

No supplement to this tariff will be issued
Except for the purpose of canceling the tariff
unless specifically authorized by the Authority.

Additions to, changes in and eliminations from
this tariff will be in loose-leaf form.

AMERICAN INVESTMENT ENTERPRISES, INC. dba AMR
Operated by
GMTCARE, LLC

CPCN: 1034.4

TARIFF NO. 1

Naming

RATES, RULES AND REGULATIONS
GOVERNING THE TRANSPORTATION

by

Irregular route transportation by motor vehicle of wheelchair patients, convalescents,
infirm and handicapped people requiring special transportation and elderly people
requiring special transportation and elderly individuals in non-emergency service:

Between points and places within Clark County, Nevada,
on the one hand, and between points and places within the
State of Nevada on the other.

Issued:

Effective:



Issued by:
AMR/GMTCare, LLC
3645 W Oquendo Rd, Suite # 400
Las Vegas, NV 89118



ORIGINAL PAGE ONE

CPCN No. 1034.4

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Checking Sheet for Tariff

Upon receipt of new or revised pages, a check mark must be placed opposite the Correction Number (shown below) corresponding to number shown in lower left-hand corner of the new or changed page. If correction numbers are properly checked as received, check marks will appear in consecutive order without omission. However, if check marks indicate that a new or revised page has not yet been received, request should at once be made to the issuing carrier for a copy of the new or revised page.

Correction Numbers

| | | | | |
|---|----|----|----|----|
| 1 | 7 | 13 | 19 | 25 |
| 2 | 8 | 14 | 20 | 26 |
| 3 | 9 | 15 | 21 | 27 |
| 4 | 10 | 16 | 22 | 28 |
| 5 | 11 | 17 | 23 | 29 |
| 6 | 12 | 18 | 24 | 30 |

Explanation of Abbreviations and Other Reference Marks

| | | | |
|-----------|------------------------------------|---------|---|
| dba | doing business as | N | New |
| NV | Nevada | C | Change, neither increase nor reduction |
| No. | Number | I | Increase |
| Nos. | Numbers | R | Reduction |
| NTA..... | Nevada Transportation Authority | | |

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| RULE NO. | RULES AND REGULATIONS |
|----------|--|
| 5 | <p style="text-align: center;">GENERAL APPLICATION</p> <p>These rules, regulations and rates are to be used by AMR/GMTCare, in the operation of service for which AMR/GMTCare is Certified.</p> |
| 10 | <p style="text-align: center;">HOURS OF SERVICE</p> <p>Normal business hours will be twenty-four (24) hours per day, seven days a week. Patient transports will normally take place during normal business hours.</p> |
| 15 | <p style="text-align: center;">AVAILABILITY OF TARIFF</p> <p>Copies of this tariff shall be available in each office where orders for service are taken and, in each vehicle used to provide services.</p> |
| 20 | <p style="text-align: center;">TIME SCHEDULE FOR SERVICE</p> <p>AMR/GMTCare shall endeavor to arrive and depart at prior agreed upon times to and from points of departure and arrival within its service area. However, AMR/GMTCare will not be liable for delay caused by accident; breakdown; roadway conditions; weather; or other causes beyond its control. Furthermore, AMR/GMTCare does not guarantee arrival or departure from any point at a specified time.</p> |
| 25 | <p style="text-align: center;">ANIMALS OR PETS</p> <p>Dogs, cats or other animals will not be carried in vehicles with passengers with the exception of service animals individually trained to assist people with disabilities.</p> |

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| RULE NO. | RULES AND REGULATIONS |
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| 30 | <p style="text-align: center;">FIREARMS</p> <p>Passengers will not be permitted to board vehicles while carrying firearms.</p> |
| 35 | <p style="text-align: center;">RESERVATION OF RIGHTS</p> <p>A. AMR/GMTCare reserves the right to refuse transportation to any individual having in their possession explosives or inflammable material; substances; or articles; or articles of an objectionable nature; or individuals under the influence of alcohol and/or drugs; or whose conduct and behavior is objectionable to other passengers; prospective passengers; or drivers; or medical personnel.</p> <p>B. AMR/GMTCare reserves its right to control seating, including the right to change such seating at any time during the transportation.</p> <p>C. AMR/GMTCare reserves the right, whenever the need arises, to transfer passengers from one transport vehicle to another.</p> <p>D. Immediate transportation is not guaranteed but is subject to limitations of available vehicles; equipment; and personnel. Should any of the above occur AMR/GMTCare reserves the right to transport passengers at the next available opportunity.</p> <p>E. Once transport is completed payment is required and there is no refund for services rendered per NAC 706.311 (1)(b). However, complaints may be submitted to the NTA for determination.</p> |
| 40 | <p style="text-align: center;">COMPLIANCE WITH LOCAL LAW</p> <p>AMR/GMTCare shall comply with all local laws, rules, and regulations within its area of service.</p> |

