

Chapter 27

Transportation Services

NOTE: Please review the following detail for specific processes and expectations with South Country Health Alliance (South Country). South Country may vary from the MHCP Manual and Minnesota Department of Human Services Guidelines. For additional detail on this chapter, please go to the Minnesota Health Care Programs Provider Manual at [MHCP Provider Manual](#).

Billing Information – Please review the [South Country Provider Manual Chapter 4 Provider Billing](#) for general billing processes and procedures.

Non-Emergency Medical Transportation Services (NEMT):

South Country Health Alliance (South Country) covers non-emergency medical transportation (NEMT) services under the RideConnect program to eligible members who do not have access to their own transportation to get to and/or from the site of a South Country covered medical service. RideConnect provides South Country members with the safest, most appropriate, and cost-effective mode of transportation.

South Country members must contact the South Country Member Services department directly to schedule and coordinate their medical transportation. Transportation providers should not accept medical transportation requests directly from South Country members, the member should be directed to Member Services (RideConnect) for scheduling any medical transportation. Review section *Nursing Facility Members* below for an exception to this process requirement.

South Country Member Services staff will reach out to transportation providers directly to schedule rides. It is important for the transportation providers to be responsive when contacted by South Country staff, so rides may be set up timely and efficiently. If a South Country member does contact a transportation provider, please direct them to call South Country Member Services at 1-866-567-7242. All rides will require a 3-business day notice. In circumstances where the 3-business day notice isn't an option, rides will be scheduled based on provider availability.

For questions, please contact RideConnect at 1-866-567-7242 or email at rideconnect@mnscha.org

Eligible Members

South Country members enrolled in the following programs may be eligible for a ride if they do not have access to their own transportation:

- [Medical Assistance \(Families & Children\);](#)
- [Minnesota Senior Care Plus \(MSC+\);](#)
- [SingleCare \(SNBC\);](#)
- [SharedCare \(SNBC\);](#)
- [AbilityCare \(HMO D-SNP\);](#)
- [SeniorCare Complete \(HMO D-SNP\); and](#)
- [MinnesotaCare*.](#)

*Must be a MinnesotaCare Child or pregnant woman enrollee. MinnesotaCare Child is identified as members under the age of 19 enrolled in the MinnesotaCare program.

Transportation services provided for the Elderly Waiver program is the responsibility of the Elderly Waiver. For member transportation to Elderly Waiver program services, call the member's Care Coordinator located in the member's county of residence.

South Country covers RideConnect services when provided for an eligible member to or from the site of a South Country-covered medical service. While VA services are not South Country - covered services, South Country will work to provide transportation when our veteran members do not receive transportation benefits through the VA and other community resources are not available.

Eligible Providers

All transportation providers (assisted or unassisted) must be certified by MnDOT for Special Transportation Services ("STS"). Provider must submit proof of STS certification to South Country at time of entering Provider Participation Agreement, and proof of renewal on an annual basis. Evidence of renewal must be submitted to South Country within 30 days of the MnDOT certification renewal date. Protected transportation services must meet additional driver and attendant training.

Transportation services are covered when the services are necessary to enable a member to obtain a covered health service.

Verification requirements

If at any point in the year any of the items below change, an update must be sent to South Country immediately.

- Provide updated list of counties in Minnesota that you serve when you add locations, or a new company dispatch office is added.
- Submit at time of change any changes in Current Ownership information and percentage (Complete the Ownership Disclosure form found in Provider Forms on our website).
- Annually, we will forward the Provider Information Form (PIF) to complete the Driver and Employee Roster for anyone who has physical contact with our members and anyone with a 5% or greater ownership stake in the business. Include their Driver's License #, their most current completed NetStudy on new drivers, Certificate of Insurance and Attestation of Training.

Responsible Person

RideConnect services may be provided for the member and, when necessary, one responsible person. A responsible person is an adult or emancipated minor who is needed to make medical decisions, learn about the member's medical care services or is necessary to allow the member to receive a covered medical service.

The responsible person must be transported with the member to receive payment or reimbursement for the RideConnect services. An eligible responsible person includes, but is not limited to:

- Immediate family;
- Other relative;
- Authorized representative; and
- Legal guardian.

Family Members Transported Without the Member

RideConnect covers transportation of responsible persons and one or more siblings from a single location separately from the member when necessary to enable family therapy services as established in the member's plan of care to be completed. For example, the responsible person, sibling or spouse of a child or parent living in a residential facility may be required to attend therapy sessions or complete therapy services. Such cases do not require the member receiving care to be included in the transport. Use the member's South Country ID number when billing.

Transportation of an Unaccompanied Minor

Transports of minors aged 18 and under require a signed parental consent for transport if the parent or legal guardian is unable to accompany the minor. The Transportation Provider should keep the signed Minor Parental Authorization form in their records. The signed form is valid for one (1) year. You will find the Minor Parental Authorization [Consent Form](#) in the [RideConnect](#) section or under the Provider Forms area under Transportation on the South Country website.

