

Understanding Transportation Brokers: A Guide for Riders

How non-emergency medical transportation works and what to expect

Why this matters to you

If you receive transportation to medical appointments, you may interact with:

- A call center that schedules your ride
- A transportation company that picks you up
- Another organization that manages or oversees the process

That middle organization is often called a “broker.”

Understanding what a broker does—and how rides are scheduled—can help set expectations and reduce frustration.

What a transportation broker does

In many healthcare programs, especially Medicaid and managed care, a broker is responsible for:

- Helping arrange rides to medical appointments
- Making sure transportation is available when needed
- Assigning rides to approved transportation providers
- Making sure safety and accessibility rules are followed

The broker usually does not own the vehicles or directly employ the drivers. Instead, it works with transportation providers in your area.

What a transportation “network” means

A network is a group of transportation providers that have been approved to provide rides for a specific healthcare program.

To be part of a network, providers typically must:

- Meet safety and licensing requirements
- Have trained drivers
- Carry required insurance
- Agree to program rules and service standards

Only providers in the network can receive trip assignments through the broker.

How rides are assigned

When a ride is scheduled, the broker:

- Reviews your location, appointment time, and transportation needs

- Looks at transportation providers in the network that are able to serve the trip
- Assigns the trip to a provider that can accept it under program rules

In some situations, provider or driver preference may be considered, such as:

- When a rider has an established relationship with a provider
- When continuity helps with communication, comfort, or safety
- When a provider regularly serves a specific facility or route

However, preference is only one factor and cannot override program requirements.

Rides are ultimately assigned based on a combination of:

- Availability
- Vehicle type and accessibility
- Timing and distance
- Program rules, including what kind of ride safely fits your needs and what the program allows

This means a preferred provider may be assigned when appropriate, but it is not guaranteed for every trip.

Why a different provider or driver may be assigned

Even when preference exists, assignments may change because:

- A preferred provider or driver is unavailable
- A different vehicle type is needed for a specific trip
- Program rules require use of another available option
- Schedules and demand change day to day

The goal is to make sure the ride is safe, timely, and appropriate, even if the provider or driver is different than expected.

What “the right type of ride” means

You may hear phrases like:

- “This is the most appropriate ride”
- “We have to use the lower-cost option”

What this usually means is:

- The ride must safely meet your needs
- Higher-cost options are used only when they are needed
- Accessibility, including wheelchairs or other assistance, must be provided when needed

The goal is safe and reliable transportation, not cutting corners.

A simple example: why one ride may work differently than another

Here is a common example.

A ride paid for through your Medicaid transportation benefit may be scheduled through a broker that must follow Medicaid program rules, use approved transportation providers, and choose a ride option that fits both your needs and the program requirements.

A different ride arranged directly by a clinic or hospital may follow a different process. The clinic may choose the transportation company itself, pay for the ride directly, and use different rules or fewer restrictions.

To you, both situations may feel like “someone arranged my ride.” But behind the scenes, the rules may be very different depending on who is paying for the transportation and what program is involved.

Why the same company may act differently in different situations

You may notice that the same organization schedules or manages rides differently at different times. This can be confusing.

Usually, this happens because the rules change based on which program is paying for the ride.

Different programs, different rules

Transportation brokers often work under more than one program. Each program may have its own rules.

For example:

- A ride paid for by Medicaid may follow one set of requirements
- A ride paid for by a managed care plan may follow a different set
- A ride arranged directly by a clinic or hospital may follow a different process altogether

Even if the same company is involved, the rules it must follow can change depending on the funding source.

That can affect things like:

- How rides are scheduled
- Which transportation providers can be used
- Whether shared rides are allowed
- What paperwork or approvals are required
- How complaints or appeals are handled

This is why:

- One ride may feel very flexible
- Another may feel more structured
- The answer you receive may change from one situation to another

In many cases, that difference is not arbitrary or personal. It reflects different program rules tied to how the ride is funded.

What does not change

Even when rules differ, brokers are still required to:

- Treat riders fairly
- Follow safety and accessibility requirements
- Use approved transportation providers
- Provide ways to report concerns

If something does not feel right, you can always ask:

- Which program is paying for this ride?
- What options are available under that program?
- How can I raise a concern if I need to?

What a broker does not control

It can help to know that brokers usually:

- Do not control clinic or facility schedules
- Do not decide which healthcare provider you see
- Do not control traffic, weather, or road conditions
- Do not personally drive the vehicle

If a ride is late or there is a problem, the broker works with the transportation provider to address it, but it may not be able to change everything immediately.

Concerns, complaints, and your rights

Brokers are required to:

- Accept and track concerns
- Review issues that affect riders
- Provide ways to report problems

If something goes wrong:

- Report it to the broker as soon as possible
- Be clear about what happened
- Ask about next steps or follow-up

There are processes in place to review concerns and improve service.

What this guide is—and is not

This guide:

- Explains how transportation brokers work
- Helps set realistic expectations
- Encourages informed communication

This guide does not:

- Change program rules
- Guarantee a specific provider or driver
- Replace customer service or grievance processes

Want to learn more?

This overview is based on a detailed Broker Guidance Document that explains how transportation programs operate behind the scenes.

Most riders do not need to read it, but it is available for those who want a deeper understanding of how transportation decisions are made.

Final takeaway

Transportation brokers help coordinate rides within healthcare program rules.

They assign trips to approved providers in their network based on availability, safety, and the type of ride that fits your needs under the program.

Understanding that different programs may follow different rules can make the experience feel more predictable—and help you know when and how to ask questions.