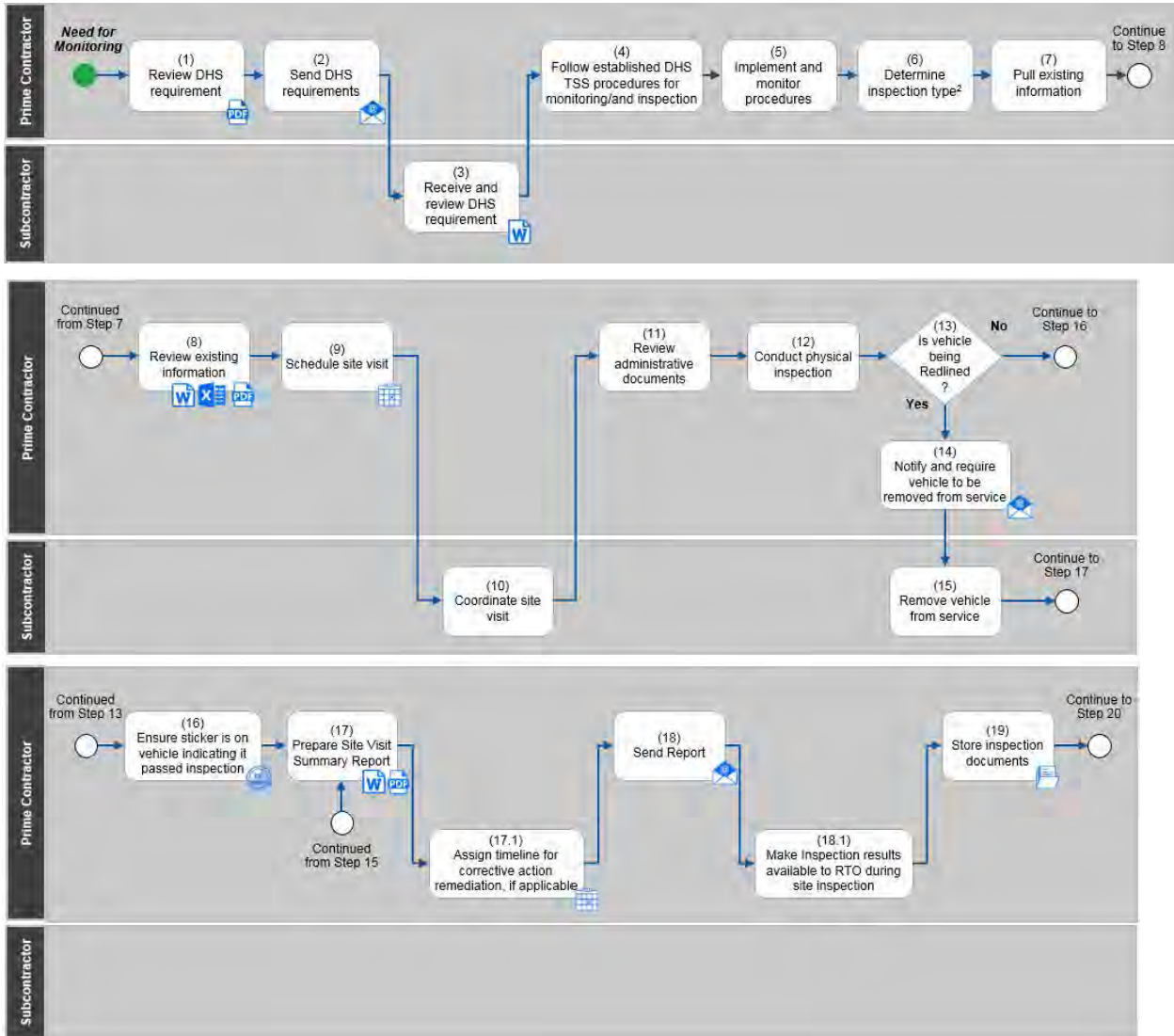
Application	Definition
<b>HOLMAN Insights</b>	The online statewide fleet management system that captures and monitors vehicle transactions and utilization. HOLMAN enables the State of Georgia to maximize how critical fleet assets are purchased, maintained and optimized throughout their useful life. As a central repository for vehicle-related information, this system has comprehensive and specific data pertaining to vehicle mileage, cost, assignment, repair, acquisition and disposal.
<b>eTRIPS</b>	Transportation Request Information Processing System, the application for client registration and trip ordering

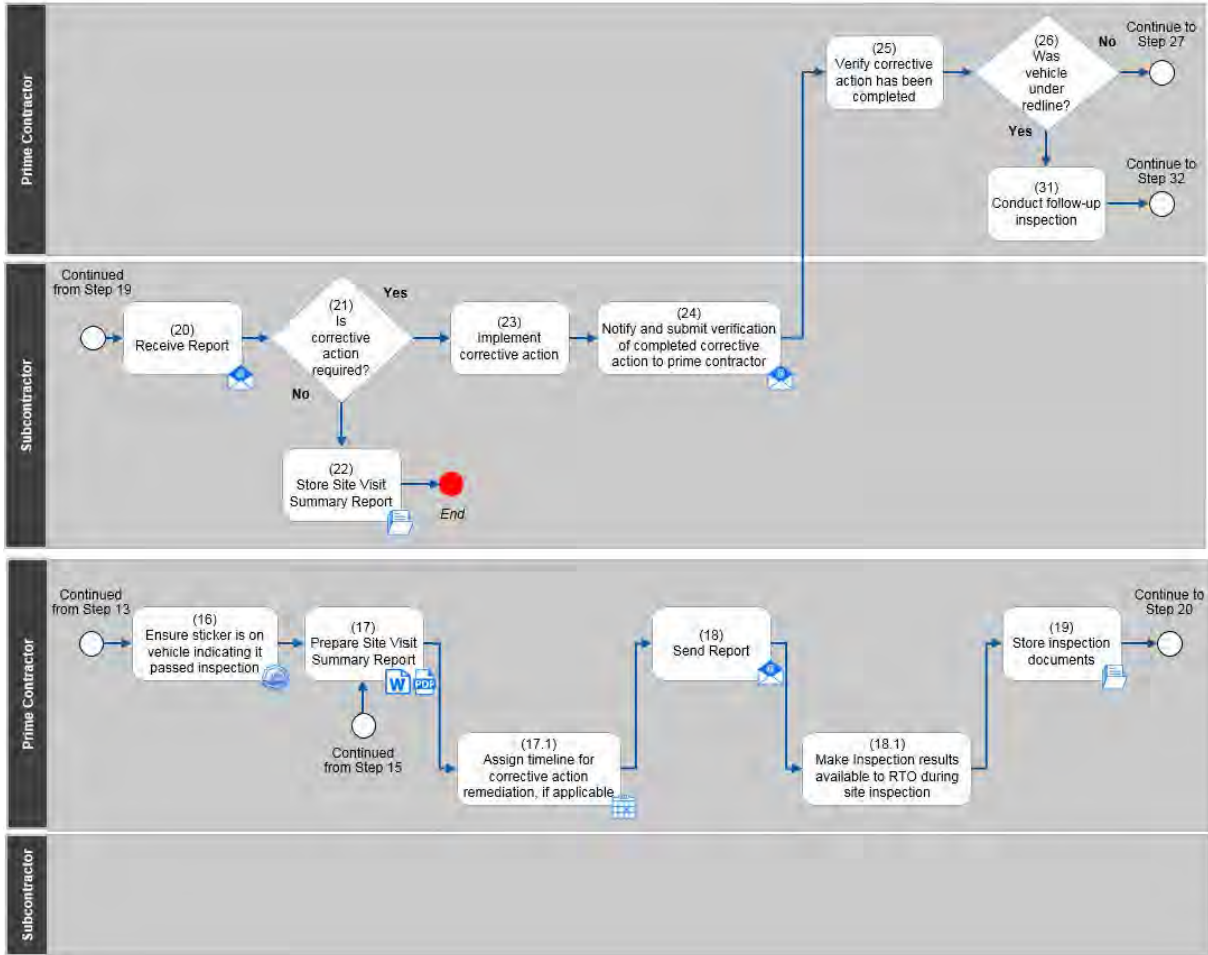
### c) Process Flow – Prime Contractor Vehicle Directed Monitoring and Inspection

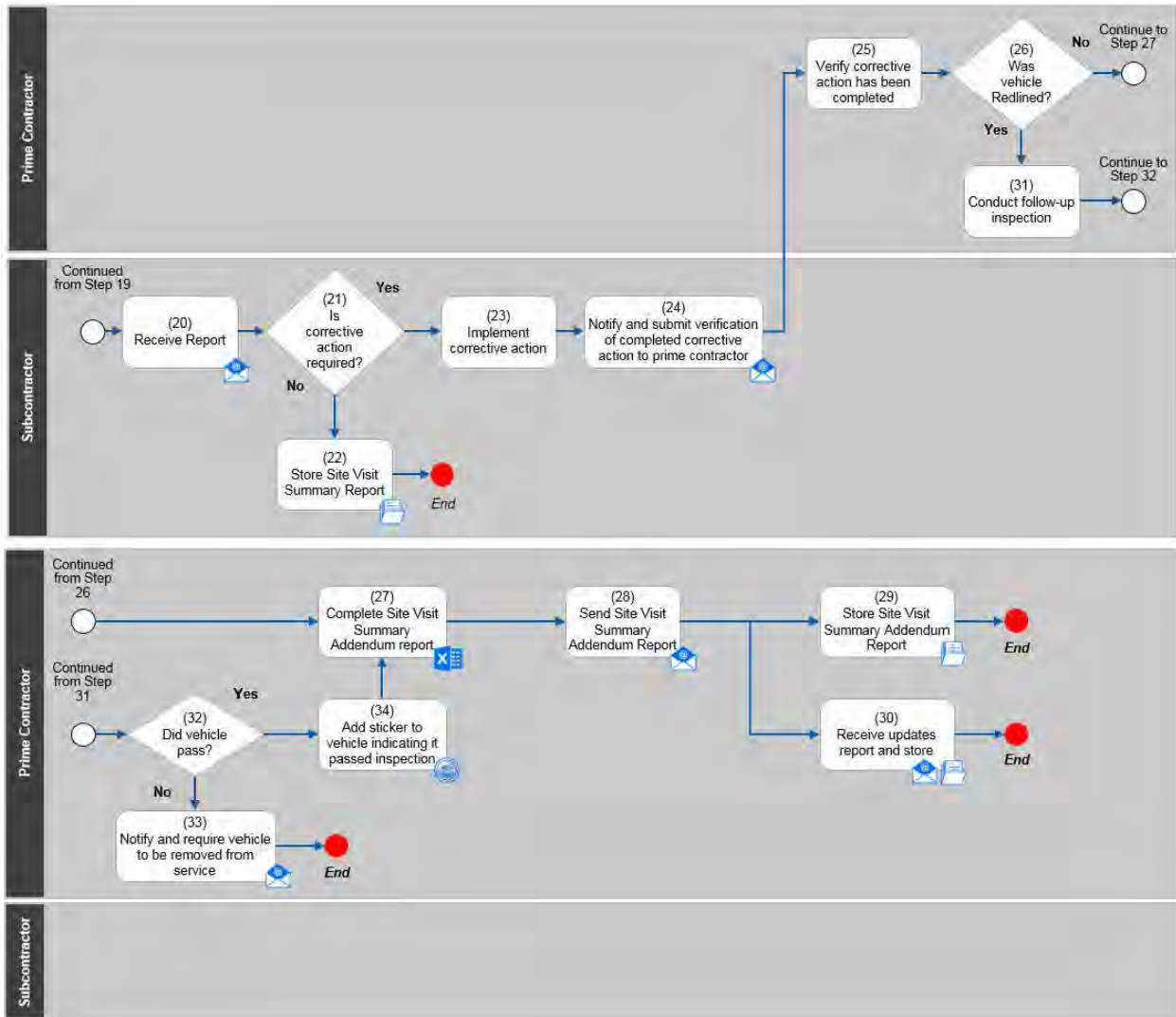
The following process flow illustration depicts the Prime Contractor Directed Vehicle Monitoring and Inspection process from the point of a need for monitoring/inspection through the completed

monitoring/inspection of the vehicle. It shall be noted that where there is a Prime Contractor working with Subcontractors, the Prime Contractor is contractually responsible for monitoring and inspecting all vehicles used by their Subcontractors in the delivery of coordinated transportation services. The RTO conducts random monitoring of 20% of the Prime Contractors records, sub-contractors vehicles and subsequent administrative files. The RTOs are responsible for monitoring and inspecting 100% of the Prime Contractor vehicles if the Prime has no subcontractors and 100% of the DHS/DBHDD owned/leased vehicles operated within their Regions. These inspections are required to be hands on inspections every fiscal year. In the event of a natural disaster, pandemic, or other event which would prevent physical inspections from being completed, desk reviews may be appropriate. The need for desk reviews will be determined by the TSS-Section Manager and DOMs for each impacted region.

This process flow shows each responsible party and its steps throughout the process. The highlighted area depicts the TP (Prime Contractor) and the TP (Subcontractor) roles within the process. The specific steps are described below the process flow.







### d) Procedures – Prime Contractor Directed Vehicle Monitoring and Inspection

The procedural steps and details outlined below are those that are the responsibility of the Prime Contractor and Subcontractor and correspond to the steps highlighted in the process flow above. Additional information is provided to explain what happens before and after the process pass activities handled by the Prime Contractor and Subcontractor.

#### Steps 1-2 – Review DHS requirements (Prime Contractor)

The process begins by the Prime Contractor (vehicle operator) reviewing the DHS requirements. The Prime Contractor, by contractual obligation, is required to comply with the established policies, procedures and guidelines as set forth by the DHS TSS Transportation Manual. Furthermore, a Prime Contractor with Subcontractors is also required to ensure the Subcontractors comply with and follow the TSS Transportation Manual. The Prime Contractor shall send the DHS TSS Transportation Manual via email to the Subcontractor. In addition, it shall make the DHS TSS Transportation Manual available in hard copy upon request from the Subcontractor.

#### Step 3 – Receive and review DHS requirements (Subcontractor)



The Subcontractor reviews and becomes familiar with the TSS Transportation Manual. The Subcontractor is to send any questions/concern along to the Prime Contractor for response.

**Step 4 – Follow established DHS TSS procedures for monitoring and inspection (Prime Contractor)**

The Prime Contractor is required to maintain its familiarity with the TSS Transportation Manual. The prime sends any questions/concerns along to the RTO for response.

**Step 5 – Implement and monitor procedures (Prime Contractor)**

The Prime Contractor implements all policies, procedures and guidelines including any changes or modifications to the DHS TSS Transportation Manual as passed along from the RTO.

**Steps 6-9 – Determine inspection type (Prime Contractor)**

The Prime Contractor determines the inspection type, prepares for and schedules the site visit. The Prime Contractor provides a two-week notice of the scheduled site visit. The preparation process includes reviewing issues identified in the prior year's inspections and the spreadsheet of the Subcontractor(s) inspections with required corrections, if applicable. It also includes the Driver Qualifications Folder (DQF) checklist content, and HOLMAN Insights and TRIP\$ reports for vehicle and ride detail information.

Inspections can be either scheduled or random inspection. The Prime Contractor maintains and extracts the vehicle inventory from an Excel spreadsheet listing all vehicles to be inspected. Refer to the section on [Vehicle Monitoring and Inspection Process](#) in this chapter for additional information on inspection types.

**Step 10 – Coordinate site visit (Prime Contractor)**

The Prime Contractor schedules the site visit.

Note:

Coordinating efforts to have vehicles located at a common site for Prime Contractor for monitoring and inspections represents the most effective and efficient method. When preparing for vehicle inspections or site visits, the Prime Contractor will coordinate to determine the best location for the vehicle monitoring and inspections. The date and time of the vehicle monitoring and inspections must not disrupt the transportation of consumers. If the majority of vehicles are housed or based at the same location, this should be designated as the common location for all vehicle monitoring and inspections.

During inspections at common locations, the site's designated Point of Contact's or driver's signature (when the Point of Contact is unavailable) will be required on the Vehicle Monitoring and Requirements Form after the completion of the vehicle inspection.

The Subcontractor must have vehicle files and driver qualification folders, containing all required information as instructed in the TSS Transportation Manual, available for review at the designated common location.

Exceptions to this mandate must be requested in advance and directed to the RTO. When justified, the RTO may grant an exception on a case-by-case basis.

**Steps 11-14 – Review administrative documents, conduct physical inspection and evaluate for Redline (Prime Contractor)**

The Prime Contractor conducts the site visit and the physical inspection, completing both appendices ([Appendix 11 – Site Visit Questionnaire](#) and [Appendix 22 – DHS Vehicle Requirements and Monitoring Form](#)). The Prime Contractor reviews the following:

- Administrative documentation ([Appendix 3 – Administrative Documents Review](#))
- [Appendix 18 – Daily Vehicle Inspection Sheet](#)

- [Appendix 19 – Annual Safety Inspection Report](#) by certified mechanic (certificate from provider proving certification is required),

Note:

A certified mechanic for the purposes of the DHS TSS Transportation Manual is the following:

- Current Automotive Service Excellence (ASE) certified mechanic,
- Holman Insights certified vendor mechanic, or
- A mechanic certified through a technical school or college.
- [Appendix 20 – Driver Qualification Folder \(DQF\) Checklist](#)
- Repair and maintenance documents
- Driver Insurance Declaration Page
- Insurance Card
- Registration Card
- Site drug and alcohol policy
- Emissions certification (refer to [Step 45 Under Acquisition via Purchase](#))

The physical inspection is a non-mechanical inspection only with the exception of testing lifts.

The Prime Contractor makes a determination at the conclusion of the physical inspection as to whether the vehicle will be “Redlined”. The Prime Contractor immediately notifies the Subcontractor requiring the vehicle is to be removed from service, if the vehicle is subject to this condition. The vehicle receives a “Redline” sticker at this time indicating it has failed the inspection process. The Prime Contractor alerts the Subcontractor in the event the vehicle has successfully passed the inspection.

Note:

During a vehicle inspection, inspected items fall into 2 categories, “Checked” and “Needs Attention”. If an inspected item “Needs Attention” based on the Inspector’s finding, the discrepancy may require either a corrective action or the vehicle may be “Redlined” by the Inspector.

A vehicle, not “Redlined”, but requiring a corrective action can still be operated if the identified issue is corrected within an agreed upon timeframe, not to exceed 30 days. If the corrective action(s) is not corrected in the timeline specified, the vehicle may be “Redlined” until discrepancy(s) are corrected and Inspector has re-inspected the vehicle.

Redlining the vehicle will be the result of any of the redline Items listed below, or if another severe safety issue is found during a random or scheduled inspection. A “Redlined” vehicle is designated with the placement of a sticker on the vehicle’s windshield. “Redlined” vehicles cannot be used for the transportation of staff, consumers or passengers. “Redlined” vehicles can only be driven to receive the needed repairs or corrections. The Redline sticker can only be removed by the Inspector.

Refer to [Exhibit 24 – Corrective Action and Redline Action Items List](#) for additional information.

#### **Step 15 – Remove the vehicle from service (Subcontractor)**

The Subcontractor removes the vehicle from service.

**Steps 16-19 – Prepare site visit summary format, send report and store locally (Prime Contractor)**

The Prime Contractor places the pass or fail inspection sticker on the vehicle, prepares an [Appendix 21 – Site Visit Summary Report](#), sends the report, via email in a PDF format, to the Subcontractor and stores the report in the local office. This report is sent within two weeks of the inspection. Additionally, the Site Visit Summary Report contains a timeline to correct deficiencies (deemed not serious enough to “Redline” the vehicle), in the event there were corrective actions identified during the inspection process.

**Steps 20-23 – Receive report and evaluate outcome (Subcontractor)**

The Subcontractor receives an email containing a PDF of the Site Visit Summary Report and evaluates the outcome. The report is reviewed and filed when corrective action is not required. In the event of corrective actions (see [Exhibit 5 – Sample Corrective Action Plan](#)), the Subcontractor implements the necessary actions immediately upon notification as indicated on the Site Visit Summary Report. Corrective action must be completed within thirty days following the inspection unless prior written rationale is received and authorized by the RTO.

**Step 24 – Notify and submit verification of completed corrective action to Prime Contractor (Subcontractor)**

The Subcontractor is required to show proof of remediation of corrective action items (non-Redline). The documentation to be provided includes but is not limited to the following:

- Repair records and receipts,
- Maintenance records/logs,
- Annual safety inspection form completed by a certified mechanic.

The verification of documentation, at the discretion of the Prime Contractor, may be verified electronically. Document verification would include photos verifying the required corrections. Documents shall be mailed via USPS, UPS, or FedEx to the attention of the Prime Contractor upon completion of the correction action, where electronic verification was not offered. A “Redlined” vehicle requires a follow-up site visit by the Prime Contractor.

**Step 25 – Verify corrective action is completed (Prime Contractor)**

The Prime Contractor verifies the corrective action is completed.

**Steps 26-28 – Verify if the vehicle is under Redline status (Prime Contractor)**

The Prime Contractor verifies if the vehicle is under “Redline” status. A Site Visit Summary Report addendum is prepared and sent to the Subcontractor within two weeks of the follow-up inspection.

**Step 29 – Store the Site Visit Summary Report addendum (Prime Contractor)**

The Prime Contractor keeps a record of the Site Visit Summary Report addendum and stores it locally.

**Step 30 – Receive updated report and store (Subcontractor)**

The Subcontractor keeps a record of the Site Visit Summary Report addendum and stores it locally.