Service Animals

Under the Americans with Disabilities Act (ADA), a service animal is any dog that is individually trained to do work or perform tasks for the benefit of a person with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability. Other species of animals whether wild or domestic, trained or untrained, are not service animals for the purpose of this definition. In addition to dogs, the ADA allows miniature horses to be service animals if they have been individually trained to do work or perform tasks for the benefit of the person with a disability.

Inclement Weather

Providers may decline transporting members when they feel that it is unsafe to travel due to inclement weather. The safety of the member is top priority and should be considered when deciding whether to transport or to provide a specific level of service during times of inclement weather. Special consideration must be given to urgent requests such as but is not limited to dialysis, electro-current therapy, chemotherapy, and radiation.

Providers must make every effort to complete all rendered transportation services and return members they took to an appointment before inclement weather limits their ability to transport the member safely. The provider must notify the member(s) and South Country RideConnect immediately if they are unable to complete transportation services due to inclement weather.

Pharmacy Transports

South Country allows pharmacy transports when transport is the ONLY option available based on pharmacy requirements or absence of other means to obtain the prescription(s). All means to obtain pharmacy items must be used and included, but are not limited to:

- Obtaining the prescription from the out-patient pharmacy at the medical facility or office location;
- Using mail, delivery, or courier service;
- Obtaining prescription(s) on return to residence or work from the medical appointment (additional mileage is reimbursable for this purpose); and
- Obtaining prescription(s) while other activities of daily living are completed.

If pharmacy only transport is required:

- All prescriptions must be coordinated for pick-up on the same date.

- Multiple trips per week or per month are not allowed.

Reporting No Shows

A “no show” is a scheduled ride that has not been cancelled and the driver shows up at the scheduled pick up location and the rider is not there. Providers must report no shows, whether the member was contacted prior to pick up or you let the member know the driver was on the way to pick them up. You should email the member's name, ID number and date of the no show to: rideconnect@mnscha.org. There is no reimbursement for mileage when a no show is reported.

All Protected Health Information (PHI) must be sent through **SECURE EMAIL**.

Unloaded Miles - For Contracted Providers only

Providers can only bill unloaded miles to pick up a member (place of origin). Reimbursement is allowed for unloaded miles to **pick up** a member on a round trip or one-way trip only. Unloaded miles going to pick up the member from the medical facility on a round trip or after you drop the member off at his residence for your return trip back are not reimbursable and should not be submitted. The only time that would be allowed is if it was a one-way trip, where you only picked up the member at the medical facility location and it was not part of a round trip. [See Examples](#).

Wait Time - For Contracted Providers only

Wait time is time the driver spends on a round trip waiting on a member after the member has been dropped off at the medical facility until the member is picked up for the return trip. Wait time cannot be billed if the driver leaves after the member is dropped off at the medical facility and the driver comes back to pick up the member as part of a round trip. Reimbursement is allowed for time waiting on the member after the first 60 minutes with a limit of 2 units (1 unit = 30 minutes). Providers should bill all wait time units and South Country's claim system will calculate reimbursement.

Rides Provided on Nights, Weekends or Holidays

Providers who receive requests for rides from a member, a hospital discharge planner, or a nursing home during nights/weekends/Holidays and the eligibility record does not indicate the member is approved for Assisted and Unassisted Transportation, may provide the transportation. They **must, however**, communicate the information below to South Country the next business day.

Fax to Member Services at (507) 431-6328 or secure email: rideconnect@mnscha.org.

- a. Member name and South Country member ID number.
- b. Date the ride was provided.

South Country reserves the right to deny the claim if notification from provider is not proper and/or timely.

Out-of-state medical services requiring transportation will be denied unless authorized by South Country Health Alliance.

Non-Covered Services

The services listed below are not covered by South Country as medical transportation services. These services are not reimbursable. This list is not all inclusive:

- Transportation of a member to a non-covered South Country services (for example, grocery store, health club, church, synagogue) and those services excluded from transportation payment

- Transportation of a member from his or her residence to or from a Day Training and Habilitation (DT&H) location or Adult Day Program;
- Transportation to an additional stop to pick up a parent, guardian, PCA or additional passenger to accompany the client;
- Transportation to a destination that is different from the originally schedule drop off. The drop-off destination cannot be changed after the trip is scheduled unless the transportation coordinator approves the change. The “transportation coordinator” could be the county, tribe, or any entity hired to coordinate the RideConnect on their behalf;
- Extra attendant charges for PCAs accompanying members for who they are providing services;
- Use of a higher level of transportation that is not medically necessary to meet the needs of the member;
- Transportation to Elderly Waiver program services;
- Transportation to the emergency room, unless it is for a scheduled appointment or the emergency room is the entrance of an urgent care clinic; and
- Transportation and ancillary services for hospital visits that are not necessary for making medical decisions.