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| RULE NO. | RULES AND REGULATIONS |
|----------|---|
| 45 | <p style="text-align: center;">SERVICE ZONES</p> <p>The proposed service area shall be divided into three zones: <u>Zone 1</u>: shall include all areas within the City of Las Vegas and North Las Vegas <u>Zone 2</u>: shall include the City of Henderson, Nevada <u>Zone 3</u>: shall be all other areas in the State of Nevada not included in zones 1 and 2</p> |
| 50 | <p style="text-align: center;">MULTIPLE PASSENGER RATES</p> <p>If two wheelchair passengers from the same origination require transportation to the same destination at the same time, the rate charged each passenger shall be 75% of the applicable tariff rate for his or her transportation. All other patients transported during multiple passenger transports will be at 100% of the applicable tariff. There shall be no charge for passengers not requiring special transportation; and who are accompanying a passenger who requires special transportation.</p> |
| 55 | <p style="text-align: center;">DISCOUNTED RATES</p> <p>If any person or entity completes ten (10) or more transports within a single calendar day, the rate charged will be the "Discounted Rates" defined in Section 70 of this Tariff.</p> |
| 58 | <p style="text-align: center;">BARIATRIC RATES</p> <p>Bariatric rates will be based on patient weight. Any patient weighing 350 pounds, or more is considered bariatric. Bariatric wheelchair transports will be charged the base stretcher rate and the patient will be transported with two crew members in a stretcher vehicle. Bariatric stretcher transports will be charged the base stretcher rate times two and will include an additional 1-2 crew members.</p> |
| 59 | <p style="text-align: center;">WAIT TIME</p> <p>Wait time is an additional charge based on amount of time. Wait time begins upon arrival to pick-up and/or drop off (appointment or facility). Wait time will be charged if unit is on location waiting for the patient to be ready for transport for longer than 15 minutes in which case wait time charges will begin. If unit is on location at the drop off waiting for any reason to be able to safely transfer patient from our unit to facility or home wait charges will start after 15 minutes from the time unit arrived at the destination address. There is a minimum of 15 minutes for wait time and any wait time under 15 minutes will be charged the 15-minute wait time price for the requested vehicle type.</p> |

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| 60 | <p style="text-align: center;">MILEAGE</p> <p>Mileage is computed as the total driving distance between origination and destination address according to "Google Maps" online service, rounded up to the nearest mile. For all transports with origination and/or destination in zone 3, mileage will be calculated starting from the AMR/GMTCare office location (3645 W. Oquendo Rd., Las Vegas, NV 89118) and ends at the destination address.</p> |
| 61 | <p style="text-align: center;">CANCELLATION</p> <p>Carrier reserves the right to cancel any service because of weather or other conditions such as road hazards due to slides, storms, or any other similar causes, natural or otherwise which makes travel inadvisable.</p> <p>Carrier will charge a cancellation fee in the event that the request for transportation is cancelled less than (120) minutes from time of requested service for all trips. Cancellation fee shall be equal to 100% of the reservation price for all zones.</p> |
| 62 | <p style="text-align: center;">STAIRS ASSISTANCE</p> <p>As part of the mobility support solutions Stairs Assistance is a service provided to anyone in need of assistance with going up and down the stairs on the way to your medical appointments, returning home or any health care transportation. Stairs Assistance is an additional charge based on the patient's request involving any type of assistance with stairs.</p> |
| 63 | <p style="text-align: center;">Credit Card as payment type</p> <p>For all services rendered where the payment type requested by the customer is by credit card a three (3) percent (%) fee will be charged.</p> |
| 64 | <p style="text-align: center;">Late Payment fees on invoices</p> <p>A late fee of 1% will be charged monthly when a payment is not provided within 30 days of receipt.</p> |

