

Non-Emergency Ambulance Transportation Q & A

How does the Division of Medicaid cover Non-Emergency Ambulance Transportation for beneficiaries who are not residents of a long-term care (LTC) facility?

Non-emergency ambulance transportation for Medicaid beneficiaries that are not enrolled in MississippiCAN and are not residents of an LTC facility is provided through the State Plan Non-Emergency Transportation (NET) Broker Program. Not all beneficiaries are eligible for NET services. All requests for NET should be directed to the NET Broker in order to determine eligibility for NET services and the level of care required for the transport.

The current contractor is Medical Transportation Management (MTM). If a beneficiary requires the level of care provided by an ambulance in order to be transported to a medically necessary, Medicaid covered service, MTM should be contacted to arrange the service.

MTM's contact information:

6360 I-55 North Suite 201
Jackson, MS 39211
www.mtm-inc.net
1-866-331-6004

Beneficiaries enrolled in the Mississippi Children's Insurance Program (CHIP) are not eligible for Medicaid State Plan NET services.

How does the Division of Medicaid cover Non-Emergency Ambulance Transportation for beneficiaries residing in an LTC facility?

Effective September 9, 2018, the LTC facility must either contact MTM to arrange the NET ambulance transport at no cost to the LTC facility or the LTC facility can arrange the NET ambulance transport directly with the ambulance provider, pay the ambulance provider directly and place the cost of the NET ambulance transport on the LTC facility's cost report.

Effective February 1, 2019, the LTC facility must arrange the NET ambulance transport, pay the ambulance provider directly and place the cost of the NET ambulance transport on the LTC facility's cost report.

Which facilities are included as LTC facilities?

Nursing Facilities and Skilled Nursing Facilities

Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)

Pediatric Residential Treatment Facilities (PRTF)

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Are all residents of LTC facilities included in the changes to Miss. Admin. Code Title 23, Part 201, Rules, 1.7 and 2.4, effective September 9, 2018, or are there categories of Medicaid LTC residents who are excluded?

All Medicaid LTC residents are included in the changes to the Admin. Code Part 201, effective September 9, 2018.

Effective September 9, 2018, the LTC facility must either contact MTM to arrange the NET ambulance transport or the LTC facility can arrange the NET ambulance transport directly with the ambulance provider, pay the ambulance provider directly and place the cost of the NET ambulance transport on the LTC facility's cost report.

Effective February 1, 2019, the LTC facility must arrange the NET ambulance transport, pay the ambulance provider directly and place the cost of the NET ambulance transport on the LTC facility's cost report.

If a resident is moving from one LTC facility to another LTC facility, the originating LTC facility is responsible for arranging for the NET ambulance transport.

If a beneficiary is being discharged from the hospital and is being admitted to a LTC facility, the LTC facility must arrange for the NET ambulance transport if the beneficiary's condition warrants transport by a NET ambulance.

If the resident is on hospital or home/therapeutic leave and has not been discharged from the LTC facility, the beneficiary is considered a resident of the LTC facility. If the resident goes on hospital or home/therapeutic leave and is discharged from the LTC facility, they are no longer a resident at the LTC facility and the LTC facility is not responsible for any transportation.

Which transports are included in changes to Miss. Admin. Code Title 23, Part 201, Rules, 1.7 and 2.4, effective September 9, 2018?

This Administrative Code change is specific to LTC residents. However, all NET ambulance transports other than transports for LTC residents must be arranged by MTM. MTM determines through prior authorization if the NET transport requires an ambulance. MTM is responsible for reimbursing the NET ambulance providers a negotiated rate. NET ambulance providers are prohibited from billing the Division of Medicaid directly for NET ambulance transports effective September 9, 2018.

The only exception to the prohibition of NET ambulance providers billing the Division of Medicaid directly for NET ambulance transports is for hospital-to-hospital NET ambulance transports.

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Emergency ambulance transports are not affected by this Admin. Code change.

How are NET ambulance transports arranged?

Non-emergency ambulance transportation for Medicaid beneficiaries that are not enrolled in MississippiCAN is provided through the State Plan Non-Emergency Transportation (NET) Broker Program. The current contractor is Medical Transportation Management (MTM). If a beneficiary requires the level of care provided by an ambulance in order to be transported to a medically necessary, Medicaid covered service, MTM should be contacted to arrange the service.

MTM's contact information:

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Jackson, MS 39211
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Effective September 9, 2018, the facility must either contact MTM to arrange the transport or the facility can arrange the transport, pay the transportation provider and place the cost on the facility's cost report.

Effective February 1, 2019, the facility must arrange the transport, pay the transportation provider and place the cost on the facility's cost report.

How will NET ambulance providers be reimbursed for services?

If the beneficiary is not an LTC resident, the NET ambulance provider will be reimbursed according to their contract with the NET Broker. All NET ambulance transports must be prior authorized and scheduled through the NET Broker for beneficiaries that do not reside in an LTC facility.

Effective September 9, 2018, NET ambulance providers will be reimbursed for NET ambulance transports of LTC residents according to their contract with the NET Broker or according to their agreement with the LTC facility arranging the transport.

Effective February 1, 2019, NET ambulance providers will be reimbursed for NET ambulance transports of LTC residents according to their agreement with the LTC facility arranging the NET ambulance transport.

How will LTC facilities be reimbursed for NET ambulance services?

Prior to February 1, 2019, if the LTC facility arranges the NET ambulance transport through the NET Broker, the LTC facility does not receive reimbursement.

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If the LTC facility arranges the NET ambulance transport directly with the ambulance provider, the facility is responsible for paying the ambulance provider directly for the NET ambulance transport and the facility is reimbursed through the LTC facility's cost report.

Can NET ambulance providers bill Medicaid beneficiaries for non-covered services?

All federal and state laws and regulations apply to the billing of Medicaid beneficiaries for non-covered services. See Miss. Admin. Code Title 23, Part 200, Chapter 3 for further information.

Is there a prior authorization process for NET ambulance services?

If a LTC facility is arranging the NET ambulance transport, paying the provider and placing the cost on the cost report, the LTC facility must prior authorize the service. If the NET ambulance transport is being arranged through the NET Broker, the NET Broker must prior authorize the transport.

If the transport is a hospital-to-hospital non-emergency NET transport, the NET ambulance provider must submit the Non-Emergency Ambulance Hospital-to-Hospital Transportation CMN available on the Division of Medicaid's website at <https://medicaid.ms.gov/resources/forms/>.

Will MSCAN follow the same policy for NET ambulance services?

Yes. MSCAN will follow the Division of Medicaid's policy regarding NET ambulance services.