**Steps 31-33 – Conduct follow up inspection (Prime Contractor)**

The Prime Contractor verifies if the vehicle is under “Redline” status. If the vehicle is under “Redlined” status, the Prime Contractor conducts a follow up site visit. The Prime Contractor evaluates the vehicle against the earlier identified deficiencies looking for corrective action. The Prime Contractor determines if the vehicle is to remain under

“Redline” status or if it has successfully passed inspection. A “Redlined” vehicle in this state will remain out of service until the corrective actions have been completed.

**Step 34 – Add sticker to vehicle indicating it has passed inspection (Prime Contractor)**

A passing sticker is placed on the vehicle after the positive outcome from the inspection (refer to the [Exhibit 25 – Pass/Fail Inspection Sticker](#)).

**e) References and Related Documents**

Document	Location
<a href="#">Appendix 3 – Administrative Documents Review</a>	Reference document of administrative items to review.
<a href="#">Appendix 11 – Site Visit Questionnaire</a>	Document of items to review and mark status while on site.
<a href="#">Appendix 18 – Daily Vehicle Inspection Sheet</a>	Physical vehicle inspection report completed daily by the vehicle operator.
<a href="#">Appendix 19 – Annual Safety Inspection Report</a>	Mechanical inspection report.
<a href="#">Appendix 20 – Driver Qualification Folder (DQF) Checklist</a>	Driver inspection report.
<a href="#">Appendix 21 – Site Visit Summary Report</a>	Narrative report summarizing the overall results of the inspection.
<a href="#">Appendix 22 – DHS Vehicle Requirements and Monitoring Form</a>	Physical vehicle inspection report.
<a href="#">Exhibit 5 – Sample Corrective Action Plan</a>	Document completed to identify areas of remediation.
<a href="#">Exhibit 24 – Corrective Action and Redline Action Items List</a>	List of vehicle issues that are qualified as either needing corrective action or redlining a vehicle from operations.
<a href="#">Exhibit 25 – Pass/Fail Inspection Sticker</a>	Marking to indicate whether the vehicle has passed or failed inspection.

## E. DRIVER REQUIREMENTS, PROGRAMS, AND RECORDKEEPING

Except where otherwise indicated, driver requirements apply to all individuals whose job description identifies the operation of a vehicle as a component of their job. This includes individuals operating DHS and/or DBHDD owned or leased vehicles (hereafter referred to as state agency vehicles) or operating any vehicles for consumer transportation, or within the coordinated transportation system. All drivers used in the performance of services under transportation agreements with DHS and/or DBHDD, or operating a state-owned vehicle must, at a minimum, meet driver qualifications, comply with applicable laws, pass a criminal background check, maintain safety and service delivery standards, complete mandatory training, and refrain from alcohol misuse and drug use.

Note:

Prime Contractors are directly responsible for ensuring all Subcontractors are compliant with the same level of driver requirements set forth in their prime contract with the state, as detailed in this section.

### 1. Driver Qualifications

#### a) Legally Licensed

All drivers must possess a valid driver's license with the class of license appropriate to the vehicle to be operated. In accordance with the Department of Driver Services (DDS), new Georgia residents are required to obtain a Georgia license within 30 days of establishing residence. For drivers with out-of-state licenses, similar rules will apply, and will be evaluated on a case-by-case basis.

Volunteers are prohibited from driving state-owned vehicles.

#### b) Age and Experience

All drivers must be at least 21 years of age and have a minimum of 3 years driving experience to provide transportation to consumers.

#### c) Commercial Driver's License (CDL)

All drivers must obtain a CDL if they operate a vehicle that falls into one of the following three classes:

1. If the vehicle has a gross vehicle weight rating of 26,001 or more pounds or such lesser rating as determined by federal regulation;
2. If the vehicle is designed to transport 16 or more passengers, including the driver; or,
3. If the vehicle is transporting hazardous materials and is required to be placarded in accordance with the Motor Carrier Safety Rules prescribed by the United States Department of Transportation, Title 49 C.F.R. Part 172, subpart F, which can be found at <http://www.eregulations.com/>, or once on the site's homepage, by navigating to the state of *Georgia*, then to *Georgia Commercial Drivers*, followed by *Hazardous Materials*, and finally *Communication Rules*; or, once on the Georgia Commercial Drivers page, by searching for the terms *Communication Rules*.

### 2. Legal Requirements to Operate a Vehicle

#### a) Motor Vehicle Report (MVR)

All drivers must obtain a certified copy of a seven-year Motor Vehicle Report (MVR) from the Georgia Department of Driver Services prior to employment, if the driver's job description identifies the operation of a vehicle as a component of their job. A current MVR must be

maintained in the driver's qualification file and reviewed with the driver by the employer. A seven-year MVR is required at the initial hiring. Subsequent MVRs must, at a minimum, cover a three-year period. The employer is required to maintain the two most current MVRs in the driver qualification folder.

### **b) Legal Violations**

All drivers must keep their employer informed of legal violations. A legal violation may include, but is not limited to a citation for a traffic violation and/or an arrest, charge, or conviction for committing a crime. Depending on the driver type, two notification steps may be required when a driver has received a citation or has been charged/convicted of a legal violation. The driver must notify their immediate employer within 5 calendar days of the charge or conviction. If the employer is a Subcontractor, the Subcontractor must provide written notification to the Prime Contractor.

Note:

Employers may impose more restrictive notification timeframes.

### **c) Points and Suspension**

When interviewing, or being screened as a potential driver, drivers may not have six or more points against their driver's license, or a suspended or revoked driver's license, within the last five years, for violations as indicated by the DDS. Employers and employees are strongly advised to refer to the DDS website for a comprehensive listing of violations, and associated points, and use this information as a guide when interviewing/screening potential drivers. An administrative exception may be requested prior to the five-year requirement for a driver whose license has been reinstated and the suspension was for a non-moving traffic violation. The request and supporting documentation must be sent to the appropriate Regional Transportation Office (RTO) for review.

### **d) Prior Convictions**

Vehicle operators must conduct a National Background Check with fingerprints on all drivers. Any potential driver with prior convictions for a sexual crime or a crime of violence are not qualified to operate a vehicle for the state of Georgia. DHS Personnel Policy 1301 will apply as it relates to convictions for substance abuse crimes. Any person convicted of a felony during the past five years are prohibited from operating state vehicles. The employer will receive notification based on the results of the National Background Check whether a driver is cleared to transport clients. Refer to the [Background and Criminal History Checks](#) section in this chapter for more information.

### **e) Convictions Notifications**

All drivers must notify their employer of any arrests and or convictions within five calendar days of the date of arrest or conviction. The employer will make a determination of appropriate action on a case-by-case basis.

### **f) Loss of Privilege**

All drivers must notify their employer immediately, but no later than the first business day should the notice of suspension, revocation, cancellation, or loss of privilege to operate a vehicle for any period occur on a non-business day. The employee must not operate a state-owned or state-leased vehicle or transport consumers if their driver's license has been revoked, suspended, or has driving restrictions. If the employer is a Subcontractor, the Subcontractor must immediately provide written notification to the Prime Contractor.

### 3. Driver Training

Within 90 days of hire, all drivers used by Transportation Providers to deliver transportation services under the terms of a Transportation Providers Agreement must complete the following required training:

- General Orientation
- Consumer Service, Courtesy, and Sensitivity Awareness
- Certified Courses in Basic First Aid & CPR
- Defensive Driving
- Wheelchair Securement Training (where applicable)

The employer must keep and maintain evidence of all trainings in their [Driver Qualification Files](#) (refer to the section with the same title in this chapter for more information).

All TPs shall provide an ongoing safety and sensitivity program to ensure a safe operating environment. Documentation that attendants have completed a general orientation, a defensive driving course, basic First Aid & CPR course, and consumer service, courtesy, and sensitivity awareness training must be maintained. Drivers must be current with the required defensive driving, First Aid, and CPR training.

Note:

Employers may contact their RTO should they require support to identify or confirm appropriate training for drivers.

### 4. Service Delivery and Safety

To help ensure the safe and courteous transport of consumers, all drivers used in the performance of services under transportation agreements with DHS and/or DBHDD or operating a state-owned vehicle:

1. Must comply with applicable laws.
2. Must be competent in his or her driving habits.
3. Must be courteous, patient, and helpful to all consumers.
4. Must be clean in appearance.
5. Will exit the vehicle to open and close the vehicle doors and provide assistance boarding and exiting the vehicle.
6. Will transfer responsibility to human service providers and/or caregivers when accompanying consumers to or from the main door of the destination or pick up point to the vehicle. Exceptional cases and special requests may exist when the driver may be requested to assist a consumer to or from the main door of the destination or pick up point. However, unless an emergency exists, at no point should a driver enter a consumer's residence to provide assistance. Human service providers should discuss the transportation needs of consumers requiring high levels of supervision with the RTO and the Transportation Provider (TP).
7. Will assist consumers with being seated, including the fastening of the seat belts. Consumers and drivers must wear seat belts whenever the vehicle is being operated unless the passenger has a written medical exception as explained and in accordance with O.C.G.A 40-8-76.1.
8. Will confirm, prior to allowing any vehicle to proceed, that wheelchairs and consumers using mobility devices are properly secured and that all consumers are properly belted in their seats. Drivers must assist all consumers in the process of exiting the vehicle and in moving to the building access of the consumers' destination. Consumers are not allowed to operate vehicles or wheelchair lifts.

9. Will observe that the consumer has entered the door of the destination or observe that an individual at the destination has received the consumer.
10. Will provide support and oral directions to consumers. Such assistance shall also apply to the movement of wheelchairs and mobility-limited persons as they enter or exit the vehicle using the wheelchair lift. Such assistance shall also include storage by the driver of mobility aids and folding chairs. Vehicles will be parked or stopped so that consumers will not be forced to cross streets.
11. Shall not use alcohol, narcotics, illegal drugs, or drugs/medication that would impair their ability to perform while on duty or shall abuse drugs or alcohol at any time.
12. Shall not, at any time, smoke, eat or consume any beverage while in the vehicle, or while involved in consumer assistance.
13. Shall not wear any type of headphones or use a cell phone (hands free or handheld) while driving a vehicle.
14. Will use GPS devices in accordance with state laws.
15. Shall not be responsible for consumer's personal items.
16. Shall not have consumers onboard a vehicle during the refueling process.

## 5. Background and Criminal History Checks

Drivers are required to have national criminal history records checks through the Georgia Crime Information Center (GCIC) and the Federal Bureau of Investigation (FBI) in accordance with DHS Personnel Policy #504. For the correct process to obtain a national criminal history check, refer to the Georgia Bureau of Investigation website at [www.gbi.georgia.gov](http://www.gbi.georgia.gov).

### a) DBHDD Contractors and Providers

Per the DBHDD policy # 04-104, DBHDD transportation contractors and/or vehicle operators are to use instructions provided in said policy to conduct criminal history checks. Community Service Boards (CSB) and other DBHDD sites must have record of a national check in the driver files and available for DHS Transportation Services Section (TSS) review.

### b) DHS Contractors

Per OCGA 49-2-14, Criminal history record checks are to be completed on individuals with whom the Department contracts to perform direct care, treatment and/or custodial services. Based on the nature of the job duties, all drivers and monitors of DHS and/or DBHDD consumers must have a national criminal history records check, regardless of the date of original employment. DHS contractors and Subcontractors are required to use the services of the Georgia Applicant Processing Services (GAPS) for applicants for whom DHS provides the fitness determination. Contractors may initiate the registration process by visiting <https://fieldprintgeorgia.com/businesses>. It is important that the contractor/Subcontractor choose "direct elder care" during the registration process.

## 6. Drug and Alcohol Testing Requirements

DHS, in an effort to ensure the safety of consumers who are transported under the DHS Transportation System, requires that all contracted drivers undergo drug testing as described in this section. These requirements are intended to prevent prohibited drug use and alcohol misuse by employees who transport consumers under DHS' care, control, and custody.

An employee who is actually performing, ready to perform, or immediately available to perform functions which include driving (i.e., drivers), monitors, those who control the dispatch or movement of a vehicle, and those who perform maintenance on a vehicle or its equipment is subject to the Drug and Alcohol Testing Requirements.

TPs and Human Service Providers (HSPs) shall not utilize drivers who are known abusers of alcohol or known consumers of narcotics or drugs/medications that would endanger the safety of



transportation consumers. If the transportation provider or HSP suspects a driver to be driving under the influence of alcohol, narcotics or drugs/medications that would endanger the safety of consumers, then the provider shall immediately remove the driver from providing services under the transportation agreement with DHS.

### **a) Required Elements of an Anti-Drug Use and Alcohol Misuse Program**

Employers shall have policy statements regarding prohibited drug use and alcohol misuse in the workplace, including the consequences associated with prohibited drug and alcohol misuse. Employers shall have a pre-employment education and training program to include anti-drug and alcohol misuse information and procedures for addressing positive drug test results. This should be in the form of printed material that should be distributed to employees upon hiring. This should also include community resources for substance abuse treatment availability.

### **b) Retention of Records**

Where permitted by law, employers, contractors, and sub-contractors shall maintain:

- Records in a secure location with controlled access.
- Positive results shall be kept on file for five years, including any refusals for testing.
- Negative Test results should be retained for one year.
- Records of the collection process must be documented and kept for two years.

Where not permitted by law, employers, contractors, and Subcontractors shall maintain:

- Policies that state the employers', contractors', and Subcontractors' compliance with drug and alcohol testing requirements.

Collection process documents include those generated in connection with a decision for reasonable suspicion, post-accident, and pre-employment testing as well as documents presented by an employee disputing positive test results, and employee and supervisor training relating to this subject.

### **c) Types of Testing**

Four types of testing are established and applicable for all drivers. Prime Contractors are responsible for administering and maintaining these tests annually for their sub-contractors. The tests include: Pre-Employment, Random, Reasonable Suspicion, and Post Accident.

Employees who perform high-risk: duties are prohibited from using illegal substances (e.g. marijuana, cocaine, opiates, amphetamines, and phencyclidine). Employees who are actually performing, ready to perform, or immediately available to perform functions which include driving (i.e., drivers), monitors, those who control the dispatch or movement of a vehicle, and those who perform maintenance on a vehicle or its equipment are also prohibited from misusing alcohol. If an employee tests positive for illegal drugs or alcohol misuse, they will be removed from their high-risk duty and be informed of education and rehabilitation programs. The employer is not required to pay for treatment programs.

#### **(i) Pre-Employment Testing**

A pre-employment drug test must be administered with a verified negative result prior to performing any high-risk duty for the first time. An employer may not transfer an employee from performing non-high-risk duties to a high-risk duty without administering a pre-employment drug test with a verified negative result.

An employer may, but is not required to, conduct pre-employment alcohol testing under this policy. This should be an “either/or” policy and if pre-employment alcohol testing is employed, it shall apply to all applicants.

If an employee operates a vehicle and has leave for 90 consecutive calendar days, a pre-employment test will be conducted prior to them returning to their safety sensitive position.

### (ii) Post-Accident Testing

An accident is defined as an occurrence associated with the operation of a vehicle, if as a result:

1. An individual dies, (fatal accident) or
2. An individual suffers bodily injury and immediately receives medical treatment away from the scene of the accident; or
3. If injury or damage occurs to the vehicle or its occupants; or
4. If the vehicle is disabled because of an accident and the vehicle is transported from the scene by a tow truck or other vehicle.

Post-accident testing should be done when a fatality occurs for any employee performing high risk duties whose performance could have contributed to the accident.

Post-accident testing for non-fatal accidents should be administered **unless the employee’s performance can be completely discounted as a contributing factor to the accident, based on the best information available at the time of the referral decision.** This information should be documented in detail to include the decision-making process **not** to test.

### (iii) Random Testing

Transportation Providers shall mirror the minimum annual testing rate for random **drug** testing of the Federal Motor Carriers Safety Administration (FMCSA) rates, which are subject to change annually. For additional information on these rates, please visit the FMCSA website.

Selection of employees for random drug and alcohol testing shall be made by a scientifically valid method. Examples would be random number table or a computer-based random number generator that is matched with employees’ Social Security numbers, payroll identification numbers, or other comparable identifying number.

Random testing must be unannounced and unpredictable with dates for random testing spread reasonably throughout the calendar year. Random testing must be conducted at all times of day that transportation services are performed. Each employee must report to the testing site immediately after being informed they are to be undergoing random testing. **Contractor and/or provider policy regarding random testing is subject to review by DHS.**

### (iv) Reasonable Suspicion

Testing shall be conducted when an employer has reasonable suspicion to believe the covered employee has used a prohibited drug and/or engaged in alcohol misuse. This must be based on articulable observations concerning employees’ appearance, behavior, speech, or body odors.

Positive test results, or failure to submit to testing, will result in the following actions: Immediately upon notice of positive test, the employer shall require the employee to cease performing safety-sensitive functions, including operating a vehicle.

## 7. Driver Monitoring

DHS RTO staff monitors TPs' and drivers' compliance with qualifications and requirements. In addition to vehicle inspections, the TPs' maintenance of Driver Qualification Files and Driver Alerts are the two primary methods of monitoring driver compliance.

### (i) Driver Qualification Files

DHS requires that a Driver Qualification File (DQF) be established and maintained on those individuals whose job description identifies the operation of a vehicle as the main component of their job. This includes employees operating state-owned vehicles or operating vehicles for consumer transportation.

Each driver's record and qualifications are subject to an initial and an annual inspection by DHS, as well as interim inspections as required by DHS at its sole discretion (see [Appendix 20 – Driver Qualification Folder \(DQF\) Checklist](#) for the form used for verification and the items/required to be maintained at the site). Any driver failing to meet all listed qualifications, at any time, will be prohibited from driving under a transportation agreement with DHS. Vehicle operators failing to meet the requirements applicable to them will be prohibited from operating state-owned vehicles.

All records concerning driver's qualifications must be made available to the RTO and the Prime Contractor for review. DHS reserves the right to disallow any driver from performing services under any transportation agreement, and the right to disallow any individual from operating a state-owned vehicle. At a minimum, the Driver Qualification File will include documentation of the following items:

- Copy of valid driver's license.
- Motor Vehicle Report (MVR) and documentation of annual reviews
- National Criminal Records Check and fingerprints (refer to the [Background and Criminal History Checks](#) section in this chapter for more information); if local policies for record keeping of this type of information differs from that of this manual, follow the local policies and alert the RTO of any discrepancies in record keeping requirements
- Documentation of any accidents or moving violations involving the driver.
- Consumer Service, Courtesy, and Sensitivity Awareness Training
- A Certified Defensive Driving Course

A Certified Basic First Aid & CPR Course Prime Contractors must review the MVR with sub-contractors annually and identify any serious offenses and actions needed to maintain compliant with requirements. For additional information, refer to accident reporting in Chapter 3 – Risk Management and Insurance.

### (ii) Report My Driving Program

The Department of Administrative Services (DOAS) partners with Driver-Check, an organization with a proven record of accomplishment in helping organizations reduce accidents. The Report My Driving Program through Driver-Check is a program that serves as a 24-hour monitoring program, featuring the placement of specially designed bumper stickers. The stickers contain a unique vehicle number and phone number that observers can call 24 hours a day, 7 days a week to report unsafe or unlawful driving behavior, or to provide offer compliments on driver behavior.

#### Program Overview

- A concerned citizen calls the 800-number shown on the vehicle. The call will be recorded, where all relevant details (vehicle identification numbers, color, company markings, weather conditions, etc.) are captured, creating an incident report.

- Driver-Check sends incident reports to the appropriate contact(s) for the agency, for further review.
- The driver and supervisor will review the call, and depending on the nature of the call, they may assign the driver a brief training course related to the behavior in question (speeding, unsafe lane change, etc.).
- The supervisor completes a short report indicating that the driver has taken the needed training.
- DOAS requests the report be closed within 10 days of initial receipt.

## 8. WEX (Fuel) Program Overview

Wright Express (WEX) is the statewide contractor selected to provide the total fuel management program for all governmental entities within the state of Georgia. The Department of Administrative Services' Office of Fleet Management (OFM) administers the contract. In accordance with the Georgia Fleet Management Manual developed by OFM, use of a WEX card for state-owned and state-leased vehicles is **required**. Organizations within DHS or DBHDD are **not authorized** to have separate commercial fuel card accounts.

The program allows county and municipal governments and other **eligible** organizations to share in the benefits of the program at no additional cost.

State Purchasing, of the Department of Administrative Services, now provides oversight of the WEX fuel cards and has issued policy to this effect.

### Requirements to Use the Fuel Card

In addition, the following parameters are **required** for use of the WEX fuel card, per the DOAS Office of Fleet Management's Georgia Fleet Management Manual:

- All vehicle drivers/operators are required to record the accurate mileage of the vehicle at the time of any fuel purchase. Whether this is done through an automated fuel dispensing equipment system or manually at bulk fuel sites, entries must be accurate.
- Mileage must be recorded on each fuel purchase where mileage is not obtained by automated processes for recording into the Fleet Management System.
- A separate fuel card will be issued for each vehicle. Agencies must obtain the initial fuel card through OFM to ensure the card contains all necessary vehicle information to insure correct fuel data postings for each vehicle in the Fleet Management System. At no time should fuel products for any other vehicle/use be charged to a fuel card issued for a specific vehicle.
- Each driver (by name) will be assigned a specific individualized Personal Identification Number (PIN). This PIN can be used by the individual with any card on the account. Generic PINs are prohibited (such as one PIN for an office/department). Vehicle numbers will not be used as a PIN. PIN numbers will not be written on the card. Compromised PINs will be cancelled immediately.
- A fuel card inventory system will be established, and random checks will be made to ensure each card is in the correctly assigned vehicle to preserve the integrity of fuel transaction data.
- Separate fuel cards will be obtained for other power equipment needs.
- State fuel cards will be used only to purchase fuel for state vehicles. Using the state fuel card to purchase fuel or services for a private vehicle or a commercial rental vehicle is prohibited, and may lead to employee termination and possible criminal prosecution.
- If a card is lost or stolen, it will be cancelled immediately.
- If a vehicle is transferred, sold or surplus, the card will be cancelled immediately.