Excluded Costs Related to Transportation

The costs listed below are excluded by South Country as medical transportation costs. These services are not reimbursable by South Country and cannot be billed to the member:

- Transportation of a member to a hospital or other site of health services for detention ordered by a court or law enforcement agency except when ambulance service is medically necessary;
- Transportation of a member to a facility for alcohol detoxification that is not medically necessary;
- Additional charges for luggage, stair carry of the member, and other airport, bus or railroad terminal services;
- Airport surcharge; and
- Federal or State excise or sales taxes on air ambulance service.

Documentation Required

Trip documentation must be consistent with Minnesota Statutes, 256B.0625, Subd. 17b requirements. Transportation providers must keep trip documentation/records for 10 years from the date of services and it must be in English and neat, concise and legible according to the standard of a reasonable person. If a provider is billing for activity on a claim, their documentation must support that billing. This would include:

- Member name and South Country ID number must be on each page of the record;
- The date on which the entry was made;
- The date/time of pick-up or return with a.m. and p.m. designations;
- Address, or the description if the address is not available, of the member’s pick-up location and the address of the member’s South Country provider destination;

- Vehicle license plate number used to transport the member and driver identification with printed last name, first name and middle initial;
- Provider's National Provider Number (NPI) or Unique Minnesota Provider Identifier (UMPI) number;
- Provider's must document all activity connected to a no show of a member; and
- Completed Assisted Transportation trip log to include mode of transportation in which the service is provided:
 - Mode 3 Unassisted transport.
 - Mode 4 Assisted transport.
 - Mode 5 Wheelchair; lift-equipped, ramp transport.
 - Mode 6 Protected transport.
 - Mode 7 Stretcher transport.
 - Other – Describe Transportation.
- Document mileage by identifying the electronic source used to calculate driving directions and mileage or the odometer readings for each leg of the trip for Non-Emergency Medical Transportation. Show and label all loaded and unloaded miles. Clearly identify Wait Time if that occurred and met the guidelines to bill. Documentation for unloaded miles must identify the starting location of the driver or odometer readings for the unloaded miles being billed to pick up the member.
- Wait Time if that occurred and met the guidelines to bill. Documentation must include the drop off time and pick up time and clearly identify the number of minutes that the driver waited on the trip log.
- Name of extra attendant when extra attendant is used to provide Mode 7 Stretcher transportation services
- For non-ambulance providers, when applicable non-emergency medical transportation providers should receive a signature from the health care provider serving the member (public transportation is excluded from this requirement)
- The signature of the driver attesting to the following: "I certify that I have accurately reported in this record the trip miles I actually drove and the dates and times I actually drove them. I understand that misreporting the miles driven and hours worked is fraud for which I could face criminal prosecution or civil proceedings."
- The signature of the member or authorized party attesting to the following: "I certify that I received the reported transportation service.", or the signature of the provider of medical services certifying that the member was delivered to the provider.

Billing Non-Emergency Medical Transportation Claims

Use the electronic 837P format.

- Bill exact direct mileage, rounded only to the nearest mile;
- Do not use zone or region mileage calculations; and
- Use commercially available software or Internet-based applications to determine the most direct mileage.

Use appropriate HCPCS codes:

- Use the HCPCS code that describes the services rendered.

- Do not report non-covered miles.
- Use HCPCS modifiers to:
 - Indicate both point of origin and destination for pick up and/or return trips;
 - When submitting Unloaded mileage, place the TP Modifier in the 2nd position, after the origin/destination modifier;
 - Clarify two trips on the same date. If the modifiers are the same, combine the HCPCS codes; and
 - Report each mileage trip on a single claim line.

Place of service code – 99

Diagnosis Codes

A valid ICD-10 diagnosis code must be present on the claim.

Here are recommended ICD-10 codes to use for the following services:

- R68.89 Other general signs and symptoms;
- R41.9 Unspecified symptoms and signs involving cognitive functions;
- Z02.89 Encounter for other administrative exam; and
- Z02.9 Encounter for administrative examinations, unspecified.

HCPCS Origin/Destination Codes

(The first position indicates the origin and the second position indicates the destination. Origin/Destination Modifier Codes are in addition to any modifiers identified in the Assisted Transportation and Unassisted Transportation Procedure Codes and Modifiers section of this chapter):

Code Explanation

- D - Diagnostic or therapeutic site other than ‘P’ or ‘H’ when these are used as origin codes.
- G - Hospital based ESRD facility.
- H - Hospital.
- I - Site of transfer (e.g., airport or helicopter pad) between modes of ambulance transport.
- J - Freestanding ESRD facility.
- N - Skilled nursing facility (SNF).
- P - Physician’s office.
- QM - Institutional based providers only. Ambulance service provided under arrangement by a provider of services.
- QN - Institutional based providers only. Ambulance service furnished directly by a provider of services.
- R - Residence.
- S - Scene of accident or acute event.
- X - Intermediate stop at physician’s office en route to the hospital (destination code only).

