We all know drinking & driving don’t mix.

Your employer encourages all employees and their family members to act responsibly by not driving under the influence of alcohol.

To ensure your safety, Alliance Work Partners (AWP) offers SafeRide.

SafeRide is intended for those occasions when calling a cab is the right thing to do. The program is provided to you at NO COST and is 100% CONFIDENTIAL.

PLAN A SOBER RIDE
Planning ahead for a sober ride is the best way to ensure you get home safely. Don’t wait until after you have started drinking. Designate a driver or arrange for someone you trust to pick you up. That also applies to others you know. If you know someone who is about to drive impaired, take their keys and find them a sober ride home.

Here’s how it works:

- Jot down the telephone number of your local cab company on your AWP wallet card and keep with you.
- If you find yourself in an unanticipated situation where you or someone you are riding with is incapacitated, call your local cab company for a safe ride home. Circumstances may include:
  - “One too many” alcoholic beverages
  - Drowsiness due to medication
  - Emotional distress (i.e., bad news on the job, death in the family, finalizing a divorce, etc.)
- For reimbursement, within 30 days, mail the following information:
  - full name
  - address
  - e-mail address
  - name of your employer
  - telephone number
  - fully completed cab co. receipt

AWP will reimburse the cost of cab fare when you choose to call a cab in the event the employee or family member finds themselves impaired and unable to drive safely and responsibly. Your employer will never know you submitted a claim.

Here for you as life happens …
SafeRide Rules

SafeRide is available to employees and family members for reimbursement of a taxi cab transport up to 50 miles one way to the employee or family member’s place of residence, should the employee or family member be impaired and consequently, unable to drive responsibly.

All claims will be reviewed to ensure criteria for reimbursement is met. If the claim is approved for reimbursement, a check will be sent to you as reimbursement of the cab fare. Accompanying this reimbursement will be a letter detailing further use of the program and procedures thereof.

Procedures following first claim for subsequent claims:

1. The SafeRide Program is not available for use for routine circumstances. To promote healthy choices, SafeRide may only be used up to 3 times. Three (3) years from the third use, the individual’s ability to utilize SafeRide will be reinstated.

2. Upon receipt of second claim within a 12 month period, we will require you to contact our Case Management Department for a telephonic assessment. If deemed appropriate, the claim will be paid. The 1-year period begins the date of the first ride submitted for reimbursement through the SafeRide Program.

3. Upon receipt of a third claim within a 36 month period, we will require you to contact our Case Management Department to schedule a face-to-face assessment with a counselor prior to reimbursement of cab fare. If deemed appropriate, the claim will be paid. The 3-year period begins the date of the first ride submitted for reimbursement through the SafeRide Program.

4. Please note, AWP does not reimburse tips, fees or surcharges. We will reimburse fares from options such as UBER and Lyft, however, we do not reimburse any fees or surcharges associated with their use.

5. The SafeRide Program is intended for a ride from an event to one’s established residence. Should an event occur in which this is not the case, additional information will be requested to further process the reimbursement claim. Alliance Work Partners will reconsider claims should the individual submit additional information.

6. Please be advised that as with all of our programs available through the EAP, we handle these with the utmost respect for your confidentiality. No information will be provided to your employer with regard to this program or use of the program.

7. To properly process the claim, please provide the following information to Account Management as part of your SafeRide Claim:

- full name:
- address:
- telephone number:
- e-mail address:
- name of your employer:
- fully completed cab company receipt, attach (including number of miles & total dollar amount)

Please submit all claims to:
Alliance Work Partners
attention: ACCOUNT MANAGEMENT
4115 Friedrich Lane, Suite 100
Austin, Texas 78744

1-800-343-3822 | TDD 800-448-1823 | AM@alliancewp.com | www.alliancewp.com