Additional information pertaining to the WEX program can be obtained by contacting the Fleet Manager (FM).

## 9. Recordkeeping and Reporting

Records are kept to account for vehicle usage, justify fleet size, and to help determine when to dispose of and replace vehicles.

### a) Capturing Data

Vehicle operators are responsible for capturing data involved in the operation of their vehicles. Cost and use data are captured in several ways, as discussed below.

A vehicle history folder should be maintained for each vehicle. Each folder should include: maintenance records and expenses, other expenses, and periodic inspection reports.

### b) Vehicle Reporting

#### (i) DHS and/or DBHDD Fleet Contact Reporting, WEX Card, and ARI Maintenance Program Users

Fleet contacts for DHS and DBHDD are required to verify the download of information, such as mileage, downtime, fuel usage, repairs, maintenance and other expenses for all state-owned vehicles assigned to their organizations via the HOLMAN Insights system. The reporting period for all vehicles is from July 1<sup>st</sup> through June 30<sup>th</sup> of each year.

The HOLMAN Insights system downloads fuel data from the WEX fuel program and maintenance data from the Automotive Resources International (ARI) Program.

#### (ii) Contractors of Coordinated Transportation Vehicle Reporting, WEX Card and ARI Maintenance Program Users

Contractors operating assigned DHS or DBHDD vehicles are required to verify the download of information for those vehicles in the HOLMAN Insights system. Fuel costs and the number of miles driven on a vehicle are tracked through the system via the WEX fuel card.

The HOLMAN Insights system downloads fuel data from the Wright Express (WEX) fuel program and maintenance data from the ARI Program.

#### (iii) Vehicle Reporting for DHS and/or DBHDD Vehicle Operators and Contractors of Coordinated Transportation – non-WEX Card and non-ARI Program Users

Organizations assigned DHS or DBHDD vehicles that do not use WEX fuel cards and/or the ARI maintenance program must enter their vehicle cost information (mileage, down time, fuel usage, repairs, maintenance and other expenses) into the HOLMAN Insights system on a monthly basis at a minimum. Additionally, per Policy 10: “for vehicles not using the fuel card, all transactions must be filed with DOAS/OFM on the 10th of every month for the previous calendar month listing the vehicle by state ID, VIN, # of transactions, the total gallons, and the actual cost per gallon”. The RTO should be copied on this communication for verification purposes.

Should the need arise to obtain fuel from a State-Owned Bulk Fuel tank, all fuel obtained from bulk fuel sites shall be properly documented and entered into the Holman Insights system within five business days following the original transaction date.

Non-compliance with these requirements will result in the reassignment of vehicles to other organizations within DHS or DBHDD. Vehicle reassignment will be at the discretion of: any member of the RTO staff, the DOM, the TSS-SM, the director of the OFSS and/or the DOAS Office of Fleet Management.

#### (iv) Vehicle Files and Records

Transportation Providers and operators of DHS and DBHDD vehicles must establish, maintain and provide upon request by DHS, or as required under the terms of the Transportation Agreement, the following records and related information:

- Copy of registration with the Department of Revenue Motor Vehicle Division (DOR-MVD) and/or the Department of Public Safety (DPS) (if applicable, refer to the [Required State Registrations](#) section in this chapter for additional information).
- Vehicle records, including but not limited to the following documentation for each vehicle:
  - Manufacturer and model
  - Model year
  - Vehicle identification number (VIN)
  - Type of vehicle (minibus, wheelchair van, etc.)
  - Capacity (number of passengers)
  - Special equipment (lift, etc.)
- Insurance certification
- License number (if applicable)
- Odometer readings
- [Appendix 18 – Daily Vehicle Inspection Sheet](#)
- Documentation of accidents and/or repairs
- Maintenance documentation
- Annual Safety Inspections

## F. ADMINISTRATIVE VEHICLES

Vehicles that are titled to or leased by the Department but are not used primarily for consumer transportation are considered DHS administrative vehicles. The inspection and record keeping requirements for DHS administrative vehicles differ from those for vehicles used for consumer transportation.

### 1. Training

TSS provides initial training with the Division/Office managers and supervisors responsible for managing the vehicles assigned to them. Those managers and supervisors will continue to train drivers as they are identified and registered to utilize the vehicles. Training includes:

- WEX fuel card program,
- ARI Maintenance Program overview,
- Report My Driving Program
- Authorized and unauthorized use of state vehicles,
- Logbook usage and documentation (for administrative vehicles only, [Appendix 10 – DHS Administrative Vehicle Log](#))
- Understanding how traffic violations impact a driver's ability to operate a state vehicle, and
- Insurance and accident reporting.

### 2. Driver Requirements

It is the responsibility of the Division/Office to whom vehicles are assigned to monitor drivers for compliance with requirements and to maintain documentation of the requirements for review and monitoring by Regional Transportation Office (RTO). Records are to be maintained in a collated format per employee (i.e.: employee's signed acknowledgement form, copy of employee's driver's license, and employee's MVR – pulled annually). Should a driver fail to meet the requirements, driving privileges may be suspended until they are compliant.

Driver requirements include:

- Valid Georgia driver's license. For out-of-state licenses from bordering states, authorization to drive an administrative vehicle will be determined on a case-by-case basis.
- Drivers may have no more than 6 points against their driver's license (verified by pulling annual MVRs).
- The DBHDD and the DHS Office of Human Resources are responsible for pulling MVRs on state employees.
- MVRs must be pulled by Division/Office managers and supervisors and reviewed with employees annually.
- Drivers must report any tickets or traffic violations received while operating the vehicle. It is the responsibility of the employee to pay any fines or fees related to any violations received while operating the vehicle.
- Driver must not have any pending charges or a conviction within the past 6 months, for any of the following offenses, and agrees to immediately notify the manager or supervisor using [Appendix 17 – DOAS RMS101-2 Motor Vehicle Use Program Driver Notification](#) to immediately report any license suspension, revocation, or expiration.
- All drivers are required to read [Appendix 15 – DOAS Form RMS101-4 Driver Safety Tips](#) (which may also be found on the DOAS website at [www.doas.ga.gov](http://www.doas.ga.gov) and searching for the terms *Driver Safety Tips*) prior to being allowed to operate an administrative vehicle.
- All drivers must adhere to the Hands-Free Georgia Act.

### 3. Administrative Vehicle Requirements

Administrative vehicles have different requirements than vehicles used primarily to provide consumer transportation. The vehicles must meet the following requirements:

- Passenger occupancy will not exceed vehicle manufacturer's approved seating capacity.
- Each vehicle must have a valid tag.
- Each vehicle operated in Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding and Rockdale counties must have emissions testing or emissions exemption verification.
- Each vehicle must have an operational speedometer, odometer, horn, windshield wipers, windows, headlights, front and back turn signals, parking lights, brake lights, reverse lights, and emergency flashers.
- Each vehicle window must be free from cracks and/or damage.
- Each vehicle must have at least two exterior mirrors (one on each side of the vehicle) and a rearview mirror free from cracks and/or damage for monitoring the passenger compartment.
- Each vehicle must be free of excessive body damage or body damage that interferes with the operation of doors and/or windows. The vehicles exterior should be clean and free of excessive grime, rust, chipped paint or major dents, which detracts from the overall appearance of the vehicle.
- Each vehicle must have adequate tires for the vehicle based on manufactures specifications. The tires should have proper tread depth and be free from excessive wear, exposed wire, and/or damage.
- Each vehicle must have a spare tire and jack for emergency situations. If the vehicle is not manufactured with a spare tire and jack, the driver must explain the process for obtaining assistance in the event of a tire emergency.
- Each vehicle must have functioning, clean, and accessible seat belts for each passenger seat position and each shall be stored off the floor when not in use.
- Each vehicle must have a standard first aid kit including, but not limited to:
  - Box of adhesive bandages
  - Antiseptic cleansing wipes
  - Dressing Pads
  - Oval eye pad
  - Conforming gauze bandage
  - Triangular bandage
  - Triple antibiotic ointment
  - Sanitizing hand wipes
  - Cold Pack
  - Cotton-tip applicator
  - Latex gloves
  - Scissors and tweezers
  - Sterile eyewash
  - Insect sting relief pads
  - Aspirin

For a complete list of a well-stocked first aid kit, refer to the Red Cross website at [www.RedCross.org](http://www.RedCross.org) and search for "Make a first aid kit".

- Each vehicle's interior must be clean and free from torn upholstery or floor covering, damaged or broken seats, protruding sharp edges, free of dirt, oil, grease, or litter. The vehicle must have adequate sidewall padding and ceiling covering.
- Each vehicle door must be functioning and free from obstructions.
- Each vehicle must have a functioning interior light within the passenger compartment.
- Each vehicle must be equipped with adequate heating and air conditioning for driver and passengers.
- Each vehicles floor must be covered with commercial anti-skid, ribbed rubber flooring, or carpeting. Ribbing in vehicles equipped to transport wheelchair passengers shall not interfere with wheelchair movement between the lift and the wheelchair positions.
- Each vehicle must be clearly identified on the exterior in accordance with the Vehicle Markings Identification (refer to the [Vehicle Identification/Markings](#) section in this chapter for additional information).



- All vehicles must include an information packet, in the form of a DHS Logbook. At a minimum, this packet will include:
  - Insurance information and identification cards
  - Daily log sheets ([Appendix 10 – DHS Administrative Vehicle Log](#))
  - Accident Reporting Information

#### 4. Site Visits and Vehicle Inspections

All Divisions/Offices assigned DHS administrative vehicles are subject to site visits and vehicle inspections by RTO staff. It is the responsibility of the Division/Office staff to ensure all file and vehicles are in compliance with the DHS Administrative Vehicle requirements. A standard checklist, [Appendix 23 – DHS Vehicle Requirements and Monitoring Form – Administrative Vehicles](#), is used to record the vehicle inspection. Site visits are performed in order to provide assistance in vehicle management, monitoring compliance and use, monitoring driver requirements and verify records and vehicles are being properly maintained.

## **G. CONFIDENTIALITY AND PRIVACY STANDARDS**

### **1. Confidentiality**

Contractors shall comply with DHS policies regarding confidentiality and agree to abide by all state and federal laws, rules and regulations on respecting confidentiality of an individual's records. Contractors further agree not to divulge any information concerning any individual to any unauthorized person without written consent of the individual employee, consumer, or responsible parent or guardian.

#### **a) Social Media**

Publishing inappropriate or offensive material regarding clients, human service providers, individuals and organizations associated with clients, or other work-related contacts on any social network site or other website is an example of off-duty activity that could reflect discredit on the Department.

#### **b) Personal Gain**

Directly or indirectly asking, accepting, demanding, soliciting, seeking, or receiving a financial or other benefit for themselves or for others in return for being influenced in the performance of their job responsibilities are examples of off-duty activities that could reflect discredit on the Department.

### **2. Privacy of Health Information**

Contractors shall comply with DHS policies regarding privacy of individually identifiable health information, and agree to abide by all state and federal laws, rules and regulations on protecting privacy of individuals' health information. Contractors will safeguard protected health information disclosed by DHS and assure that their agents, employees and Subcontractors agree to the same conditions applicable to the contractor with respect to such information.

# **CHAPTER 3**

## **RISK MANAGEMENT AND INSURANCE**

## INTRODUCTION

This chapter is intended to offer a comprehensive reference of the insurance coverage and/or insurance requirements of Transportation Providers (TPs), Subcontractors of TPs, and all intended users who operate vehicles, including state owned and state leased vehicles, to render services on behalf of the Department of Human Services (DHS), Transportation Services Section (TSS), or the Department of Behavioral Health and Developmental Disabilities (DBHDD). The requirements differ based on the vehicle ownership and organization type. For questions regarding insurance coverage or requirements, the Regional Transportation Office (RTO) should be contacted for clarification.

The information in this manual is meant to be used as a guide only. For the most current information on insurance and risk management, refer to the [DHS Risk Management Manual](#) (Manual MAN1430) on the DHS Online Directive Information System (ODIS) at <http://odis.dhs.state.ga.us>.

## A. CERTIFICATE OF INSURANCE

Transportation Providers (TPs) and other applicable vendors shall procure and maintain insurance which shall protect the contractor and the State from any claims for bodily injury, property damage, or personal injury which may arise out of operations under the agreement. TPs shall procure the insurance policies at their own expense and shall furnish the State with an insurance certificate listing the State as the certificate holder.<sup>3</sup> Certificates of Insurance must document that the liability insurance coverage purchased by the TP includes contractual liability coverage to protect the State. The certificate shall be furnished to the Regional Transportation Office (RTO) no later than ten (10) business days after notification of the State's intent to award a contract. In addition, the insurance certificate must provide the following information:

1. Name and address of authorized agent
2. Name and address of insured
3. Name of insurance company (licensed to operate in Georgia)
4. Description of coverage in standard terminology
5. Policy period
6. Limits of liability
7. Name and address of certificate holder
8. Acknowledgment of notice of cancellation to the state
9. Signature of authorized agent
10. Telephone number of authorized agent
11. Details of policy exclusions in comments section of insurance certificate

Refer to [Exhibit 26 – Sample Certificate of Insurance](#) for a sample.

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<sup>3</sup> Certificates of insurance from prime contractors need to show DHS as a certificate holder, and certificates of insurance from subcontractors need to show the prime contractor as the certificate holder.

## B. INSURANCE FOR STATE OWNED AND STATE LEASED VEHICLES

This section contains General Insurance Requirements set forth by the Department of Administrative Services (DOAS). Transportation Providers and other applicable operators should reference DOAS' website for the most current information at <http://doas.ga.gov> and search for *Insurance and Bonding Guidelines*. In the event information in this manual differs from what is on the DOAS' site, the DOAS' site supersedes this manual.

### 1. Vehicle Liability Coverage

The Department of Administrative Services (DOAS), Self-Insured Program carries a General Comprehensive Liability Policy. This policy provides liability insurance for state employees and authorized drivers in all state departments, boards, agencies, and instrumentalities against loss resulting from accidents arising out of the use of State owned vehicles and/or vehicles on long-term leases to the state. The Vehicle Liability coverage must be purchased on vehicles titled to the state or on vehicles on long-term leases to the state.

#### a) Insured (Who Is Covered)

- All State of Georgia Government entities including state offices, agencies, departments, commissions, boards, divisions, or institutions.
- Non-profit agencies and their employees whose agencies have contracted with the Department of Human Services.
- Any employee of the State of Georgia while operating an automobile owned or leased by the state, its agencies, or its instrumentalities.
- Additional Insured: The contractor shall add the "State of Georgia, its officers, employees and agents" as an additional insured under the commercial general and automobile liability policies.
- *Note: State employees using their own private vehicles to conduct official business on behalf of the state should refer to Chapter 2, Section D for insurance coverage information.*

#### b) Required Limits of Liability

<b><u>Insurance Type:</u></b>	<b><u>Minimum Limits:</u></b>
Workers Compensation (WC):	Required for all Contracts - NO EXEMPTIONS
Commercial General Liability (CGL):	
Each Occurrence Limit	\$ 1,000,000
Personal & Advertising Injury Limit	\$ 1,000,000
General Aggregate Limit	\$ 2,000,000
Products/Completed Ops. Aggregate Limit	\$ 2,000,000
Automobile Liability - combined single limit	\$ 3,000,000

#### c) Exclusions

- This coverage does not apply unless an insured's employee is operating an automobile in the course of employment.

- This coverage does not apply to volunteers, contracted employees, or employees who work for employment agencies. Refer to Chapter 2, Section E for additional information on volunteers.

#### d) Premium Charges

Vehicle insurance premium invoice notices are sent to vehicle operators on an annual basis, usually in July.

### 3. Vehicle Comprehensive Coverage (Auto Physical Damage)

Auto Physical Damage (APD) coverage is provided under the DOAS Self-Insured Program and insures against the risk of physical loss, damage, or theft of state-owned or state-leased vehicles. This coverage is optional and must be requested by your agency.

To file a claim, follow the steps below in Section 3 – Accident and Incident Reporting. After filing a claim:

1. DOAS notifies you/your agency that a claim has been created.
2. Forward an estimate utilizing alternative parts.<sup>4</sup> Let the repair shop know the NetClaim number or the date of loss and let them send the estimate to [APD@doas.ga.gov](mailto:APD@doas.ga.gov) with the information in subject line.
3. You *may* be asked to provide a police report.
4. DOAS advises if the loss is assigned to an appraiser, in which case no estimate is needed; simply let the appraiser know the selected shop for repairs.
5. Send all documents only to [APD@doas.ga.gov](mailto:APD@doas.ga.gov) without copying any other individuals, including individuals working at DOAS. Documents must reference a date of loss and an agency name or include the NetClaim number. DOAS will determine the amount of the claim and whether a deductible (\$500) applies.<sup>5</sup>
6. DOAS will pay the shop or your agency and notify your agency to proceed with repairs.<sup>6</sup> DOAS will not pay more than \$44 per hour for labor.
7. On Total Losses, send the signed title to Fleet and DOAS will move the vehicle.
8. The vehicle will be placed out of service and the fuel card will be canceled. The vehicle must not be driven.
9. Failure to take quick action in reporting or providing the necessary paperwork could result in additional costs being assessed to your claim.

To discuss an open claim, call 404-463-7488 or [APD@doas.ga.gov](mailto:APD@doas.ga.gov).

### 2. Accident and Incident Reporting

Incidents and accidents involving consumers, providers, coordinated system vehicles and/or Department of Human Services (DHS)/Department of Behavioral Health and Developmental

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<sup>4</sup> Alternative parts include remanufactured, used, or after-market parts. These greatly reduce the cost of repairs and keep premiums down. These parts will not be acceptable replacements for any safety related components. Alternative parts are required on every estimate where they are available, regardless of the age of the vehicle. Failure to follow this requirement will result in delays in handling the claim.

<sup>5</sup> A deductible applies when the employee strikes another vehicle in the rear, hits a fixed object (including a parked vehicle), or fails to report a crime, such as hit & run, vandalism, etc., to the police.

<sup>6</sup> Total Losses: Under the terms of the policy, a vehicle is a total loss if the repair estimate exceeds 75% of the Book Value in HOLMAN. We will have all potential total losses assigned to an appraiser to determine the actual cash value and the value of the salvage.

Disabilities (DBHDD) titled vehicles MUST be reported in a timely manner by the driver to their supervisor or designated insurance coordinator, who should contact DOAS and the Regional Transportation Office (RTO). The organization must immediately report the vehicle accident or consumer injury as outlined below. Failure to report as outlined could result in the transfer or reassignment of a DHS and/or DBHDD vehicle.

For vehicle accidents, call:

- 911 and inform the police of the accident or property damage in order to obtain a police report – a formal accident report must be filed if an accident involves another vehicle
- The emergency contacts for each consumer involved in the accident, including all passengers in the vehicle
- State of Georgia DOAS
- The appropriate RTO

For consumer-related incidents, call:

- 911, if applicable
- The emergency contact for each consumer involved in the incident
- The appropriate RTO

#### a) State of Georgia DOAS

Self-Insured Program

Toll Free Phone: 1-877-656-RISK (1-877-656-7475)

THIS CALL SHOULD BE MADE AS SOON AS POSSIBLE AFTER THE ACCIDENT. Refer to the vehicle's Auto Liability Insurance Identification Card or the reporting procedures for the most up-to-date information regarding what to expect during the call. The current DOAS Auto Program card may be found at <http://doas.ga.gov> and searching for "Auto Insurance".

The card currently states:

The Auto Program is a self-funded program through the State of Georgia that covers state employees while driving on state business. Our goal is to resolve claims fairly and swiftly while protecting state agencies and state employees.

##### **To report an automobile accident:**

Call Toll Free Phone: 1-877-656-7475 to report accidents within 48 hours. If you are in an accident, be sure to get the following information before leaving the area:

- Date, Time, Place
- Your Vehicle – year, make, model, tag
- Describe Accident. Include
  - Direction each vehicle was traveling, weather conditions
  - Details of accident.
- For all individuals include name, address, employer, home and work phone numbers. Describe injuries claimed and observed; ID hospital, if applicable
  - Insured (State Employee) driver
  - Your passengers
  - Other driver
  - His/ her passengers
  - Witnesses
- Other vehicle(s): year, make, model, tag, insurance company and policy #
- Police: agency, officer, citations issued (?), to whom?

## b) Regional Transportation Office

All accidents and incidents involving consumers while under the supervision of the Transportation Provider (TP) must be reported to the RTO within 2 hours. This includes accidents involving the vehicle or property damage as well as consumer-related incidents such as injuries, assaults, and inappropriate behavior. Accidents and incidents involving leased or administrative vehicles are also required to adhere to this reporting process. A state employee operating an administrative vehicle is considered a TP in this section and on the required forms. If the accident or incident occurs on a weekend, holiday, or after hours, it must be reported by the next business day. The RTO sends email notification of the accident or incident to the District Operations Manager (DOM) and the Fleet and Risk Manager. The DOM and Fleet and Risk Manager notify other appropriate DHS staff, as needed.

