

## Vanpool Driver Medical Certification and Reimbursement Request Procedure

Pursuant to V.C. Section 12804.9 (j), any employee who drives a vanpool vehicle carrying more than 10 but not more than 15 persons including the driver may operate with a class C license but shall possess evidence of a medical examination required for a class B license when operating vanpool vehicles. Such evidence must be obtained through a medical provider of the employee's choice during his or her personal time. Use of the vanpool van is not permitted as transportation for this purpose.

Upon appropriate request and approval by Commuter Services, fees incurred by the employee for this purpose may be eligible for reimbursement not to exceed \$50 every two years.

### Medical Certification

Prior to obtaining a medical examination and driving a vanpool van, an employee must submit a Medical Examination Certification Authorization form to Commuter Services for approval.

After passing the medical examination, the employee is to provide to Commuter Services a copy of the wallet-sized Medical Examiner's Certificate (provided and signed by the examining physician). The original wallet-sized Medical Examiner's Certificate must be kept with the employee's driver license whenever he or she operates a vanpool van. A copy of the DMV Medical Examination Report form should be kept with the employee's private records.

**Please do not send the DMV Medical Examination Report form to Commuter Services.** If the wallet-sized Medical Examiner's Certificate should go missing, a copy of the DMV Medical Examination Report form can be used as proof of certification. The State of California requires renewal of the medical certification every two years.

### Medical Examination Reimbursement

To apply for reimbursement, the employee must obtain authorization from Commuter Services **prior** to the exam. After attending the medical exam, the employee must submit to Commuter Services: (1) a copy of the wallet-sized Medical Examiner's Certificate (provided and signed by the examining physician) and (2) an original receipt for payment of services rendered. The receipt should note that the payment was for a DMV physical.

Medical Certification Pre - Authorization & Reimbursement Form			
<i>Reimbursement requests must be authorized prior to the medical examination and submitted for final approval within 3 months following the examination date. Reimbursement Requests received without pre-authorization may be denied. A copy of the wallet-sized Medical Examiner's Certificate should accompany the request for reimbursement. Please allow 7 days for processing the pre-authorization and three weeks for processing the reimbursement request.</i>			
Last Name	First Name	Emp#	
Dept Name	Work Ph	Mail Code	E-Mail
Driver Type Primary <input type="checkbox"/> Alternate <input type="checkbox"/>	Medical Examination Date		Amount Requested \$
<b><i>Commuter Services Use Only</i></b>			
Vanpool Name _____ DMV Approved <input type="checkbox"/> <b>Medical Exam</b> - EPP Authorized <input type="checkbox"/> CEHW Authorized <input type="checkbox"/>			
Approval Amount \$ _____ Commuter Services EE _____			