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| RULE NO. | RULES AND REGULATIONS |
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| 65 | <p>STANDARD RATES PER ONE WAY TRANSPORTATION PER PERSON (Less than 10 transports per calendar day)</p> <p><u>ZONE 1:</u> Greater Las Vegas Metropolitan Area/ North Las Vegas Ambulatory Patient: \$65.00 Wheelchair Service: \$105.00 Stretcher Service: \$165.00</p> <p><u>ZONE 2:</u> Henderson Ambulatory Patient: \$75.00 Wheelchair Service: \$125.00 Stretcher Service: \$210.00</p> <p><u>ZONE 3:</u> Other areas in the State of Nevada not included in zones 1 and 2 Ambulatory Patients: i. a base rate of \$100.00; plus ii. \$4.75 per mile. Wheelchair Service: iii. a base rate of \$175.00; plus iv. \$4.75 per mile. Stretcher Service: i. a base rate of \$250.00; plus ii. \$4.75 per mile.</p> <p>Bariatric Stretcher: 350 pounds or more will be charged the base stretcher rate times two. Bariatric Wheelchair: 350 pounds or more will be charged the base stretcher rate. *See rule 58</p> <p>Wait time will be an additional charge per 15 minutes per person. *See rule 59 Ambulatory: \$20.00 per 15 minutes or fraction thereof Wheelchair: \$25.00 per 15 minutes or fraction thereof Stretcher: \$50.00 per 15 minutes or fraction thereof</p> <p>Stairs Assistance fee is \$50.00 per transport</p> <p>Note 1: Rates are for one way transportation and are based on the pick-up or drop-off location with the highest zone rate.</p> |

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| RULE NO. | RULES AND REGULATIONS |
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| 70 | <p align="center">DISCOUNTED RATES PER ONE WAY TRANSPORTATION PER PERSON (10 or more transports per calendar day)</p> <p>ZONE 1: Greater Las Vegas Metropolitan Area & North Las Vegas Ambulatory Patient: \$65.00 Wheelchair Service: \$100.00 Stretcher Service: \$155.00</p> <p>ZONE 2: Henderson Ambulatory Patient: \$75.00 Wheelchair Service: \$120.00 Stretcher Service: \$200.00</p> <p>ZONE 3: Other areas in the State of Nevada not included in zones 1 and 2 Ambulatory Patients: i. a base rate of \$100.00; plus ii. \$4.75 per mile. Wheelchair Service: i. a base rate of \$175.00; plus ii. \$4.75 per mile. Stretcher Service: i. a base rate of \$250.00; plus ii. \$4.75 per mile.</p> <p>Bariatric Stretcher: 350 pounds or more will be charged discounted stretcher base rate times two. Bariatric Wheelchair: 350 pounds or more will be charged discounted stretcher rate. *See rule 58</p> <p>Wait time will be an additional charge per 15 minutes per person *See rule 59 Ambulatory: \$20.00 per 15 minutes or fraction thereof Wheelchair: \$25.00 per 15 minutes or fraction thereof Stretcher: \$50.00 per 15 minutes or fraction thereof</p> <p>Stairs Assistance fee is \$50.00 per transport</p> <p>Note 1: Rates are for one way transportation and are based on the pick-up or drop-off location with the highest zone rate.</p> |

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3% TAX Pursuant to SECTION 51 of AB175

The following rules apply to carriers who provide passenger transportation, excluding airport transport service:

Pursuant to Nevada Legislative Senate Bill No. 376

Sec. 36. Section 51 of Assembly Bill No. 175 of this session is hereby amended to read as follows:

Sec. 51. 1. Except as otherwise provided in subsection 2 and in addition to any other fee or assessment imposed pursuant to this chapter, an excise tax is hereby imposed on the connection, whether by dispatch or other means, made by a common motor carrier of a passenger to a person or operator willing to transport the passenger at the rate of 3 percent of the total fare charged for the transportation, which must include, without limitation, all fees, surcharges, technology fees, convenience charges for the use of a credit or debit card and any other amount that is part of the fare. The Department of Taxation shall charge and collect from each common motor carrier of passengers the excise tax imposed by this subsection.

2. The provisions of subsection 1 do not apply to an airport transfer service.

3. (Intentionally omitted)

4. As used in this section, "airport transfer service" means the transportation of passengers and their baggage in the same vehicle, except by taxicab, for a per capita charge between airports or between an airport and points and places in this State. The term does not include charter services by bus, charter services by limousine, scenic tours or special services.

NOTE 1: The passenger transportation recovery charge must be passed along to all customers.

NOTE 2: The 3% passenger transportation recovery charge must be shown separately from the total fare as defined above.

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SAFETY PROTOCOL
ISOLATION SERVICE FEE

At all times commercial transportation carriers are required to ensure the safety of their passengers. In response to COVID-19 and other forms of isolation in which anyone entering the patient's room and having direct contact with the patient requires wearing gloves and a gown or any Personal Protective Equipment (PPE), GMT has taken extra steps to ensure the protection and safety of our drivers and passengers. These steps are based on CDC guidelines for commercial motor carriers, in conjunction with Nevada OSHA guidance and recommendations for best practices published by the Nevada Transportation Authority. In order to provide these extra safety measures an Isolation Service and Safety Fee will be imposed on the transportation of any patient with a COVID positive result or Isolation needs.

(1) \$50.00 per trip for all zones

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