### **Accident and Incident Reporting to the RTO by the Transportation Provider:**

1. TP completes [Appendix 24 – Vehicle Operator Initial Accident and Incident Reporting Form](#) and submits to the RTO within 2 hours of the accident/incident,. The initial email subject line should read:
  - Region X - Accident or Incident- Date of occurrence - Contractor Name and Subcontractor Name (or Region and County, if reporting an accident involving an administrative vehicle)
  - Example 1: Region 9 - Accident on 9/22/2016 - Contractor: Heart of Georgia RC - Subcontractor: Quality Trans.
  - Example 2: DFCS Region 9 – Dodge County - Administrative Vehicle Accident on 9/22/2016
2. Within five business days, TP completes and submits [Appendix 25 – Vehicle Operator Accident and Incident Follow-up Reporting Form](#) and all supporting documentation to the RTO via email. Supporting documentation includes written incident reports, police reports (if applicable), accident reports, and any other items pertinent to the incident, such as photographs and videos. Email this information to your DOM and the Fleet and Risk Manager. The e-mail subject line for updates should read:
  - UPDATE: Region X – Accident or Incident - Date of occurrence - Contractor Name and Subcontractor Name
  - Example 1: UPDATE: Region 9 - Accident on 9/22/2016 - Contractor: Heart of Georgia RC - Subcontractor: Quality Trans.
  - Example 2: UPDATE: DFCS Region 9 – Dodge County - Administrative Vehicle Accident on 9/22/2016

Tps are required to maintain copies of all accident reports in the pertinent driver and vehicle files.

If a State titled vehicle involved in an accident is deemed a total loss by insurance, the vehicle operator is required to surplus (aka. dispose of) the vehicle in Asset Works. Refer to Chapter 2, Section B for additional instructions on vehicle surplus.

### **Accident and Incident Reporting to the DOM and the Fleet and Risk Manager by the RTO:**

1. RTO completes [Appendix 26 – Regional Transportation Office Initial Accident and Incident Reporting Form](#) and submits to the DOM and within 4 hours of receipt. The initial email subject line should read:



- Region X - Accident or Incident- Date of occurrence - Contractor Name and Subcontractor Name
  - Example 1: Region 9 - Accident on 9/22/2016 - Contractor: Heart of Georgia RC - Subcontractor: Quality Trans.
  - Example 2: DFCS Region 9 – Dodge County - Administrative Vehicle Accident on 9/22/2016
2. Within 24 hours, or one business day of the receipt of the follow up report from the TP, RTO completes [Appendix 25 Vehicle Operator Accident and Incident Reporting Form](#) and submits to the DOM and the Fleet and Risk Manager. This form has a section at the bottom for the last time the TSS office inspected the vehicle/provider. This section of the form is mandatory. The email subject line should read:
- Region X - Accident or Incident- Date of occurrence - Contractor Name and Subcontractor Name
  - Example 1: Region 9 - Accident on 9/22/2016 - Contractor: Heart of Georgia RC - Subcontractor: Quality Trans.
  - Example 2: DFCS Region 9 – Dodge County - Administrative Vehicle Accident on 9/22/2016

RTOs are required to maintain copies of all accident/incident reports.

## C. INSURANCE FOR COORDINATED TRANSPORTATION PROVIDER-OWNED VEHICLES

The following *required minimum* insurance limits apply to transportation providers doing business with the State of Georgia.<sup>7</sup> To achieve the appropriate coverage levels, a combination of a specific policy written with an umbrella policy covering liabilities limits is acceptable.<sup>8</sup>

An organization, both for-profit and non-profit, who utilizes its privately-owned vehicles to transport consumers and/or provide services in the Coordinated Transportation System is responsible for securing its own vehicle insurance coverage.

### Note:

The State requires that *all* policies must contain a provision that coverage afforded under the policies shall not be canceled, changed, allowed to lapse, or allowed to expire until thirty (30) calendar days after written notice has been given to the certificate holder on the certificate of insurance. All such coverage shall remain in full force and effect during the initial term of the agreement and any renewal or extension thereof.

For contractors operating privately owned vehicles, *all* policies must be issued by an insurance company licensed to do business in the State of Georgia with a minimum A.M. Best Rating Services rating of A- and signed by an authorized agent. Contractors will provide proof of their A.M. Best rating to the Regional Transportation Office (RTO) by providing a copy of their Certificate of Insurance and a printout of their insurance company's rating from <http://www.ambest.com/home/default.aspx>. The rating will be validated by the RTO on an annual basis and/or during the contract renewal process.

### **INSURANCE**

The following requirements shall be adhered to by Contractors throughout the duration of the Contract, and as may otherwise be specified herein. Contractor shall procure and maintain insurance that shall protect the Contractor and the Department from any claims for bodily injury, property damage, or personal injury that may arise out of operations under the Contract. Contractor shall procure the insurance policies at its own expense and shall furnish the Department an insurance certificate of the coverage required in this section listing the Department as certificate holder. In addition, the insurance certificate must provide the name and address of the insured, name, address, telephone number and signature of the authorized agent; the name of the insurance company (licensed to operate in Georgia); a description of the coverage in detailed standard terminology (including policy period and limits of liability); and, an acknowledgment that notice of cancellation is required to be given to the Department. Contractor

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<sup>7</sup> TSS requires the minimum limits of liabilities stated above; this matches the recommended minimum limits of liabilities suggested by the Department of Administrative Services (DOAS).

<sup>8</sup> For example: If appropriate limits are \$2 million per occurrence and \$2 million aggregate, acceptable coverage would include a specific policy covering \$1 million per occurrence and \$1 million aggregate written with an umbrella policy for an additional \$1 million.

is required to obtain and maintain the following types of insurance coverage for the duration of the Contract:

**INSURANCE FOR PROVIDERS WHO OWNED/OPERATE VEHICLES**

- A. Workers Compensation Insurance (Occurrence) in the amounts of the statutory limits established by the General Assembly of the State of Georgia in Title 34, Chapter 9 of the O.C.G.A. (A self-insurer must submit a certificate from the Georgia Board of Workers Compensation stating that Contractor qualifies to pay its own workers compensation claims). Contractor shall require all subcontractors that are required by statute to hold workers compensation insurance and that occupy the premises or perform work under this Contract to obtain an insurance certificate showing proof of Workers Compensation Coverage.
- B. Commercial General Liability Policy (Occurrence) to include contractual liability. \$1 million per occurrence/\$2 million dollar aggregate policy limits.
- C. Business Auto Policy (Occurrence) to include but not be limited to liability coverage on any owned, non-owned and hired vehicle used by Contractor or Contractor's personnel in the performance of this Contract. For vehicles with a seating capacity of 15 or less: \$3 million dollar combined single limit. For vehicles with a seating capacity greater than 15: \$5 million dollar combined single limit.
- D. Commercial Umbrella Policy (Occurrence). \$2 million dollar limit. An umbrella policy may cover the aggregate policy limits required herein. There must be no gap between the \$1 million and \$2 million dollar policy limits and the umbrella policy must follow the form of the underlying \$1 million primary policy.

The Contractor's policy containing coverage amounts with higher limits than stated above will satisfy the requirements of this paragraph.

The foregoing policies shall contain a provision that coverage afforded under the policies will not be canceled, or not renewed or allowed to lapse for any reason until at least 10 days prior written notice has been given to the Department. Certificates of Insurance showing such coverage to be in force shall be filed with the Department prior to commencement of any work under this Contract. The foregoing policies shall be obtained from insurance companies licensed to do business in Georgia and shall be with companies acceptable to the Department. All such coverage shall remain in full force and effect during the initial term of the Contract and any renewal or extension thereof. At all times, coverage shall be within limits acceptable to the Department.

**INSURANCE FOR PUBLIC ENTITIES/PUBLIC ENTITIES PARTICIPATING IN SELF-INSURANCE PROGRAMS**

- A. Contractor shall, at its sole cost and expense, obtain, and during the entire term of this Contract, maintain, in full force and effect, the insurance coverage described in this Paragraph, protecting the Contractor and the Department, to the fullest extent allowed by law and up to the required limits, against any claims for damages, including but not limited to,

bodily injury, damage to or destruction of property, or personal injury, arising out of the operations under the Contract.

- B. Contractor shall secure such insurance coverage either: (a) from an insurance carrier or carriers licensed to conduct business in the State of Georgia and having an A.M. Best Company rating of A-, Class VII or better, unless specific approval has been granted by the Department; (b) through a self-funded Risk Management Plan pursuant to O.C.G.A. § 45-9-21, *et seq.*; or (c) any combination thereof. Specifically, Contractor shall provide the minimum acceptable limits of liability as follows:
1. Workers Compensation and Employer's Liability (Occurrence) in the amounts of the statutory limits established by the General Assembly of the State of Georgia in Title 34, Chapter 9 of the O.C.G.A. (A self-insurer shall submit to the Department a certificate from the Georgia Board of Workers Compensation stating that Contractor qualifies to pay its own workers compensation claims). Contractor shall require all subcontractors that are required by statute to hold workers compensation insurance and that occupy the premises or perform work under this Contract to obtain an insurance certificate showing proof of Workers Compensation Coverage.
  2. Commercial General Liability (Occurrence) to include contractual liability. Contractor shall self-fund all general liability losses up to \$2,000,000. Any losses which exceed the self-funded amount will be covered by Excess liability coverage.
  3. Business Automobile Liability, in accordance with O.C.G.A. § 33-24-51 and in the amounts of the statutory limits established under O.C.G.A. § 36-92-2, to include, but not be limited to liability coverage on any owned, non-owned and hired vehicle used by Contractor or Contractor's subcontractors, agents or representatives in the performance of this Contract. Contractors who do not own vehicles that are operated by their personnel should notify their Regional Transportation Office and obtain guidance.
  4. Excess Liability (Commercial Umbrella Insurance) (Occurrence). Contractor shall self-fund the \$2,000,000 self-insured retention (SIR) amount.

## Accident and Incident Reporting

Incidents and accidents involving consumers, providers, coordinated system vehicles and/or Department of Human Services (DHS)/Department of Behavioral Health and Developmental Disabilities (DBHDD) titled vehicles MUST be reported in a timely manner by the driver to their supervisor or designated insurance coordinator, who should contact the RTO. The organization must immediately report the vehicle accident or consumer injury as outlined below. Failure to report as outlined could result in the transfer or reassignment of a DHS and/or DBHDD vehicle.

For vehicle accidents, call:

- 911 and inform the police of the accident or property damage in order to obtain a police report – a formal accident report must be filed if an accident involves another vehicle
- The emergency contacts for each consumer involved in the accident, including all passengers in the vehicle
- The appropriate RTO

For consumer-related incidents, call:

- 911, if applicable
- The emergency contact for each consumer involved in the incident
- The appropriate RTO

### Accident Reporting to the RTO:

All accidents and incidents involving consumers while under the supervision of the Transportation Provider (TP) must be reported to the RTO using [Appendix 24 – Vehicle Operator Initial Accident and Incident Reporting Form](#) within 2 hours. This includes accidents involving the vehicle or property damage as well as consumer-related incidents such as injuries, assaults, and inappropriate behavior. If the accident or incident occurs on a weekend, holiday, or after hours, it must be reported by the next business day. The RTO sends email notification of the accident or incident to the District Operations Manager (DOM) and the Fleet and Risk Manager. The DOM and the Fleet and Risk Manager notify other appropriate DHS staff, as needed.

#### Accident and Incident Reporting to the RTO by the Transportation Provider:

1. TP completes [Appendix 24 – Vehicle Operator Initial Accident and Incident Reporting Form](#) and submits to the RTO within 2 hours of the accident/incident,. The initial email subject line should read:
  - Region X - Accident or Incident- Date of occurrence - Contractor Name and Subcontractor Name
  - Example: Region 9 - Accident on 9/22/2016 - Contractor: Heart of Georgia RC - Subcontractor: Quality Trans.
2. Within five business days, TP completes and submits [Appendix 25 – Vehicle Operator Accident and Incident Follow-up Reporting Form](#) and all supporting documentation to the RTO via email. Supporting documentation includes written incident reports, police reports (if applicable), accident reports, and any other items pertinent to the incident, such as photographs and videos. Email this information to your DOM and the Fleet and Risk Manager. The e-mail subject line for updates should read:
  - UPDATE: Region X – Accident or Incident - Date of occurrence - Contractor Name and Subcontractor Name
  - Example: UPDATE: Region 9 - Accident on 9/22/2016 - Contractor: Heart of Georgia RC - Subcontractor: Quality Trans.

Tps are required to maintain copies of all accident reports in the pertinent driver and vehicle files.

If a state titled vehicle involved in an accident is deemed a total loss by insurance, the vehicle operator is required to surplus (aka. dispose of) the vehicle in Asset Works. Refer to Chapter 2, Section B – Vehicle Lifecycle for additional instructions on vehicle surplus.

#### Accident and Incident Reporting to the DOM and the Fleet and Risk Manager by the RTO:

1. RTO completes [Appendix 26 – Regional Transportation Office Initial Accident and Incident Reporting Form](#) and submits to the DOM and the DHS Fleet and Risk Manager within 4 hours of receipt, The initial email subject line should read:
  - Region X - Accident or Incident- Date of occurrence - Contractor Name and Subcontractor Name

- Example: Region 9 - Accident on 9/22/2016 - Contractor: Heart of Georgia RC - Subcontractor: Quality Trans.
2. Within 24 hours, or one business day of the receipt of the follow up report from the TP, RTO completes [Appendix 27 – Regional Transportation Office Accident and Incident Follow up Form](#) and submits to the DOM and the Fleet and Risk Manager. This form has a section at the bottom for the last time the TSS office inspected the vehicle/provider. This section of the form is mandatory. The email subject line should read:
- Region X - Accident or Incident- Date of occurrence - Contractor Name and Subcontractor Name
  - Example: Region 9 - Accident on 9/22/2016 - Contractor: Heart of Georgia RC - Subcontractor: Quality Trans.

RTOs are required to maintain copies of all accident/incident reports.

## D. INSURANCE FOR PERSONAL VEHICLES USE BY STATE EMPLOYEES

Employees of the State of Georgia government entities who operate their personally owned vehicle while performing their job receive liability insurance coverage under the State's Tort Claims Insurance Policy. There is no direct cost to the employee, and no deductible in the event of an accident. **The Tort Claims Insurance Policy does not provide property damage coverage (collision).**

However, if an employee operates their personally owned vehicle and typically transports consumers, then their personal insurance would likely increase once the carrier is made aware of the situation.

The legal reference is O.C.G.A.50-21-25. The State Tort Claims Liability Insurance Policy is referenced for the information below.

### 1. The Insured (who is covered)

All State of Georgia Government Entities, which include state offices, agencies, authorities, departments, commissions, boards, divisions, instrumentalities, or institutions (this now includes Community Service Board employees).

Specifically, within the Department of Human Services (DHS) and the Department of Behavioral Health and Developmental Disabilities (DBHDD), this coverage is applicable to employees, board members, volunteers whose application for liability coverage is received and approved or a foster parent in a certified foster parent home.

### 2. General Policy Details

Name	Tort Claim Trust Fund, Department of Administrative Services
Period	July to July. The Volunteer Insurance Policy will automatically renew each year on July 1.
Type	This insurance policy will pay from the Tort Claim Trust Fund all sums the insured becomes legally obligated to pay as damages, court costs and litigation expenses because of the negligence of a DHS or DBHDD state employee, board member, CSB employee, approved volunteer or certified foster parent. Typically, the negligence would occur while the covered individual was performing his or her official duties (i.e. an individual transporting a consumer in their personal vehicle).
Territory	This insurance policy covers the state employee anywhere he or she is performing their specified duties
Liability Limits	\$1,000,000.00 each person; \$3,000,000.00 aggregate occurrence

## E. INSURANCE FOR VOLUNTEERS

“Volunteer” means any natural person who participates without compensation in a volunteer program organized, controlled, and directed by a DHS state entity.

### **Volunteers are prohibited from driving state-owned or state-leased vehicles.**

Liability insurance coverage, but not comprehensive coverage, is available for individuals who participate without compensation in a volunteer program organized, controlled, and directed by a State entity and who use their own personal vehicles to transport consumers. The coverage only applies to volunteers while performing their volunteering duties and covers only their liability, but not their vehicle. If a volunteer is being utilized as a transporter, the utilizing organization is responsible for insuring that the volunteer has a current valid driver's license for the class of vehicle to be used and proof of private automobile insurance for the vehicle to be used for transporting consumers. A photocopy of the volunteer's driver's license and the valid vehicle insurance card must be made and maintained in the utilizing organization's volunteer files.



# APPENDICES

## Appendix 1 – Glossary

Acronym or Term	Term / Definition
ADA	Americans with Disabilities Act
Annual Funding Allocation	A report provided to Funding Partners indicating how the annual funds will be used across the state.
APD	Auto Physical Damage
ARI	Automotive Resources International
ASE	Automotive Service Excellence (certification)
CAP	Corrective Action Plan
CDL	Commercial Driver’s License
CPR	Cardiopulmonary Resuscitation
CSB	Community Service Boards
DBHDD	Department of Behavioral Health and Developmental Disabilities
DDS	Department of Driver Services
DHS	Department of Human Services
DOAS	Department of Administrative Services
DOE	Department of Energy
DOM	District Operations Manager
DOR	Department of Revenue
DOT	Department of Transportation
DPS	Department of Public Safety
eRFP	Electronic Request for Proposal or solicitation
FBI	Federal Bureau of Investigation
FMCSA	Federal Motor Carriers Safety Administration
GAPS	Georgia Application Processing Services (Cogent)
GCAF	Georgia’s Clean Air Force
GCIC	Georgia Crime Information Center
GIMC	Georgia Intrastate Motor Carrier (Department of Public Safety)
GVWR	Gross Vehicle Weight Rating
ISP	Individual Service Plan
MVR	Motor Vehicle Report
NOIA	Notice of Intent to Award
OFSS	Office of Facilities and Support Services
OPC	Office of Procurement and Contracts
PDF	Portable Document Format
Purserv	Transportation Services Section internal checkbook register tool
RC	Regional Coordinator
RTCC	Regional Transportation Coordinating Committee
RTO	Regional Transportation Office
SLA	Service Level Agreement
SNAP	Supplemental Nutrition Assistance Program (Food stamps program)

SO	State Office
SPD	State Purchasing Division
TANF	Temporary Assistance for Needy Families
TM	Transportation Manager
TP	Transportation Provider
TRIP\$	Transportation Request Information Processing System, the application for trip ordering
TSS	Transportation Services Section
FM	Fleet Manager
TSS-SO	Transportation Services Section State Office
UCR	Unified Carrier Registration
UPS	United Postal Service
USPS	United States Postal Service
VIN	Vehicle Identification Number
WEX	Wright Express (WEX, Inc.) (Fuel program)

## Appendix 2 – Process Map Legend



## Appendix 3 – Administrative Documents Review

The space below is intentionally left blank so that the form on the following page may be printed and used.



Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
Administrative Documents Review

Vehicle Operator: \_\_\_\_\_

Contractor

Sub-contractor

Non-leased Holman

<u>Documents for review</u>	<u>Reviewed</u>
Quarterly Vehicle Report identifying required vehicles for inspection	_____
List of drivers from Technical Proposal or HSP	_____
Driver Qualification Files (all drivers under HSP/20% for contractors/subs)	_____
Copy of the previous site visit report with corrective actions*	_____
Certificates of insurance with current expiration	_____
Certificates of insurance indicating 3 Million/1 Million coverage	_____
Annual safety inspections signed by certified mechanic	_____
Mechanic certifications**	_____
Vehicle maintenance files/Holman Insights maintenance review	_____
Agency Drug and Alcohol plan review	_____
Agency Title VI plan review (contractors only)	_____
Random Inspection Protocol (contractors only - attach screen print)	_____
Screen print identifying the 20% of driver files	_____
Screen print identifying the 20% of vehicles and files	_____

\*This should be taken to the current site visit for reference.

\*\*Copies of these must be collected for the inspection file.

Comments:

## Appendix 4 – Monthly Program Report – Trip, Miles, and Hour Analysis

The space below is intentionally left blank so that the form on the following page may be printed and used.



Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
DHS Monthly Program Report – Trip, Miles, and Hours Analysis

Contractor: \_\_\_\_\_

Month of Service: \_\_\_\_\_

Total Transport Miles

Total Transport Hours

Total # of Drivers

Total # of Vehicles

	DOT Trips	DCH Trips	Other Trips	Total Non-DHS
Non-DHS trips	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



## Appendix 5 – Report of Certified or In-Kind Cost

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services,  
Transportation Services Section Report of Certified or In-Kind Cost**

**SECTION I – TO BE COMPLETED BY CONTRACTOR**

For the period: \_\_\_\_\_ 20 \_\_\_\_\_ to \_\_\_\_\_ 20 \_\_\_\_\_

From: \_\_\_\_\_ Through: \_\_\_\_\_  
Name of Contractor Program Officer, DHS

TO: Accounting Services, DHS  Certified Cost  In-Kind Cost

Title of Program: \_\_\_\_\_

DHS Contract #: \_\_\_\_\_ Identification #: \_\_\_\_\_ Control #: \_\_\_\_\_

Name and Address of Provider of Certified or In-Kind Cost:

**Cost:**  
**A. Personnel (attach continuation, if needed)**

NAME	TITLE	SALARY	FRINGE BENEFITS	%TIME	APPLICABLE AMOUNT
Subtotal .....					\$ _____

**B. Other Cost (attach continuation, if needed)**

Subtotal ..... \$ \_\_\_\_\_

Grand Total..... \$ \_\_\_\_\_

*I, the undersigned, hereby certify that the above certified or in-kind match cost have been provided/received in compliance with the requirements and Conditions of the applicable federal program. I further certify that my office has available a set of accounting records relative to these certified cost that specifically identifies each specific detailed transaction directly to this federal program and that these records are available for DHR or federal auditors review.*

\_\_\_\_\_ (signed): \_\_\_\_\_  
Date

**SECTION II – TO BE COMPLETED BY PROGRAM STAFF, DHS**

Organization \_\_\_\_\_ Project \_\_\_\_\_  
Code: \_\_\_\_\_ Code: \_\_\_\_\_ Date \_\_\_\_\_

Fund Source: \_\_\_\_\_ (signed): \_\_\_\_\_

## Appendix 6 – Complaint Form

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
Complaint Form**

**Name of Complainant:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State & Zip:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Name of Human Service Provider:** \_\_\_\_\_

**Name of Passenger:** \_\_\_\_\_

**Date of Incident:** \_\_\_\_\_

**Time of Incident:** \_\_\_\_\_

**Location of Incident:** \_\_\_\_\_

**Incident Reported to Whom and  
When:** \_\_\_\_\_

**Have there been previous  
incidents?** \_\_\_\_\_

**Describe nature of Complaint:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

## Appendix 7 – Complaint Resolution Form

The space below is intentionally left blank so that the form on the following page may be printed and used.



## Appendix 8 – Vehicle Acquisition via Purchase Checklist

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services**  
**Office of Facilities and Support Services, Transportation Services Section**  
**Vehicle Acquisition via Purchase Checklist**

(For use by Human Service Providers seeking approval to purchase a vehicle)

- Evaluate the vehicles assigned to your organization by reviewing the [Exhibit 16 – GA DOR Motor Vehicle Tag/Title](#). If needed, update all vehicle data in accordance with the information in [Acquisition via Purchase](#).
- Complete vehicle request in the HOLMAN system. A username and password are required for system access; a security form and applicable training **must** be completed before accessing the system. After a user ID and password have been assigned, complete a vehicle request using the instructions in the DOAS document (<http://odis.dhs.state.ga.us/ViewDocument.aspx?docID=3005164&verId=1>) or by viewing the training webinar on YouTube titled *HOLMAN Insights Vehicle Request Training Webinar*. Upon approval of the request, an email notification will be sent to Fleet Manager (FM) and the contact person for the organization making the request.
- If approved, proceed with purchase.
- The vendor where the new vehicle is purchased will issue (*sample documents*):
  - A completed [Exhibit 16 – GA DOR Motor Vehicle Tag/Title Application \(MV-1 Form\)](#)
  - An [Exhibit 18 – Sample Manufacturer Statement of Origin](#); and
  - An [Exhibit 19 – Non-Leased Vehicles Odometer Disclosure Statement \(Form GA-25\)](#).The documents must list the Buyer, or new owner, exactly as follows:

**For vehicles owned by the Department of Human Services (DHS):**  
**GA Department of Human Services**  
**2 Peachtree Street, NW #28-253**  
**Atlanta, Georgia 30303-3142**

**For vehicles owned by the Department of Behavioral Health and Developmental Disabilities (DBHDD):**  
**GA Department of Behavioral Health and Developmental Disabilities**  
**2 Peachtree Street, NW #28-253**  
**Atlanta, Georgia 30303-3142**
- Mail the following **original** documents to the Regional Transportation Office (RTO) no later than 15 days following receipt of the new vehicle(s).
  - Manufacturer's Statement of Origin (MSO)
  - Department of Motor Vehicle Safety Application for Tag and Title (Form MV-1).
  - Non-Leased Vehicle Odometer Disclosure Statement (Form GA-25)
- The RTO sends relevant information to the FM for immediate assignment of a state vehicle number. The state vehicle number is communicated to the RTO, who provides this information back to the HSP. The HSP is now able to create an asset in HOLMAN, which includes applying for a WEX card, if applicable. Next, the HSP requests a Report My Driving sticker at [www.drivercheck.net](http://www.drivercheck.net), which needs to be affixed to the vehicle prior to operating the vehicle. The HSP may contact the RTO for access to the Driver-Check website.
- The RTO applies for title and the state license plate (aka. tag) via the local county tag office. The license plate is mailed to the HSP along with other information in a packet. The title is mailed directly to the FM.
- Receive packet from the RTO:

<input type="checkbox"/> 2 sets of number decals (for the front and back of the vehicle(s))	<input type="checkbox"/> 1 insurance card
<input type="checkbox"/> 2 state seals	<input type="checkbox"/> 1 logbook (for administrative vehicles only)
	<input type="checkbox"/> 1 license plate (tag)
- Apply seals and numbers to the vehicle (refer to [Exhibit 22 – Vehicle Identification/Markings](#) for correct placement).
- Mount license plate (tag) on vehicle. Place insurance card and log book in vehicle (log book is only applicable to administrative vehicles not used to transport consumers).
- Apply the property decal on the inside of the driver's door frame next to the manufacturer's identification plate.



## Appendix 9 – HOLMAN Insights Security Access Application

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
HOLMAN Insights Security Access Application**

<b>Fleet and Risk Manager Name: Barbara Carr</b>		
<b>Fleet and Risk Manager Phone: 404-326-8897</b>		<b>Date:</b>
<b>New User</b> <input type="checkbox"/>	<b>Change of Information</b> <input type="checkbox"/>	<b>Delete User</b> <input type="checkbox"/>
<b>Name:</b>		
<b>Business Email:</b>		
<b>Business Address:</b>		
<b>City:</b>	<b>State:</b> GA	<b>Zip Code:</b>
<b>Business Phone:</b> <small>Click to enter phone.</small>		
<b>Agency:</b> <small>Click to enter agency.</small>		
<b>Site #:</b> <small>Click to enter site.</small>		<b>Division:</b> <small>Click to enter division.</small>
<b>Training:</b> <input type="checkbox"/> Attended OFM Training <input type="checkbox"/> Webinar <input type="checkbox"/> Fleet Coordinator <input type="checkbox"/> Other:		
<b>Check One</b>	<b><i>User Authorization Level/Responsibilities</i></b> <i>(may Include but not limited to)</i>	
<b>Level 3</b> <input type="checkbox"/>	Creates, maintains and updates system asset records. Generates fleet cost reports and planned and unplanned maintenance on fleet vehicles.	
<b>Level 2</b> <input type="checkbox"/>	Maintains minimal data on the asset record and generates and records maintenance data on work orders.	
<b>Level 1</b> <input type="checkbox"/>	Analyzes data and runs reports.	
<b>Check One</b>	<b><i>Vehicle Request/Approval Levels</i></b>	
<b>Vehicle Requester</b> <input type="checkbox"/>	<b>Vehicle Approver</b> <input type="checkbox"/>	<b>Final Approver</b> <input type="checkbox"/>

## Instructions for filling in Application

<b>Authorization:</b>	You must obtain approval from your Fleet Manager and list contact information
<b>Date:</b>	List today's date
<b>User Type:</b>	Are you a - New user/Editing an existing user/ Deleting a current user
<b>Name:</b>	List your first and last name
<b>Email:</b>	List your business email address
<b>Address:</b>	List your business address
<b>Phone:</b>	List your business phone number
<b>Agency:</b>	List the agency you are employed with.
<b>Site:</b>	List the Site # affiliated with your agency
<b>Division:</b>	List the 2-digit code affiliated with your agency

## How were you trained?

<b>Training Options</b>	<p>Did you -</p> <p>Attended training from office of Fleet Management</p> <p>ARI Holman Insights Webinar Training</p> <p>Fleet Coordinator</p> <p>Other (Please specify)</p>
-------------------------	--

## User Access Level Descriptions

*Position/ Responsibilities (may include but are not limited to)*

<b>User Access Levels</b>	<p>Level 3 – Typically this is the Fleet Manager but may be someone who assists the manager with maintaining and updating the system. You will have access to all available functions to manage your fleet in ARI.</p> <p>Level 2 – Typically this is a Maintenance/Mechanic level position. You will have access to maintain minimal data on the asset record and generate and record maintenance data on work orders.</p> <p>Level 1 – Typically this is an Analyst position. Access is limited to running reports and viewing data.</p>
---------------------------	--

## Vehicle Request Authorization

<b>Requester</b>	Authorization to create a request in ARI to purchase a vehicle for your agency
<b>Requester/ Approver</b>	Authorization to request/approve a request to purchase a vehicle
<b>Requester/ Final Approver</b>	Authorization to request/final approve a request to purchase a vehicle.

## Appendix 10 – DHS Administrative Vehicle Log

The space below is intentionally left blank so that the form on the following page may be printed and used.



## Appendix 11 – Site Visit Questionnaire

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
Site Visit Questionnaire**

Vehicle Operator/Contractor: \_\_\_\_\_ DHS Region: \_\_\_\_\_ Visit Date: \_\_\_\_\_

**Scheduled Visit**

**Random Inspection Visit**

Vehicles Inspected: \_\_\_\_\_

**Preventive (Scheduled) Maintenance Program (Check all that apply):**

- ARI Certified Vendor
- ARI Recommended Intervals
- Local Repair Shop (Please List Name of Shop) \_\_\_\_\_
- Onsite Certified Mechanic
- No Preventive Maintenance Program
- Oil Change and Inspection Every 3,000 Miles
- Oil Change and Inspection Every 5,000 Miles
- Other (Please Describe) \_\_\_\_\_

**Unscheduled Maintenance Program (Check all that apply):**

- ARI Certified Vendor
- Local Repair Shop (Please List Name of Shop) \_\_\_\_\_
- Onsite Certified Mechanic
- Other (Please Describe) \_\_\_\_\_

**The following files and policies will need to be viewed on the day of the site visit (Please have on site):**

- Daily Vehicle Inspection Sheets
- Driver Qualification Folders (Accident Reporting and Trainings (CPR, First Aid, Driver Improvement, PASS))
- Drug and Alcohol Testing Policy
- National Criminal Records Checks for all Drivers (GCIC and Fingerprint)
- Title VI Plan and Office Postings
- EEO Program, Abbreviated EEO Program, or EEO Policy Statement (**See threshold requirements at <https://www.transit.dot.gov/regulations-and-guidance/civil-rights-ada/eoo-guidance>.**)

**\*The following deficiencies were noted (to be completed by Transportation Services Section Staff):**

- Missing Verification of:     Preventive Maintenance Program             Unscheduled Maintenance Program
- Incomplete/Missing Daily Inspection Sheets
  - Incomplete/Missing Driver Qualification Folder(s)
  - Missing Drug and Alcohol Testing Policy
  - Missing National Criminal Records Checks \_\_\_\_\_
  - Missing Title VI Plan and Office Postings
  - Vehicle(s) Redlined \_\_\_\_\_

*\* A written Site Visit Summary Report will be emailed within two weeks.*

Site Visit Contact: \_\_\_\_\_

Email Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Contact's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Regional Coordinator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Appendix 12 – RTO Vehicle Transfer/Surplus Questionnaire

The space below is intentionally left blank so that the form on the following page may be printed and used.





# RTO Vehicle Transfer Questionnaire

This questionnaire is to be filled out when the RTO is contacted to transfer a vehicle. The final form is to be maintained with the vehicle file.

Vehicle Number: \_\_\_\_\_ Vehicle Year: \_\_\_\_\_  
 VIN #: \_\_\_\_\_ Make / Model: \_\_\_\_\_  
 Vehicle Operator: \_\_\_\_\_ Site Location ID: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Contact Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 Mailing Address for Title: \_\_\_\_\_  
 (for Surplus Only) \_\_\_\_\_

Is the vehicle over 10 years old?  Yes\*  No \*Surplus required

Current Mileage (site): \_\_\_\_\_ Current Mileage (Holman/Insights): \_\_\_\_\_

Is the mileage over 135,000 miles:  Yes\*  No \*Surplus required

Current condition of the vehicle:  Operable  Inoperable  Totaled by DOAS\*\*  
 Claim # \_\_\_\_\_

Major Deficiencies\*\*  Engine damage  Transmission damage  Electrical Damage  Prior Recall  
 Prior Accident(s)  Poor/Improper Maintenance  Body Damage  Safety Concerns  Redlined  
 Other (Please Explain): \_\_\_\_\_

How long has the vehicle been inoperable\*\*: \_\_\_\_\_

Transfer:  Surplus:   
 Authorized Disposal Method\*\*   
 Transfer site: \_\_\_\_\_ Live Auction Disposal Method   
 Transfer contact: \_\_\_\_\_ Vendor Pick Up  Drop Off   
 Contact phone: \_\_\_\_\_ Internet Sale Method

Address where vehicle is located: \_\_\_\_\_ DOAS Surplus Inspection Form Completed   
 \_\_\_\_\_ State seals, numbers, markings, and tag removed   
 \_\_\_\_\_ Pictures taken as required on DOAS website

\*\*The RTO recommends the Authorized Disposal Method of surplus when a vehicle has been inoperable longer than 1 year and has been cannibalized or is just a shell. For vehicles that are inoperable longer than 6 months and have major deficiencies such as engine or transmission failure, and/or if the vehicle has been deemed a total loss under DOAS insurance (not a third-party insurance company), the Live Auction/Vendor Return or Internet Sale are recommended.

If transfer is recommended, the vehicle cannot be older than 10 years in age and/or have over 135,000 miles on the vehicle. A yes to either question means immediate surplus.

RTO Staff Submitting Request: \_\_\_\_\_ Email/Phone: \_\_\_\_\_

(Include RTO and FM email addresses in Asset Works as contacts.)

Date Approved/Submitted: \_\_\_\_\_

## Appendix 13 – Statement of Understanding

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services**  
**Office of Facilities and Support Services, Transportation Services Section**  
**Statement of Understanding**  
FOR DONATED VEHICLES

Public and private agencies with contractual relationships with or on behalf of the Georgia Department of Human Services (DHS) or undertake the delivery of consumer services under a contractual arrangement with DHS and/or DBHDD may find it advantageous to grant title to the state of motor vehicles used for such business and client service delivery. Advantages may include availability of lower cost insurance, maintenance programs and administrative support. It is understood by the donor of such a vehicle and by the agency operating such a vehicle that such vehicles titled to the state become state property without restriction and that:

1. State owned vehicles are subject to regulations regarding their care, use and disposition and their registration, licensing and markings. Compliance with such regulations is the responsibility of the operating agency.
2. Donated vehicles cannot be accepted as state property with any conditions or exceptions. Neither can they be returned to the donor nor can any portion of their value or of any proceeds from their disposition be returned to the donor or operating agency.
3. State owned vehicles may only be used for official state purposes and may not be used for non-state business or for personal use or convenience. Drivers of state vehicles must be either state employees or paid employees of the operating agency.
4. Operating costs, to include premiums for liability insurance underwritten by the state Department of Administrative Services, will not be paid by DHS and/or DBHDD, but must be borne by the operating agency.
5. In accordance with Policy 10 regulations, vehicles donated will be required to participate in the Wright Express (WEX) fuel card program and Automotive Resources International (ARI) maintenance plan. Cost associated with these programs will be borne by the operating agency and data pertaining to the vehicle(s) will be maintained electronically in the Holman Insights system.

---

Authorized Signature of Donating Entity

---

Receiving Agency

---

Donating Entity

---

Signature

---

Vehicle ID (Serial Number)

---

Title

---

Date

## Appendix 14 – DOAS Surplus Vehicle Inspection Form

The space below is intentionally left blank so that the exhibit on the following page may be printed and used.



# Surplus Vehicle Inspection Form

## Agency Information

Agency:	Insp. By:	Phone #:
Inspection Days: Check all days available for inspection <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri		Inspection Times: List all times available for inspection: AM: From: : to : PM: From: : to :

Agency has original title:  Yes (*Original title must be available to process request, attach copy of both sides.*)

Agency has keys:  Yes (Agency may be charged for replacement keys.)

## Vehicle Information

VIN:	Year:	Make:	Model:
Mileage:	Exterior Color:	Interior Color:	
Overall Condition: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor Comments:			

## Mechanical Information

Operating Condition: <input type="checkbox"/> Starts & Runs <input type="checkbox"/> Starts w/Boost <input type="checkbox"/> Is Drivable <input type="checkbox"/> Won't Start			
<input type="checkbox"/> Is NOT Drivable Why:			
Known Mechanical Issues:			
Engine:	Cylinders:	Fuel: <input type="checkbox"/> Gas <input type="checkbox"/> Diesel <input type="checkbox"/> AFV	Transmission: <input type="checkbox"/> Automatic <input type="checkbox"/> Manual # Gears
Check Installed Options: <input type="checkbox"/> PWR Seats <input type="checkbox"/> PWR Locks <input type="checkbox"/> PWR Windows <input type="checkbox"/> Cruise Control <input type="checkbox"/> Police Package			
Air Bag: Single <input type="checkbox"/> Dual <input type="checkbox"/>	Radio: <input type="checkbox"/> AM <input type="checkbox"/> AM/FM <input type="checkbox"/> Cassette <input type="checkbox"/> AM/FM CD	Other:	

Exterior Condition Decals Removed:  Yes  No Must remove, do not spray paint decals

Minor Body Damage:
Scratches & Dents: <input type="checkbox"/> None Visible <input type="checkbox"/> Minor: Where? Major: Where?
Major Body Damage:
Windows: <input type="checkbox"/> No damaged glass <input type="checkbox"/> Broken/Cracked where? <input type="checkbox"/> Missing Glass where?
Hub Caps: <input type="checkbox"/> Has all 4 Missing how many?
Other:

## Interior Condition:

Minor Damage:	
Major Damage:	
Emergency/Specialized Equipment Removal: <input type="checkbox"/> N/A	
<input type="checkbox"/> Has no exposed wires or holes	<input type="checkbox"/> Has exposed wires and holes <input type="checkbox"/> Interior <input type="checkbox"/> Exterior
Other:	

Photos List photo number, minimum of 4 required, show all damage and send as many photos as necessary

Front Driver Corner	Rear Pass. Corner	Interior	Motor		
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## Appendix 15 – DOAS Form RMS101-4 Driver Safety Tips



### MOTOR VEHICLE USE PROGRAM DRIVER SAFETY TIPS

- ✓ **Observe Speed Limits and Traffic Laws** – Allow sufficient time to reach your destination without violating speed limits or traffic laws.
- ✓ **Drivers License** – Employees who drive state or privately owned vehicles on state business must possess and carry on their person a current valid Operator's or CDL license and must present it upon request to any authorized person.
- ✓ **Insurance** – Employees who operate their privately owned vehicles on state business shall carry proof of financial responsibility at all times that the vehicle is in operation and must present evidence of current insurance coverage upon request to any authorized person. It is suggested that all employees driving on state business have a copy of the state's insurance card and present that to the police in the event of an accident.
- ✓ **Seat Belts** – Each driver and front seat passenger in any motor vehicle operated on a street or highway in this state is required by law to wear a properly adjusted and fastened seat belt.
- ✓ **Cargo** – Drivers hauling any type of cargo should ensure that the cargo is properly secured, and that the height of the cargo is such that it shall safely pass under obstructions such as under/over passes along the intended route before placing the vehicle in motion.
- ✓ **Electronic Devices** – The use, operation and manipulation of electronic devices such as cellular phones, Blackberries, or PDAs, by the driver while the vehicle is in motion is strongly discouraged. Even with "hands free" equipment, conversing on the phone takes attention away from driving; making it less likely the driver will notice hazardous situations. Employees are neither required nor expected to use electronic devices for work-related reasons while driving.
- ✓ **Backing** – Whenever possible, park the vehicle where backing is not required. Know what is beside and behind the vehicle before beginning to back. Back slowly and check both sides as well as the rear while backing. Continue to look to the rear until the vehicle has come to a complete stop.
- ✓ **Intersections** – When approaching and entering intersections be prepared to avoid crashes that other drivers may cause. Take precautions to allow for the lack of skill or improper driving habits of other drivers. Potentially dangerous acts include speeding, improper turn movements, and failure to yield the right of way.
- ✓ **Weather Related Hazards** – Rain, snow, fog, sleet or icy pavement increase the hazards of driving. Slow down and be especially alert when driving in adverse conditions.
- ✓ **Passing** – When you pass another vehicle, look in all directions, check your blind spots, and use your signal. As a general rule, only pass one vehicle at a time.
- ✓ **Front End Crashes** – By maintaining a safe following distance at all times, the driver can prevent front-end collisions in spite of abrupt or unexpected stops of the vehicle ahead. Observe the "two second rule" by following the vehicle ahead at a distance that spans at least two seconds. The following distance should be increased when driving in adverse conditions.
- ✓ **Security** – State vehicles should be locked whenever they are unoccupied.
- ✓ **Engines** – The engine of a State vehicle should always be turned off before the driver exits the vehicle.

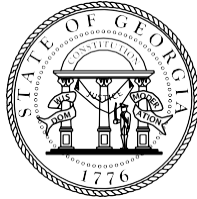
3/2008

RMS101 – Driver Safety Tips



## Appendix 16 – DHS Form 101-1 Driver Acknowledgment

The space below is intentionally left blank so that the form on the following page may be printed and used.



Georgia Department of Human Services  
Aging Services | Child Support Services | Family & Children Services

**Form 101-1 Driver Acknowledgment Form**

*(Adapted from the DOAS RMS101-1 Form)*

Before operating a vehicle for state of Georgia business, employees must use this form to certify that they are qualified to safely operate the vehicle. Employees who drive on state business, regardless of the frequency, must use this form to recertify every 12 months.

By signing this form, I authorize the retrieval of my driving history and also certify that I am qualified to safely operate a vehicle for state business.

I specifically certify the following: *(Please initial on each applicable line.)*

\_\_\_\_\_ I have a valid license for operating the vehicle.

\_\_\_\_\_ I do not currently have more than 6 points on my driver's license.

\_\_\_\_\_ I agree to use vision correction measures while operating the vehicle, if required by my driver's license.

\_\_\_\_\_ I agree to report any ticket or warning that I receive while operating the vehicle on state business.

\_\_\_\_\_ I do not have pending charges, or a conviction within the past 6 months, for any of the following offenses, and I agree to immediately notify my supervisor using Form RMS101-2 should I be charged with one or more of these offenses:

- Driving Under the Influence,
- Leaving the Scene of an Accident,
- Refusal to take a Chemical Test for Intoxication,
- Aggressive Driving or Exceeding the speed limit.

\_\_\_\_\_ I agree to notify my supervisor of any changes involving the above initialed items before I operate a vehicle for state business.

\_\_\_\_\_ I agree to notify my supervisor using Form RMS101-2 immediately upon License Suspension, Revocation, or Expiration.

\_\_\_\_\_ I have reviewed and understand Form RMS101-4, *Driver Safety Tips*.

DRIVER'S LICENSE INFORMATION (please print)					
First Name	Middle Name	Last Name	Date of Birth	License #	State

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Original to Supervisor File -- Copy to Employee -- Copy to Human Resources*

## Appendix 17 – DOAS RMS101-2 Motor Vehicle Use Program Driver Notification

The space below is intentionally left blank so that the form on the following page may be printed and used.



## DOAS RMS 101-2 Motor Vehicle Use Program Driver Notification

*Adapted from DOAS RMS101-2*

*Employees are to use this form to notify their supervisor of activities that may affect their eligibility to operate a motor vehicle for state business.*

Employee Information			
<b>Employee Name</b>	<b>Employee ID</b>		
<b>Work Unit</b>	<b>Frequency of Driving</b> <input type="checkbox"/> Weekly or more often <input type="checkbox"/> Infrequently		
Reported Activity (Select all that apply)			
<input type="checkbox"/> I received a traffic citation while driving on state business			
Date received			
Charge			
<input type="checkbox"/> I was involved in an on-the-job accident while driving on state business			
Date of accident			
Any injuries?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Any property damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> My driver's license has been (select one)			
<input type="checkbox"/> Suspended <input type="checkbox"/> Revoked <input type="checkbox"/> Expired		Date of Action	
<input type="checkbox"/> I was charged with the following (select all that apply)			
<div style="display: flex; flex-direction: column; gap: 10px;"> <input type="checkbox"/> Driving Under the Influence</div> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <input type="checkbox"/> Driving While Intoxicated               <div style="margin-left: 100px;">Date of Charge: _____</div> </div> <input type="checkbox"/> Leaving the Scene of an Accident <input type="checkbox"/> Refusal to take Chemical Test for Intoxication <input type="checkbox"/> Aggressive Driving* <input type="checkbox"/> Exceeding the Speed Limit by more than 19 mph*			
*Only if conviction would result in more than 10 points accumulated on the driving record			

I understand that this notification may affect my eligibility to drive on state business.  
 I may be required to view a driver safety video and successfully complete a defensive driving course, and I may be subject to other appropriate action.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

## Appendix 18 – Daily Vehicle Inspection Sheet

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
Daily Vehicle Inspection Sheet (Weekly Tracking)**

Site's Name \_\_\_\_\_ Vehicle Number \_\_\_\_\_

Reporting Period: \_\_\_\_\_ Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Is this an ADA-Equipped Vehicle?     No     Yes

(If yes, driver must complete the ADA section of this document.)

Items to be Inspected	OK							Do Deficiencies Exist?	Have Deficiencies Been Repaired?
	M	T	W	T	F	S	S		
Brake Lights								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Headlights – Low Beam								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Headlights – High Beam								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Parking Lights								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Turn Signals - Left								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Turn Signals - Right								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Emergency Flashers								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Horn								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Tires								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Steering								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Windshield Wipers								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Windows (Open/Close)								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Seat Belts								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Extensions Available								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Heater/Defroster								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Air Conditioner								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Fire Extinguisher								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
First Aid Kit								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Spill Kit								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Mirrors								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Doors								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Fluid Leaks								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes

**Comments (Include comments on deficiencies and repairs.)**

**Complete this section on ADA – Equipped Vehicles Only**

Items to be Inspected	OK							Do Deficiencies Exist	Have Deficiencies Been Repaired
	M	T	W	T	F	S	S		
<b>Wheelchair/Standard Lift</b>								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Lift/Cycle Test								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Hydraulic Leaks								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Battery Connection								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Tie-Down Equip								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Priority Seat Sign								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Mo. Cycle Test Back Up								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Lift Safety Belt								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
<b>Accessible Equipment</b>								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Tracks Clean								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Check for Frayed or Worn Belts								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
<b>Each Secure Station Fully Equipped With:</b>								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Lap Belts								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Shoulder Harness								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/4 ea. Secure Straps								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
<b>The following must be in Good Condition:</b>								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/No Frayed or Damaged Webbing								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Properly Functioning Buckles								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/No Broken or Worn Parts								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Floor Anchors Secure and Clean								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Clean Dry Container for Storage								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Seat Belt/Web Cutter								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
/Printed Operating Instructions								<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes

**Comments (Include comments on deficiencies and repairs.)**

**Site Contact or Driver's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Appendix 19 – Annual Safety Inspection Report

The space below is intentionally left blank so that the form on the following page may be printed and used.





**Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
Annual Safety Inspection Report**

Vehicle #: \_\_\_\_\_ Tag #: \_\_\_\_\_ Mileage: \_\_\_\_\_ Date: \_\_\_\_\_

	OK	Needs Attn	Unsafe			OK	Needs Attn	Unsafe		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
<b>BODY EXTERIOR</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check for body or fender damage.	<b>CONTROL PANEL</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check warning lights and buzzers.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check all windows.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check dash lights.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check side-view mirrors.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check interior lighting.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check attached body parts for looseness.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check gauges.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check windshield wiper blades.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check headlamps and remaining lights.	
<b>TIRES</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check tire wear.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check license plate light.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check for nails, glass, etc.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check dimmer switch.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check for tread separation.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check emergency flashers.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check air pressure.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check reverse lights.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check lug nuts for tightness.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check horn.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check lug nuts for tightness.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check windshield wiper operation.	
<b>UNDER HOOD</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pressure test cooling system.		<b>ACCESORIES</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check heater output.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check coolant/antifreeze level.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check air conditioner output.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check cooling system circulation.			<b>BODY INTERIOR</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check brake fluid level.		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Check fire extinguisher.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check power steering fluid level.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Check seats/floors for tears and looseness.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check battery and cables.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Check floors for loose wheelchair tracks.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check starting and charging system.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Check emergency exit.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check windshield washer fluid.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Check window operation.	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check transmission fluid.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check rearview mirror.		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check transmission fluid.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check for loose/inoperable body belts.			
<b>ENGINE</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check all fuel lines for leaks.	<b>RECOMMENDATIONS:</b>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check belts for looseness or signs of wear.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check all hoses for leaks or signs of wear.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check for loose wiring.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check air filter – clean.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check accelerator linkage.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check oil filter.						
<b>UNDERCARRIAGE</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check fuel tank lines for leaks.	<input type="checkbox"/> Schedule recommended work in the near future <input type="checkbox"/> Schedule recommended work immediately  Inspection Vendor:  Vendor Address:  Vendor Phone:  Inspector Printed Name:  Inspector Signature:					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check differential for leaks.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check rear springs, shacklers, and Shocks.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check driveshaft center support and U-joint.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check front suspension and shocks.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check steering linkage.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check exhaust system.						
<b>BRAKES</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check shoes and pads for lining wear.	Only one certification required. Verification must be maintained with files. <input type="checkbox"/> ASE Certified Mechanic (provide current certificate) <input type="checkbox"/> ARI Certified Vendor (attached Holman/Insights listing) <input type="checkbox"/> Tech School Certificate (attach certificate)					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check brake lines for leaks.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check brake vacuum hoses.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check brake adjustments.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check brake pedal clearance.						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check emergency brake.						

## Appendix 20 – Driver Qualification Folder (DQF) Checklist

The space below is intentionally left blank so that the form on the following page may be printed and used.



## Appendix 21 – Site Visit Summary Report

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services**  
**Office of Facilities & Support Services, Transportation Services Section**  
**Site Visit Summary Report**

Vehicle Operator/Contractor: \_\_\_\_\_ Region: \_\_\_\_\_

Date of Inspection: \_\_\_\_\_ Pass/Fail Decision: \_\_\_\_\_

OFSS-Transportation Services Section Reviewer: \_\_\_\_\_

Site's Contact: \_\_\_\_\_

Contact's Email Address: \_\_\_\_\_

Contact's Phone Number: \_\_\_\_\_ Contact's Fax Number: \_\_\_\_\_

Vehicles Inspected: \_\_\_\_\_

---

**Site Visit Results**

Is site in compliance with Preventive Maintenance requirements?  Yes  No

**Corrective Action Required**

Is site in compliance with Unscheduled Maintenance requirements?  Yes  No

**Corrective Action Required**

Is site in compliance with Daily Vehicle Inspections?  Yes  No

**Corrective Action Required**

Is site in compliance with Driver Monitoring and Training?  Yes  No

**Corrective Action Required**

**Is site in compliance with Title VI Requirements?**  Yes  No  Not Applicable

**Corrective Action Required**

**Other Comments**

**Were corrective actions required?**  Yes  No

**Deadline to complete required corrective actions:** \_\_\_\_\_

**Did this Site Visit result in a Corrective Action Plan?**  Yes (Please explain)  No

**Regional Coordinator's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Appendix 22 – DHS Vehicle Requirements and Monitoring Form

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
DHS Vehicle Requirements and Monitoring Form**

Vehicle Operator \_\_\_\_\_ Monitoring Date \_\_\_\_\_  
 Vehicle # \_\_\_\_\_ Region \_\_\_\_\_  
 Make/Model \_\_\_\_\_ Year \_\_\_\_\_ Over 10 years\*   
 VIN \_\_\_\_\_ Mileage \_\_\_\_\_ Over 135,000\*

Tag # \_\_\_\_\_ Report My Driving # \_\_\_\_\_ Property Decal # \_\_\_\_\_

Emissions testing verified\*\*     Emissions exempt\*\*     State Titled Vehicle     Contractor Vehicle

Exterior Requirements	Checked	Needs Attention	Signage Requirements	Checked	Needs Attention
Horn	<input type="checkbox"/>	<input type="checkbox"/>	State Seals/Operator ID	<input type="checkbox"/>	<input type="checkbox"/>
2 Exterior Mirrors	<input type="checkbox"/>	<input type="checkbox"/>	Vehicle # (RF)	<input type="checkbox"/>	<input type="checkbox"/>
Rearview Mirror	<input type="checkbox"/>	<input type="checkbox"/>	Vehicle # (RR)	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Wipers	<input type="checkbox"/>	<input type="checkbox"/>	"No Smoking, Eating, Drinking"	<input type="checkbox"/>	<input type="checkbox"/>
Windows	<input type="checkbox"/>	<input type="checkbox"/>	"All Passengers Use Seat Belts"	<input type="checkbox"/>	<input type="checkbox"/>
Headlights	<input type="checkbox"/>	<input type="checkbox"/>	<b>FTA 5310 Requirements</b>	<b>Contractors Only</b>	
Turn Signals (Front)	<input type="checkbox"/>	<input type="checkbox"/>	LEP/Title IV Poster	<input type="checkbox"/>	<input type="checkbox"/>
Brake Lights	<input type="checkbox"/>	<input type="checkbox"/>	Language/I Speak Card	<input type="checkbox"/>	<input type="checkbox"/>
Turn Signals (Rear)	<input type="checkbox"/>	<input type="checkbox"/>	DHS LEP Client ID available	<input type="checkbox"/>	<input type="checkbox"/>
Parking/Reverse Lights	<input type="checkbox"/>	<input type="checkbox"/>	<b>Information Packet</b>		
Emergency Flashers	<input type="checkbox"/>	<input type="checkbox"/>	Insurance Card	<input type="checkbox"/>	<input type="checkbox"/>
Body Damage	<input type="checkbox"/>	<input type="checkbox"/>	<b>Wheelchair Accessible Requirements</b>		
Tire / Tread	<input type="checkbox"/>	<input type="checkbox"/>	Raised Roof (clearance 56")	<input type="checkbox"/>	<input type="checkbox"/>
Spare Tire	<input type="checkbox"/>	<input type="checkbox"/>	Hydraulic/Electric Lift	<input type="checkbox"/>	<input type="checkbox"/>
Jack	<input type="checkbox"/>	<input type="checkbox"/>	Hand Rails	<input type="checkbox"/>	<input type="checkbox"/>
<b>Interior Requirements</b>			Controls Access Inside/Outside	<input type="checkbox"/>	<input type="checkbox"/>
Step/Running Board	<input type="checkbox"/>	<input type="checkbox"/>	Shoulder Restraint/Lap Belt	<input type="checkbox"/>	<input type="checkbox"/>
Seat Belts	<input type="checkbox"/>	<input type="checkbox"/>	Reflector Tape	<input type="checkbox"/>	<input type="checkbox"/>
Seat Belt Cutter	<input type="checkbox"/>	<input type="checkbox"/>	4 Floor Straps	<input type="checkbox"/>	<input type="checkbox"/>
First Aid Kit	<input type="checkbox"/>	<input type="checkbox"/>	Emergency Manual Lift	<input type="checkbox"/>	<input type="checkbox"/>
Spill Kit	<input type="checkbox"/>	<input type="checkbox"/>			
3 Emergency Reflectors	<input type="checkbox"/>	<input type="checkbox"/>	<b>Cond. of Vehicle:</b> <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor		
2 Seat Belt Extensions	<input type="checkbox"/>	<input type="checkbox"/>	<b>Comments:</b>		
Upholstery	<input type="checkbox"/>	<input type="checkbox"/>			
Clean Interior	<input type="checkbox"/>	<input type="checkbox"/>			
Doors	<input type="checkbox"/>	<input type="checkbox"/>			
Interior Lights	<input type="checkbox"/>	<input type="checkbox"/>			
AC/Heat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Inspection Sticker Applied		
Flooring	<input type="checkbox"/>	<input type="checkbox"/>	<b>TSS Inspector Signature:</b>		
Fire Extinguisher Insp. Date	<input type="checkbox"/>	<input type="checkbox"/>	<b>Vehicle Operator Printed Name and Signature:</b>		
Fire Extinguisher Mounted					

Vehicle Redlined    Date Redlined: \_\_\_\_\_    Date of Required Repairs: \_\_\_\_\_

Vehicle to be Surplused    Reason for Surplus: \_\_\_\_\_

\*Per Policy 10, vehicles should be considered for surplus if older than 10 years and/or have more than 135,000 miles.



\*\*Required for vehicles operated in Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry,



## Appendix 23 – DHS Vehicle Requirements and Monitoring Form – Administrative Vehicles

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
DHS Vehicle Requirements and Monitoring Form – Administrative Vehicles**

**Division Office** \_\_\_\_\_ **Monitoring Date** \_\_\_\_\_  
**Location** \_\_\_\_\_ **Region** \_\_\_\_\_  
**Vehicle #** \_\_\_\_\_ **Year** \_\_\_\_\_  
**Make/Model** \_\_\_\_\_ **Mileage** \_\_\_\_\_  
**VIN** \_\_\_\_\_ **Property Decal #** \_\_\_\_\_  
**Tag #** \_\_\_\_\_ **Report My Driving #** \_\_\_\_\_

**Leased Vehicle**                     
  **Emissions testing verified\***                     
  **Emissions exempt \*\***

<b>Exterior Requirements</b>	<b>Checked</b>	<b>Needs Attention</b>	<b>Signage Requirements</b>	<b>Checked</b>	<b>Needs Attention</b>
Horn	<input type="checkbox"/>	<input type="checkbox"/>	State Seals	<input type="checkbox"/>	<input type="checkbox"/>
2 Exterior Mirrors	<input type="checkbox"/>	<input type="checkbox"/>	Vehicle # (RF)	<input type="checkbox"/>	<input type="checkbox"/>
Rearview Mirror	<input type="checkbox"/>	<input type="checkbox"/>	Vehicle # (RR)	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Wipers	<input type="checkbox"/>	<input type="checkbox"/>	<b>Information Packet</b>		
Windows	<input type="checkbox"/>	<input type="checkbox"/>	Insurance Card	<input type="checkbox"/>	<input type="checkbox"/>
Headlights	<input type="checkbox"/>	<input type="checkbox"/>	Vehicle Log Book	<input type="checkbox"/>	<input type="checkbox"/>
Turn Signals (Front)	<input type="checkbox"/>	<input type="checkbox"/>	Insurance/Accident Package	<input type="checkbox"/>	<input type="checkbox"/>
Brake Lights	<input type="checkbox"/>	<input type="checkbox"/>			
Turn Signals (Rear)	<input type="checkbox"/>	<input type="checkbox"/>	<b>Cond. of Vehicle:</b> <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor		
Parking/Reverse Lights	<input type="checkbox"/>	<input type="checkbox"/>	<b>Comments:</b>		
Emergency Flashers	<input type="checkbox"/>	<input type="checkbox"/>			
Body Damage	<input type="checkbox"/>	<input type="checkbox"/>			
Tire / Tread	<input type="checkbox"/>	<input type="checkbox"/>			
Spare Tire	<input type="checkbox"/>	<input type="checkbox"/>			
Jack	<input type="checkbox"/>	<input type="checkbox"/>			
<b>Interior Requirements</b>					
Seat Belts	<input type="checkbox"/>	<input type="checkbox"/>	<b>TSS Inspector Signature:</b>		
First Aid Kit	<input type="checkbox"/>	<input type="checkbox"/>			
Upholstery	<input type="checkbox"/>	<input type="checkbox"/>			
Clean Interior	<input type="checkbox"/>	<input type="checkbox"/>			
Doors	<input type="checkbox"/>	<input type="checkbox"/>	<b>Vehicle Operator Printed Name and Signature:</b>		
Interior Lights	<input type="checkbox"/>	<input type="checkbox"/>			
AC/Heat	<input type="checkbox"/>	<input type="checkbox"/>			
Flooring	<input type="checkbox"/>	<input type="checkbox"/>			

\*\*Required for vehicles operated in Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding and Rockdale counties.

## Appendix 24 – Vehicle Operator Initial Accident and Incident Reporting Form

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
Vehicle Operator Initial Accident and Incident Reporting Form**

This form is to be completed by local vehicle operators to report accidents and/or incidents involving consumers of the Coordinated Transportation or those transported in a Department of Human Services' (DHS)/Department of Behavioral Health and Developmental Disabilities' (DBHDD) vehicle, and accidents involving administrative vehicles. This may include vehicle accidents, consumer injuries, behavior incidents or any incident the vehicle operator feels should be reported. Complete this form with as much detail as possible and send/email to the appropriate DHS Regional Transportation Office within **24 hours** of the accident/incident. Requests for additional information may follow.

**Vehicle Accident**       **Incident**       **Illness**       **Observation**       **Other\***

**\*If Other, please explain:** \_\_\_\_\_

**Date of Incident:** \_\_\_\_\_ **Time:** \_\_\_\_\_ **Location:** \_\_\_\_\_

**Vehicle #:** \_\_\_\_\_ **Tag #:** \_\_\_\_\_ **Vehicle Operator:** \_\_\_\_\_

**Vehicle Operator Type:**  **DHS/DBHDD**     **Direct Contractor**     **Subcontractor**

**Police Notified:**  **Yes**     **No\*\***    **Report Filed:**     **Yes**     **No\*\***

**\*\*If No, please explain:** \_\_\_\_\_

**Description (Be specific, include all consumers involved and add additional pages if necessary):**

**Any witnesses to the accident/incident?**  **Yes**     **No**    **# of consumers on board:** \_\_\_\_\_

**Were consumers Injured?**  **Yes**     **No**

**Consumer Name(s)(no initials)** \_\_\_\_\_  
(attach additional sheets if necessary)

**Medical treatment provided?**  **Yes**     **No**    **Medical treatment refused?**  **Yes**     **No**

**Location of medical treatment:** \_\_\_\_\_

**Human Service Provider (HSP) notified:**  **Yes**     **No**    **HSP phone:** \_\_\_\_\_

**HSP name** (attach a list for multiple HSPs): \_\_\_\_\_

**Parent or guardian of consumer notified?**  **Yes**     **No**    **Person notified:** \_\_\_\_\_

**Name of person issuing this report (print name):** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**On behalf of:** \_\_\_\_\_

**DHS Staff Use Only**

**Last DHS inspection of vehicle operator (date):** \_\_\_\_\_ **Corrective Actions?**  **Yes**     **No**

**Corrective actions followed up on by TSS?**  **Yes**     **No**    **Completed?**  **Yes**     **No**

**DHS Staff involved in inspections:** \_\_\_\_\_

**DHS Staff reviewing and submitting report:** \_\_\_\_\_

**Date report was received by RTO:** \_\_\_\_\_ **Date RTO sent to TSS Atlanta:** \_\_\_\_\_

## Appendix 25 – Vehicle Operator Accident and Incident Follow-up Reporting Form

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
Vehicle Operator Accident and Incident Follow-Up Form**

Date of accident/incident: \_\_\_\_\_ Date follow up received by RTO: \_\_\_\_\_

Vehicle Operator: \_\_\_\_\_ Vehicle #: \_\_\_\_\_ Tag #: \_\_\_\_\_

Items being submitted with this follow up:

Police Report       Witness Statements       Agency Report       Inspection Report       Other\*

\*If Other, please explain: \_\_\_\_\_

Pertinent details not previously provided (if more space is needed, include additional sheets):

Was a resolution needed/requested?     Yes     No

Describe the resolution (if more space is needed, include additional sheets):

Was a consumer behavior plan needed/requested?     Yes     No

Describe what steps have been taken to prevent further behavior incidents (add sheets as needed):

Date follow up sent to TSS Atlanta: \_\_\_\_\_



## Appendix 26 – Regional Transportation Office Initial Accident and Incident Reporting Form

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services**  
**Office of Facilities and Support Services, Transportation Services Section**  
**Regional Transportation Office Initial Accident and Incident Reporting Form**

The Regional Transportation Office (RTO) completes this form to provide information on accidents and incidents reported to the RTO by DHS/DBHDD vehicle operators, human service providers or Coordinated Transportation System providers and submits to the District Operations Manager and DHS Risk Management.

Vehicle Accident     
  Incident     
  Illness     
  Observation     
  Other\*

\*If Other, please explain: \_\_\_\_\_

Date and Time of Occurrence: \_\_\_\_\_ Region: \_\_\_\_\_

Date Reported to RTO: \_\_\_\_\_ Date Reported to Atlanta TSS Staff: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Subcontractor Name (if applicable): \_\_\_\_\_

Human Service Provider (HSP) (if applicable): \_\_\_\_\_

Vehicle Owner: \_\_\_\_\_

Vehicle Number and/or Tag Number: \_\_\_\_\_

Location of Accident or Incident: \_\_\_\_\_

# of Consumers Onboard: \_\_\_\_\_

Name(s) of Consumer(s) Onboard: \_\_\_\_\_

HSP of Consumer(s): \_\_\_\_\_

Were any consumers injured? If so, provide details, including any EMS treatment or transport to hospital:

911 Notified?     Yes     No\*\*    Citation Issued?     Yes     No\*\*

\*\*Provide Details:

Brief summary of accident/incident; attach additional pages as needed:

What follow-up information is   
 GA DHS Transportation Manual Page **203** of **233**

pending in order to close the

issue?

## Appendix 27 – Regional Transportation Office Accident and Incident Follow Up Reporting Form

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services, Transportation Services Section  
Regional Transportation Office Accident and Incident Follow-Up Reporting Form**

The Regional Transportation Office (RTO) completes this form to provide follow up information on reported accidents or incidents and submits to the District Operations Manager and DHS Risk Management.

**Follow-Up Forms Included:**

- Police Report     
  Statements     
  Agency Report     
  Inspection Report     
  Other\*

\*Describe "other" forms included:

**Initial Reporting Details**

Date of Occurrence: \_\_\_\_\_ Region: \_\_\_\_\_

Contractor/Subcontractor/HSP Name: \_\_\_\_\_

Vehicle Owner and Vehicle/Tag Number: \_\_\_\_\_

**Follow-Up Details:**

Date of Last RTO Inspection: \_\_\_\_\_

Date Follow-Up Report Submitted to RTO: \_\_\_\_\_

Follow-Up Information Provided By: \_\_\_\_\_

**Describe the information included in this follow-up:**

**Resolution and steps taken to prevent future similar occurrences:**

**Date of Final Resolution:** \_\_\_\_\_

# EXHIBITS

## Exhibit 1 – Sample Notice of Intent to Contract

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April 17, 2017

Mr. John Hancock  
Treasurer  
XYZ Corporation  
123 Main Street  
Suite 3C  
Anywhere, Georgia 30000

RE: Notification of Intent to Contract

Dear Mr. Hancock:

Thank you for your ongoing efforts in and support of the Department of Human Services, Coordinated Transportation in Region X. The Department and Regional Transportation Coordinating Committee are satisfied with the services provided by {insert company's name} during FY2017 and intend to contract with you for the upcoming fiscal year.

In order for services to meet the expectations of the Department and to ensure that services continue without interruption, DHS intends to enter into contract with your entity effective July 1, 2017.

A letter from your entity expressing intent to further contract with the Department for FY2018 must be forwarded within 10 business days of the receipt of this letter to the following address:

Ms. Ima Coordinator  
Regional Transportation Office, Region X  
Address  
City, State, Zip

After your letter confirming intent to contract with the Department for the next fiscal year, a Statement of Need and required contract documents will be forwarded under separate cover. If you have any questions or concerns, feel free to contact me at XXX-XXX-XXXX.

Sincerely,

Ima Coordinator  
Regional Transportation Coordinator



## Exhibit 2 – Sample FY20XX Evaluation Summary - Consumers

### FY20XX EVALUATION SUMMARY - CONSUMERS

DHS REGION	Total Evaluations SENT	Total Evaluations RECEIVED	Response Rate	Total Responses*	Satisfactory Responses	Unsatisfactory Responses	% of responses Meeting/Exceeding Expectations
1			#DIV/0!				#DIV/0!
2			#DIV/0!				#DIV/0!
3			#DIV/0!				#DIV/0!
4			#DIV/0!				#DIV/0!
5			#DIV/0!				#DIV/0!
6			#DIV/0!				#DIV/0!
7			#DIV/0!				#DIV/0!
8			#DIV/0!				#DIV/0!
9			#DIV/0!				#DIV/0!
10			#DIV/0!				#DIV/0!
11			#DIV/0!				#DIV/0!
12			#DIV/0!				#DIV/0!
<b>TOTALS</b>	<b>0</b>	<b>0</b>	<b>#DIV/0!</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>#DIV/0!</b>

Evaluation period: July 1, 20XX - December 31, 20XX

\* Includes responses for Very Satisfied, Somewhat Satisfied, Neutral, Somewhat Dissatisfied and Very Dissatisfied.

## Exhibit 3 – Sample HSP Satisfaction Survey Summary

DHS TSS FY20XX - REGION: XX  
HSP SATISFACTION SURVEY SUMMARY:

TOTAL SURVEYS SENT:													
TOTAL SURVEYS RECEIVED:													
	Very Satisfied/Likely		Somewhat Satisfied/Likely		Neither Satisfied/Likely Nor Dissatisfied/Unlikely		Somewhat Dissatisfied/Unlikely		Very Dissatisfied/Unlikely		No Response		Total %
	Responses	%	Responses	%	Responses	%	Responses	%	Responses	%	Responses	%	
What is your overall satisfaction rating with transportation?	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
How likely are you to recommend expanding coordinated transportation services in your area?	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
How satisfied are you with drivers assisting consumers on and off the vehicle?	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
Responsiveness (Responding to your concerns as it relates to transportation)	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
Professionalism (Maintaining a professional standard and/or character while delivering services)	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
Flexibility with Scheduling (Provider is adaptable to change in trip request)	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
Safety (All vehicles are safe while in operation)	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
Timeliness (Transportation is delivered in a prompt and timely fashion)	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
Reporting (Information is accurate and submitted by due dates)	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
CUSTOMER SATISFACTION SURVEY SUMMARY (HSP)													
HSP's emailed back that they did not have any issues with MDS or the Regional Commission.	Total	%	Total	%	Total	%	Total	%	Total	%	Total	%	#DIV/0!
	0	#DIV/0!	0	#DIV/0!	0	#DIV/0!	0	#DIV/0!	0	#DIV/0!	0	#DIV/0!	#DIV/0!

## Exhibit 4 – Sample Quarterly Report Card

CONTRACTOR QUARTERLY REPORT CARD	
FISCAL YEAR - 20XX	
<p><i>The Contractor is responsible for adhering to the terms of the DHS contract and all DHS Transportation Manual requirements. If Contractors utilize subcontractors, those entities must abide by the same terms and requirements. The Contractor Quarterly Report Card evaluates performance based on adherence to DHS expectations.</i></p>	
<p><b>Name of Contractor:</b> _____</p>	
<p><b>Quarter/Month/Year:</b> _____</p>	
<p><b>Performance Area: Customer Service</b></p>	
<p>Contractor must monitor all services provided by subcontractor(s).</p>	
<p>Rating in the area of Contractor Expectations:</p>	
<p><input type="checkbox"/> <b>Met / Satisfactory</b> – The Contractor provided timely, courteous and professional transportation services to the consumers and human service providers ordering the transportation. There have been no significant issues in the area of Customer Service during this rating period.</p>	
<p><input type="checkbox"/> <b>Did Not Meet / Needs Improvement</b> – The Contractor did not provide timely, courteous and/or professional transportation services to the consumers and/or human service providers ordering the transportation. Significant deficiencies existed in the area of Customer Service that require correction. The following deficiency(ies) require correction:</p>	
	The Contractor was routinely late in picking up consumers.
	The Contractor was routinely late in responding to complaints.
	The Contractor consistently failed to pick up consumers.
	The Contractor routinely failed to answer telephone calls.
	Other (Please List)
<p>Is this a repeat deficiency(ies) that has occurred within the last two quarters? If yes, the Contractor must be placed on a corrective action plan.</p>	
	<input type="checkbox"/> Yes (Contractor was placed on CAP on _____).
	<input type="checkbox"/> No
<p>Performance Comments/Concerns:</p>	
<p><i>(Example 1: Performance area has been met. No complaints or service issues. Example 2: Explain specific issues, reasons or explanation of performance concerns. Add any corrective actions that must be taken by the contractor.)</i></p>	

Contractor Quarterly Report Card (rev 3/2017)

Page 1 of 7

This represents one page of the evaluation document. Areas of performance evaluation can include: Customer service, Timely and Accurate Invoicing and Reporting, Vehicle Management, Complaint Resolution, Accident and Incident Reporting, Contract Communications, and Staffing.

## Exhibit 5 – Sample Corrective Action Plan

The space below is intentionally left blank so that the form on the following page may be printed and used.



**Department of Human Services  
Office of Facilities and Support Services  
Corrective Action Plan**

Employee: \_\_\_\_\_

Date: \_\_\_\_\_

**Deficiency/Violation Description:**

**Corrective Action:**

**Deadline to Cure:**

60-Days Cure \_\_\_\_\_

90-Days Cure \_\_\_\_\_

**Agreement and Signatures**

The below parties have discussed the above discrepancy. The employee acknowledges said discrepancy and agrees to the required corrective actions and cure deadlines as detailed in this document.

Employee Signature: \_\_\_\_\_ Date of Signature: \_\_\_\_\_

Manager signature: \_\_\_\_\_ Date of Signature: \_\_\_\_\_

## Exhibit 6 – Sample Cure Notice

### Sample Cure Notice

“You are notified that the Georgia Department of Human Services considers [specific failure(s)] a condition that is endangering performance of the contract. Therefore, unless this condition is cured within [insert cure period identified in the contract, or ten days] after receipt of this notice, the Georgia Department of Human Services may terminate for default under the terms and conditions of the Termination clause of this contract.”

## Exhibit 7 – Sample Termination Notice

### Sample Termination Notice

“Pursuant to clause No. \_\_, Termination, this contract is hereby terminated immediately. You are directed to immediately stop all work, terminate subcontracts, cease in delivering coordinated transportation services, and accept no further trip orders. In accordance with this Notice of Termination, you must:

1. Keep adequate records of your compliance with this notice, including the extent of completion on the date of this Termination;
2. Immediately notify all subcontractors and suppliers, if any, of this Notice of Termination;
3. Notify the Georgia Department of Human Services’ contract administrator, [insert name] of any and all matters that may be adversely affected by this termination; and
4. Take any other action required by the Georgia Department of Human Services’ contract administrator to expedite this termination.”

## Exhibit 8 – Sample Annual Contract Evaluation Summary

### CONTRACT EVALUATION SUMMARY FY2017

---

**Contractor/Transportation Provider:** \_\_\_\_\_

**Contract Period:** July 1, 2016 - June 30, 2017 (FY 2017)

**Evaluation Period:** July 1, 2016 - December 31, 2016

This evaluation summary is a compilation of surveys, information and data gathered by the Regional Transportation Office and from the Regional Transportation Coordinating Committee, Human Service Providers, Advisory Groups, Consumers, and Transportation Provider. An explanation is required for each rating of "Fair", "Poor", "Needs Improvement" or "Unsatisfactory".

#### Human Service Provider Evaluation

Rating:      Excellent                  Good                  Fair                  Poor  
                 (4.5-5)                  (3.6-4.4)                  (3-3.5)                  (< 3)                  \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### Consumer Evaluation

Rating:      Excellent                  Good                  Fair                  Poor  
                 (4.5-5)                  (3.6-4.4)                  (3-3.5)                  (< 3)                  \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### Timely Reporting

Overall Rating:      Satisfactory      \_\_\_\_\_      Needs Improvement      \_\_\_\_\_      Unsatisfactory      \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Exhibit 9 – Sample Invoice Backup Report

### Invoice- Backup Report Contractor Name

Print Date :

Month/Year	Contractor Name	Division	Trip Type	Status	Rate Type	# Trips	# Hrs	# Passes	Rate	Amount
<b>Human Service Provider 1</b>										
	Name, Client		06- NON-CORE TRIP		Fixed	1		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	2		0		
	<b>Human Service Provider 1</b>					<b>3</b>		<b>0</b>		<b>0</b>
<b>Human Service Provider 2</b>										
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	2		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	2		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	4		0		
	<b>Human Service Provider 2</b>					<b>44</b>		<b>0</b>		<b>0</b>
<b>Human Service Provider 3</b>										
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	3		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	13		0		
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	1		0		
	<b>Human Service Provider 3</b>					<b>20</b>		<b>0</b>		<b>0</b>
<b>Human Service Provider 4</b>										
	Name, Client		06-DBHDD CORE TRIP		Fixed	30		0		
	<b>Human Service Provider 4</b>					<b>30</b>		<b>0</b>		<b>0</b>
<b>Human Service Provider 5</b>										
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	5		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	18		0		
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	4		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	28		0		
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	1		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	27		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	30		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	12		0		
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	1		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	29		0		
	<b>Human Service Provider 5</b>					<b>566</b>		<b>0</b>		<b>0</b>
<b>Human Service Provider 6</b>										
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	1		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	18		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	30		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	30		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	30		0		
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	3		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	26		0		
	<b>Human Service Provider 6</b>					<b>296</b>		<b>0</b>		<b>0</b>
<b>Human Service Provider 7</b>										
	Name, Client		06-DBHDD CORE TRIP		Fixed	11		0		
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	3		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	3		0		
	Name, Client		06-DBHDD CORE TRIP		Fixed	40		0		
	Name, Client		06-DBHDD CORE TRIP	NS	Fixed	1		0		
	<b>Human Service Provider 7</b>					<b>212</b>		<b>0</b>		<b>0</b>
	<b>Human Service Provider 12</b>					<b>3</b>		<b>0</b>		<b>0</b>
	Division					1825		0		0
	Division					8		0		0
	Division					153		0		0
	Sub-Contractor 1					4329	58.5	0		0
	Sub-Contractor 2					1552	42	0		0
	03/2017					5881	100.5	0		0
	<b>Grand Total :</b>					<b>5881</b>	<b>100.5</b>	<b>0</b>		<b>0</b>

## Exhibit 10 – Sample Invoice Summary Report

Contractor Name  
 Contractor Address  
 Invoice period from :  
 Contract Nbr :  
 Invoice Nbr :

Billed to : Region X  
 Address Line 1  
 Address Line 2  
 City, State, Zip Code  
 Fiscal Year: 2017

Invoice Date :

Month	Sub-Contractor	Division	HSP	Status	Trip Type	Rate Type	Rate Amount	# of Hours	# of Trips
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 1	P	06- NON-CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 1	P	06-DBHDD CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 1	NS	06- NON-CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 1	P	06- NON-CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 1	NS	06-DBHDD CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 1	P	06-DBHDD CORE TRIP	Fixed			
					Human Service Provider 1				
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 2	NS	06-DBHDD CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 2	P	06-DBHDD CORE TRIP	Fixed			
					Human Service Provider 2				
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 3	P	06-DBHDD CORE TRIP	Fixed			
					Human Service Provider 3				
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 4	NS	06-DBHDD CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 4	P	06-DBHDD CORE TRIP	Fixed			
					Human Service Provider 4				
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 5	NS	06-DBHDD CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 5	P	06-DBHDD CORE TRIP	Fixed			
					Human Service Provider 5				
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 6	NS	06-DBHDD CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 6	P	06-DBHDD CORE TRIP	Fixed			
					Human Service Provider 6				
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 7	NS	06-DBHDD CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 7	P	06-DBHDD CORE TRIP	Fixed			
					Human Service Provider 7				
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 8	NS	06- NON-CORE TRIP	Fixed			
03/2017	Sub-Contractor 1	BHDD	Human Service Provider 8	P	06- NON-CORE TRIP	Fixed			
					Human Service Provider 8				



**Exhibit 11 – Sample Draft Invoice**

				<b>Invoice</b>					
				<b>Contractor Name</b>				<b>SAMPLE</b>	
				<b>Contractor Address, City, State Zip</b>					
				<b>Invoice period from :</b>					
				<b>Contract Nbr :</b>					
				<b>Invoice Nbr :</b>					
<b>Billed to :</b>		<b>Region _____</b>		<b>Invoice Date :</b>					
		<b>Regional Office Address</b>							
		<b>Address</b>							
		<b>City, State, Zip</b>							
<b>Fiscal Year</b>		<b>2018</b>							
<b>Month</b>	<b>Sub Contractor</b>	<b>Division</b>	<b>HSP</b>	<b>Trip Type</b>	<b>Rate Amou</b>	<b># of Hou</b>	<b># of Trip</b>	<b># of Pass</b>	<b>Amount</b>
Month/Year	Subcontractor #1	DIVISION	HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			<b>DIVISION TOTAL</b>						\$ _____
		DIVISION	HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			<b>DIVISION TOTAL</b>						\$ _____
			<b>SUBCONTRACTOR #1 TOTAL</b>						\$ _____
Month/Year	Subcontractor #2	DIVISION	HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			<b>DIVISION TOTAL</b>						\$ _____
		DIVISION	HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			<b>DIVISION TOTAL</b>						\$ _____
			<b>SUBCONTRACTOR #2 TOTAL</b>						\$ _____
Month/Year	Subcontractor #3	DIVISION	HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			<b>DIVISION TOTAL</b>						\$ _____
		DIVISION	HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			HSP/Program Name	Trip Type	\$ _____	_____	_____	_____	\$ _____
			<b>DIVISION TOTAL</b>						\$ _____
			<b>SUBCONTRACTOR #3 TOTAL</b>						\$ _____
				<b>Total :</b>					\$ _____
				<b>Transit Passes - Trips, Number of Passes, and Cost</b>					\$ _____
				<b>Aging Match Requirement</b>					\$ _____
				<b>Sub-Total</b>					\$ _____
				<b>Less In-Kind</b>					\$ _____
				<b>Adjustment - (Number of Hours/Trips if Applicable)</b>					\$ _____
				<b>Grand Total</b>					\$ _____

**RTO Signature**

**Date**

## Exhibit 12 – Sample Annual Financial Plan

Division of Aging Services					
Fiscal Year: 2017 (July 1, 2016 - June 30, 2017)					
Human Service Providers	Historical Usage*	Suggested Allocation	Adjustments **	NEW FY ALLOCATION	Comments
<b>Totals</b>	\$0.00	\$0.00	\$0.00	\$0.00	

\* Historical usage comes directly from previous fiscal years expenditures.

\*\* Adjustments are requested changes to the suggested allocations and must net a zero total balance unless funds are being removed or added by Aging Services. Any amount other than \$0.00 in the adjustments column must be justified in the comments section.

Comments:

## Exhibit 13 – Sample Monthly Financial Report

To: Human Service Provider  
 From: RTO  
 Subject: Utilization Report  
 Date: 3/30/2017

	FUNDING	TRIPS
Allocation	\$283,346.00	43,592

	July	August	September	October	November	December	January	February	March	April	May	June	Total Expended YTD
EXPENDITURES	\$13,312.00	\$15,808.00	\$14,306.50	\$15,067.00	\$13,903.50	\$11,836.50	\$13,825.50	\$13,702.00	\$0.00	\$0.00	\$0.00	\$0.00	\$111,761.00
TRIPS	2,048	2,432	2,201	2,318	2,139	1,821	2,127	2,108	0	0	0	0	17,194
<b>Balance Remaining</b>													\$171,585.00
													26,398

Comments:

### Exhibit 14 – Sample Quarterly Financial Report

Year-To-Date Projections for FY20XX										
Department of _____										
Region	Annual Budgeted \$	Y-T-D Expenses	Annual Trip Allocation	Y-T-D Trip Usage	Cost Per Trip	Months Invoiced	% Budget Expensed	Yearly Budget Projection	Budget Variance	Corrected Budget Variance
1	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
2	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
3	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
4	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
5	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
6	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
7	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
8	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
9	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
10	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
11	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
12	\$10,000.00	\$800.00	4,500	75	\$ 10.67	1	8.0%	\$ 9,600.00	\$400.00	\$0.00
<b>TOTALS</b>	<b>\$ 130,000.00</b>	<b>\$ 10,400.00</b>	<b>58,500</b>	<b>975</b>	<b>\$10.67</b>	<b>1</b>	<b>8.0%</b>	<b>\$124,800.00</b>	<b>\$ 5,200.00</b>	<b>\$0.00</b>
<b>Comments:</b>										

### Exhibit 15 – Sample DHS Complaint Performance Log

The space below is intentionally left blank.



## Exhibit 16 – GA DOR Motor Vehicle Tag/Title Application (MV-1 Form)

<p>MV-1 (Revised 11-2013)</p> <p><b>DOR - Motor Vehicle Title/Tag Application</b></p>	<div style="display: flex; justify-content: space-around;"> <span style="border: 1px solid black; padding: 2px 5px; background-color: #00A0C0; color: white;">Print</span> <span style="border: 1px solid black; padding: 2px 5px; background-color: #00A0C0; color: white;">Clear</span> </div>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Original Title Fee</td> <td style="width: 50%; text-align: right;">\$ 18.00</td> </tr> <tr> <td>Replacement Title Fee</td> <td style="text-align: right;">\$ 8.00</td> </tr> <tr> <td>Title Penalty Fee</td> <td style="text-align: right;"><b>\$ 10.00</b></td> </tr> <tr> <td>Expedited Title Fee</td> <td style="text-align: right;">\$ 10.00</td> </tr> </table> <p style="font-size: small; color: red;">*Expedited title processing is only available by mail or in person at DOR/Motor Vehicle Division for non Title Ad Valorem Tax vehicles.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Fair Market Value</td> <td style="width: 50%;"></td> </tr> <tr> <td>*Rebates</td> <td style="text-align: right;">-</td> </tr> <tr> <td>Trade in Value</td> <td style="text-align: right;">-</td> </tr> <tr> <td>Taxable Value</td> <td style="text-align: right;">=</td> </tr> <tr> <td>Taxable Value x Rate</td> <td style="text-align: right;">= _____ (TAVT)</td> </tr> </table> <p style="font-size: x-small; color: red;">* This value is applicable only for a new vehicle not listed in the MVD assessment manual.</p>	Original Title Fee	\$ 18.00	Replacement Title Fee	\$ 8.00	Title Penalty Fee	<b>\$ 10.00</b>	Expedited Title Fee	\$ 10.00	Fair Market Value		*Rebates	-	Trade in Value	-	Taxable Value	=	Taxable Value x Rate	= _____ (TAVT)
Original Title Fee	\$ 18.00																			
Replacement Title Fee	\$ 8.00																			
Title Penalty Fee	<b>\$ 10.00</b>																			
Expedited Title Fee	\$ 10.00																			
Fair Market Value																				
*Rebates	-																			
Trade in Value	-																			
Taxable Value	=																			
Taxable Value x Rate	= _____ (TAVT)																			


<b>Vehicle Section:</b> Except for the signature, this application must be typed, electronically completed & printed or legibly hand printed in <b>black or blue ink</b> .							
Vehicle Identification Number	Year	Make	Body Style	Model	Color	Cylinders	New or Used
Date Purchased	Emission Certificate #	Current Title #	Current Title's State of Issue		GA County of Residence	District #	
Odometer Reading	Odometer reading is actual miles unless you check one of the following boxes: <input type="checkbox"/> EXEMPT <input type="checkbox"/> Exceeds Mechanical Limits of Odometer <input type="checkbox"/> Not the Actual Mileage, <b>Warning odometer discrepancy!</b>					Fuel	
<b>Complete For All Commercial Vehicles</b>							
Gross Vehicle Weight & Load	Straight Truck?	Used For Hire?	Type of Trailer Pulled?	Product Hauled?	Is This A Farm Vehicle?		
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Number of Owners _____ <b>Owner Section</b> Leased Vehicle? <input type="checkbox"/> No <input type="checkbox"/> Yes (Complete Lessee Section)							
<b>Owner # 1</b>		<b>Full Legal Name of Owner #1</b>				<b>Date of Birth</b>	
Driver's License # (If individual)	State/Country of Issue*	First	Middle	Last	Suffix		
If you purchased this vehicle from an out-of-state dealer/business, did you pick-up the vehicle out-of-state? <input type="checkbox"/> Yes <input type="checkbox"/> No		Full Legal Name of Business/Leasing Company's Name				Purchaser's GA Sales Tax # (when applicable)	
<b>Owner # 2</b>		<b>Full Legal Name of Owner #2</b>				<b>Date of Birth</b>	
Driver's License # (If an individual)	State/Country of Issue*	First	Middle	Last	Suffix		
		Full Legal Name of Business/Leasing Company's Name					
Address (Street address including city, state & zip)				Mailing Address (If different from street address including city, state & zip)			
<b>Seller Section</b>				<b>Lessee Section</b>			
GA Dealer's/Bank's 12 Digit Customer ID# (If Applicable)				Driver's License #, if individual*			
Full Legal Name or Business Name & Address:				Lessee's Full Legal Name & Address or Business Lessee's Full Name & Address:			
If Georgia Seller, GA County Name				* Directly Financed Dealer Sale <input type="checkbox"/>		Lessee's GA County Location	
<b>Security Interests or Liens Section</b>							
Number of Security Interests or Liens: _____							
Security Interest Holder's/Lien Holder's ELT 12 Digit Customer ID #				Security Interest Holder's/Lien Holder's ELT 12 Digit Customer ID #			
Name & Address of 1 <sup>st</sup> Security Interest Holder/Lien Holder:				Name & Address of 2 <sup>nd</sup> Security Interest Holder/Lien Holder:			
Security Interest Holder's/Lien Holder's ELT 12 Digit Customer ID #				Name & Mailing Address of Attorney-in-Fact - Attach original power of attorney if title is to be mailed to attorney-in-fact.			
Name & Address of 3 <sup>rd</sup> Security Interest Holder/Lien Holder:							

I do solemnly swear or affirm under criminal penalty of a felony for fraudulent use of a false or fictitious name or address or for making a material false statement punishable by fine up to \$5,000 or by imprisonment of up to five years, or both, that the statements contained herein are true & accurate.

Owner #1 Signature \_\_\_\_\_ Owner #2 Signature \_\_\_\_\_

\*A Georgia license plate and registration will not be issued until the applicant presents, at the time of application, their valid Georgia driver's license or Georgia identification card. Owner's E-mail Address \_\_\_\_\_

## Exhibit 17 – Vehicle Request Approval Criteria



Georgia®  
Department of  
Administrative Services  
*Customer Focused, Performance Driven*

Nathan Deal  
Governor

Sid Johnson  
Commissioner

---

February 2011

### Vehicle Request Approval Criteria

To All Fleet Coordinators;

With regards to acquiring new vehicles and maintaining the appropriate size of the state's fleet, OFM has several goals that play into any transaction.

Goals:

1. Reduce the transportation costs for each individual agency for driving state vehicles or through travel reimbursements
2. Maintain the integrity of Policy 10
3. Surplus or redistribute unnecessary or underutilized vehicles
4. Provide acquisition options to optimize available funds and lower the average age of our vehicles.

Considering those guidelines, we have revisited the criteria for acquiring a new and/or additional vehicle.

**Via Purchase:**

1. Agency is to be compliant with provisions of the WEX Card Program.\*
2. All cars and trucks listed in VITAL are required to have current maintenance data\* (within the past calendar year).
3. Agency is to have an odometer entry dated within the previous 3 months for all passenger vehicles in VITAL Insights. Limited exceptions may be granted for specialty vehicles or special use vehicles after discussions with Agency fleet coordinator.\*
4. Request is within OPB allocation.

\*Compliance in these areas will correspond with the divisions of your agency. Should the requesting division meet the standards, but the agency as a whole does not, we will ask that you begin the agency-wide process to address those issues over the following 60 days and update OFM with your progress. **This will not delay the VR process.**

**Via Lease:**  
**Leasing can be an option in two situations:**

1. Replacement of a vehicle in your fleet, **or**
2. Acquiring an additional vehicle in lieu of paying a mileage allowance for the use of a personal vehicle.

Each situation will be reviewed by OFM and OPB on a case by case basis. To qualify for either leasing plan, the agency should be compliant with 1 through 3 under *Via Purchase*.

**To begin the leasing process:**  
Submit an email or letter describing the reason for the request, listing the vehicles to be sent to surplus or redistributed (if applicable), and the mileage data to justify the acquisition. Currently, the mileage requirement in Policy 10 is 14,000 miles per year (excluding commuting miles).

Our goal is to make this as easy as possible, while providing the proper justification and oversight for the expense to the state. This is going to be living document and, therefore, we welcome your input. Should you have any questions or comments, please contact Ed Finnegan at 404-651-7263.

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PHONE: 404-651-7263      200 PIEDMONT AVENUE SE • SUITE 1206 WEST TOWER • ATLANTA, GEORGIA 30334-9010      FAX: 678-913-0537  
[www.doas.georgia.gov](http://www.doas.georgia.gov)

Exhibit 18 – Sample Manufacturer Statement of Origin

**CERTIFICATE OF ORIGIN FOR A VEHICLE**

3980

DATE  
**10/29/03**

VEHICLE IDENTIFICATION NO.  
**1GCEK19T34E191229**

BODY TYPE  
**PICKUP**

H.P. (S.A.E.)  
**44.8**

**N.T.R.**  
**1/2**



YEAR  
**2004**

NO. CYLS.  
**08**

INVOICE NO.  
**1AD27368736**

MAKE  
**CHEVROLET**

SHIPPING WEIGHT  
**4957**

SERIES OR MODEL  
**CK15753**

NAME OF DISTRIBUTOR, DEALER, ETC. **08438 GRQP4F**

**MOORE CHEVROLET, INC.**  
**PO BOX 100**  
**BARNESVILLE**      **GA 30204-0100**

It is further certified that this was the first transfer of such new vehicle in ordinary trade and commerce.

\*\*\*\*\*  
 \* THIS VEHICLE \*  
 \* HAS A \*  
 \* 50-STATE \*  
 \* EMISSION \*  
 \* SYSTEM \*  
 \*\*\*\*\*

G34624826

**CHEVROLET MOTOR DIVISION**  
**GENERAL MOTORS CORPORATION**

---

*Rubel C. ...*

BY: \_\_\_\_\_ (AGENT)  
 (SIGNATURE OF AUTHORIZED REPRESENTATIVE)

**DETROIT MI 48243-1114**

CITY STATE

GM 921 REV. 7-85

**Exhibit 19 – Non-Leased Vehicles Odometer Disclosure Statement (Form GA-25)**

**NON-LEASED VEHICLES  
ODOMETER DISCLOSURE STATEMENT**

Federal and State law require that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

I, \_\_\_\_\_, state that the  
(transferor's name – PRINT)

odometer now reads \_\_\_\_\_ (no tenths) miles and to the best of my knowledge that it reflects the actual mileage of the vehicle describes below, unless one of the following statements is checked.

Check one box only:

(1) I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits.

(2) I hereby certify that the odometer reading is NOT the actual mileage. WARNING – ODOMETER DISCREPANCY.

MAKE	MODEL	BODY TYPE
V.I.N.		YEAR

Transferor's Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Transferor's Address \_\_\_\_\_  
(street)

(city) (state) (zip)

Date of Statement \_\_\_\_\_

Transferee's Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Transferee's Name \_\_\_\_\_

Transferee's Address \_\_\_\_\_  
(street)

(city) (state) (zip)

FORM GA-25





Exhibit 21 – Sample Driver-Check Sticker Application

# STATE OF GEORGIA

<b>Your First &amp; Last Name*:</b>	<input type="text"/>
<b>Email Address:</b>	<input type="text"/>
<b>Location:</b>	Active Locations <input type="text"/>
	Active Locations <input type="text"/>
<b>Decal Number (if known):</b>	<input type="text"/>
<b>Vehicle Number: (ARI # xxx-xxxx)</b>	<input type="text"/>
<b>License Plate:</b>	<input type="text"/>
<b>Vehicle Type: (Van, Truck...)</b>	<input type="text"/>
<b>Vehicle Year:</b>	<input type="text"/>
<b>Vehicle Make:</b>	<input type="text"/>
<b>Vehicle Model:</b>	<input type="text"/>
<b>VIN:</b>	<input type="text"/>
<b>Vehicle Color:</b>	<input type="text"/>
<b>Driver's Name:</b>	<input type="text"/>
<b>Shipping Address:</b>	<input type="text"/>
	<input type="text"/>
<b>Remarks:</b>	<input type="text"/>
	<input type="text"/>

**Please Note:** After saving this vehicle, an E-mail will be sent to your Account Executive who will review this information and add vehicle to your account. Decal will be mailed to you immediately after.

[Excel Template for Adding New Vehicles](#)

## Exhibit 22 – Vehicle Identification/Markings

### 1. State Vehicle Identification Placement for State Seals, Numbers and Report My Driving Stickers

A Seal or Department identifying logo on **driver and passenger-side doors** for all State operated vans and sedans is required. Vehicles with fold-out type doors, seals should be placed next to the passenger-side fold-out door and the driver's-side door.

Vehicle numbers are required on all State and Department vehicles and should be placed on the **Right Front** and **Right Rear** of the vehicle. The vehicle number should coincide with the State ID number listed in ARI and the associated Report My Driving number.

Report My Driving sticker should be applied to the **Left Rear** of the vehicle.

Department Property Decal should be applied to the **Inside of the Driver's Side Door Frame** next to the manufacturer's identification plate.

Vehicle Monitoring Stickers for vehicles inspected or monitored by the RTO or the Contractor will be placed on the **Right Rear** window for vehicles that PASS inspection and on the **Right Front** for vehicles that are Redlined.



### 2. Non-DHS/DBHDD Vehicles in the Coordinated Transportation System

All non-DHS/DBHDD vehicles operated as part of the Coordinated Transportation System, including Community Service Board titled vehicles and vehicles titled to other governmental agencies, are required to have visible markings on the exterior of the vehicle, which clearly identifies the contractor or subcontractor operating the vehicle.

## Exhibit 23 – Vehicle Title Handling Instructions

The space below is intentionally left blank so that the exhibit on the following page may be printed and used.

## MEMORANDUM

TO: Vehicle Operators

FROM: Fleet Manager

RE: Original Titles(s)

Enclosed is the original title(s) you requested for the vehicle(s) being sent to surplus.

The following steps must be taken:

- Insert the title(s) into the vehicles glove compartment or above the driver's visor.
- Indicate the location of the title upon release of the vehicle to the buyer or towing company.
- Remove the seals, driver check stickers, state ID numbers, and the tag (which should be destroyed) from the vehicle(s) prior to release.
- All keys should be released with the vehicle to the buyer or towing company.

Should you have any additional questions or need further assistance, feel free to contact the Fleet Manager at 404-326-8897.

## Exhibit 24 – Corrective Action and Redline Action Items List

### Corrective Action and Redline

During a vehicle inspection, inspected items will fall into 2 categories, “Checked” and “Needs Attention”. If an inspected item “Needs Attention” based on the Inspector’s finding, the discrepancy may require either a Corrective Action or the vehicle may be Redlined by the Inspector.

A vehicle, not Redlined, but requiring a Corrective Action can still be operated if the identified issue is corrected within an agreed upon timeframe, not to exceed 30 days. If the Corrective Action(s) is not corrected in the timeline specified, the vehicle may be Redlined until discrepancy(s) are corrected and Inspector has re-inspected the vehicle.

Redlining the vehicle will be the result of any of the Redline Items listed below, or if another severe safety issue is found during a random or scheduled inspection. A Redlined vehicle is designated with the placement of a sticker on the vehicle’s windshield. Redlined vehicles cannot be used for the transportation of staff, consumers or passengers. Redlined vehicles can only be driven to receive the needed repairs or corrections. The Redline sticker can only be removed by the Inspector.

	Corrective Action Items	Redline Items
1.	Identification of Vehicle (such as missing numbers, Report My Driving sticker or seals/logos)	
2.	Horn, Mirrors, windshield wipers – not working, broken or missing	
3.a.	Windows – non-working	Windows - If all windows cannot be lowered for air circulation.
3.b.	Windows – chips or cracks not in driver’s line of vision.	Windows – cracks that interfere with driver’s line of vision or exceed the length of the window. Chips or starbursts in windshield that are in driver’s line of vision or appear to weaken the integrity of the glass.
4.	Lights – If any one light or combination of one side of lights is not working properly or out.	If all rear lights are out or not working to include emergency flashers and turn signals. Or if both headlights and high beams are out.
5.	Body Damage – if repairing is feasible (some body damage is irreparable or not worth the cost, especially if agency neglected to repair within 90 days of the incident.	Body damage that was not repaired and affects the operation of the vehicle or the opening and closing of doors.  **Wheelchair securement straps involved in an accident or incident should be removed from the vehicle, quarantined and sent back to supplier.
6.	Tires – Tires with 3/32 <sup>nd</sup> of tread depth remaining, or noticeable wear on a particular section of tire and no visible signs of wire, metal or punctures.	Tires – 1 or more tires that have a tread depth of less than 2/32 <sup>nd</sup> , has metal, wire protruding, has extreme wear on more than 2 tires, and/or has a flat tire.
7.	Running boards, proper step stool	Running boards that are not fully secured to the vehicle, are loose and could present a hazard to consumers enter or exiting the vehicle.

8.	Seat Belts – broken seat belts or seat locations missing seat belts	Seat Belts – if the vehicle has no working seat belts, seat belts are not installed (this does not include school buses or fixed route public systems), or vehicle is transporting maximum load with non-working seat belts in occupied seat locations.
9.	Missing safety equipment – seat belt cutter, stocked first aid kit, spill kit, 3 emergency reflectors, seat belt extensions (1 for sedans), or fire extinguisher or fire extinguisher needs inspection, replaced or mounted.	
10.	Upholstery – rips and holes other than normal wear and tear that. Metal protruding or sharp edges.	
11.	Clean Interior – If interior needs more than a quick sweep or vacuum.	Interior – if interior is filthy to the extreme of being a health or rider hazard.
12.	Doors – if doors are blocked or have difficulty opening from either inside or outside.	Doors – if doors are not usable for emergency exit or cannot be opened from inside or outside.
13.	Interior Lights – not working properly.	
14.	AC/Heat – not working	AC/Heat – based on season if one or the other is not working at all.
15.	Flooring – Dirty, rips or rolled vinyl	Flooring – holes in floor that will allow exhaust to enter vehicle or floors that are slick in nature.
16.	Seals, Stickers, Vehicle Numbers, Signage, etc. – Missing or incomplete	
17.	Wheelchair Securement Area and Lift Equipment (if applicable) – Reflector tape missing or needs replacing, emergency manual lift bar missing, securement track dirty or inadequate number of securement straps for number of securement areas. **Wheelchair securement straps involved in an accident or incident should be removed from the vehicle, quarantined and sent back to supplier.	Wheelchair Securement Area and Lift Equipment (if applicable) – Lift does not work, incomplete or non-working securement straps for at least 1 wheelchair securement area, securement straps used that were involved in accident or incident that were not removed or removed but not replaced, shoulder and lap belts not available. **Wheelchair securement straps involved in an accident or incident should be removed from the vehicle, quarantined and sent back to supplier. ***Redline could be for lift use only. <i>It should be noted that to operate a wheelchair accessible vehicle but unable to allow riders with accessibility needs to ride is a direct violation of the ADA.</i>

Exhibit 25 – Pass/Fail Inspection Sticker

PASS Only - 1A



FAIL Only – 1B





**Exhibit 26 – Sample Certificate of Insurance**

<b>Certificate of Insurance (Sample)</b>				
<b>INSTRUCTIONS TO PRODUCING AGENT:</b> Complete the shaded portions of this certificate and return to the Insured. No condition, term, qualification, limitation, exception, exemption, modification, or proviso shall appear on the certificate.				
<b>Name, Address and Telephone Number of Producing Agent</b>			<b>CONTRACT NUMBER:</b>	
			<b>CONTRACT NAME:</b>	
<b>Name and Address of Insured Contractor</b>			<b>Certificate Holder (Owner)</b>	
Type of Insurance (include brief description)	Policy No.	Company Affording Coverage	Policy Period Dates (MM/DD/YY)	Limits
<b>Commercial General Liability</b>				General Aggregate (Per Project) Products-Co./Op Agg Personal & Adv injury Contractual Each Occurrence
<b>Commercial Business Automobile Liability</b> Including, but not limited to, owned, hired and non-owned autos				Combined Single Limit <b>OR</b> Bodily Injury (per person) Property Damage
<b>Workers Compensation</b>				GA Statutory Limits Each Occurrence Disease - Policy Limit Disease Each Employee
<b>Commercial Umbrella Liability</b>				Each Occurrence Aggregate
<b>Employers' Liability</b>				Each Occurrence Disease - Policy Limit Disease Each Employee
<b>Additional:</b>				
<p>Such insurance as is herein certified (i) applies to all insurance issues in connection with the work required by the provisions of the documents forming the contract, (ii) applies whether or not the contract documents between the insured contractor and the Owner have been executed, (iii) is written in accordance with the company's regular policies and endorsements, subject to the company's applicable manuals or rules and rates in effect, as modified by this certificate and the insurance article of the contract, (iv) have been issued to the insured named above, and (v) are in force at this time.</p> <p>The Officers, Members, &amp; Employees of the Owner and the State of Georgia are included as additional insureds as their interests may appear. Each Insurer is hereby notified that the statutory requirement that the Attorney General of Georgia shall represent and defend the Indemnities remains in full force and effect and is not waived by issuance of any policy of insurance.</p> <p>Each policy shall contain a provision that coverage afforded under the policies will not be canceled (or not renewed or allowed to lapse for any reason) until at least thirty (30) days after Owner has received notice thereof as evidenced by return receipt of registered letter. All policies must be issued by an insurance company licensed to do business in the State of Georgia, with a minimum AM Best rating of A-, and signed by an authorized agent.</p>				
Authorized Representative: _____			Date: _____	
Type Name: _____				