Code Explanation

76 - Repeat procedure by same provider.

77 - Repeat procedure by another provider.

[Billing Examples including Unloaded Miles](#)

Fraud and Abuse

South Country is committed to identifying, preventing, correcting, and reporting fraud, waste, and abuse. Providers are each responsible for ensuring that the requirements below are followed:

- Providers should not submit claims for any of the above non-covered services;
- Providers and drivers cannot offer or accept bribery, kickbacks, payments, or anything of value from any other driver, provider, South Country employee, or member;
- Providers and drivers should notify South Country immediately of suspected fraudulent or abusive activity by a member, driver, South Country employee, or provider;
- Providers and drivers cannot direct South Country members to a particular provider;
- Providers and driver should notify South Country immediately if any individual working for the transportation company is terminated for fraudulent or abusive practices; and
- Providers must check each driver's status on each of the following databases at the time of hire and monthly thereafter to ensure the person is not excluded from participation in a federal or state health care program. Provider shall notify South Country immediately upon learning that any such person is under investigation or has been excluded from federal or state health care program participation.
 - Office of Inspector General (OIG) Excluded Individuals/Entities (LEIE)
<https://exclusions.oig.hhs.gov/>;
 - Search for providers in the System for Award Management (SAM)
<https://www.sam.gov/SAM/>; and
 - Minnesota Health Care Programs (MHCP)
http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=DHS-295094.

To report suspected fraud or abuse:

- Submit a report to compliance@mnscha.org;
- Submit a report to South Country at 1-866-722-7770 (toll free); and
- Submit an anonymous report to "Report-it" at 1-877-778-5463 or on-line at www.reportit.net (login is South Country, password is Owatonna).

For additional information, please view Provider Manual Chapter 8: Fraud and Abuse.

Audit

South Country will conduct periodic audits. Purpose of the audit:

- Determine the appropriate level of need assessment criteria has been met;
- Required documentation (listed above) is available and on file;
- If it is determined that the level of need criteria has not been established, provider will be subject to payment recoupment; and

- To determine the need for additional monitoring or authorization requirements.

Unassisted Transportation Service

Unassisted transportation is non-emergency medical transportation provided by a volunteer driver, bus, taxicab, other commercial carrier or by private automobile, contract for service or direct mileage reimbursement to the member's driver. South Country administers Unassisted Transportation Service for their eligible members. No prior authorization is needed for this service.

Unassisted Transportation Procedure Codes and Modifiers

Origin/Destination modifiers must be included with all pick-up charges and mileage claim submissions.

CPT /HCPCs plus Modifiers	Definition	Guidelines
A0100	Taxi or common carrier or equivalent; encounter/trip/pick up charge	You are only able to bill for one pick-up charge per encounter/trip
A0080	Volunteer Driver, Loaded Mileage, per mile	Transportation provider allowed to bill a 5-mile minimum when travel is less than 5 miles
S0215	Taxi or common carrier equivalent; loaded mileage, per mile	Transportation provider allowed to bill a 5-mile minimum when travel is less than 5 miles
*A0100 TP Modifier Required – Place in the 2nd Position	Taxi or common carrier equivalent; Unloaded mileage to pick up the member, per mile See Examples	Provider must bill all <u>unloaded</u> mileage to <u>pick up the member</u> (place of origin) only. NOTE - unloaded miles on a return trip after the member is dropped off are not billable.
*A0100 52 Modifier Required	No Show See Examples	No reimbursement for mileage
*T2007	Wait Time: Paid after the first 60 minutes (1 unit = 30 minutes with a limit of 2 units)	Effective 1/1/2020 Reimbursement is allowed for time waiting on the member after the first 60 minutes with a limit of 2 units. Provider must bill all wait time units. If wait time goes beyond 16 minutes go to the next unit for billing.
*A0100 TU Modifier Required – Place in the First Position	After hours pick up: Applies to hours between 12:00 a.m. and 7:00 a.m.	You are only able to bill for one pick-up charge per encounter/trip

* Non-contracted providers are not reimbursed for unloaded mileage, no shows, wait time, or additionally for afterhours pick up.

Assisted Transportation Services

Assisted Transportation Services: Non-emergency medical transportation of a member who, because of physical or mental impairment, is unable to safely use unassisted transportation requiring the transportation driver to provide direct assistance to the member and does not require ambulance service. “Physical or mental impairment” means a physiological disorder, physical condition, or mental disorder that prohibits access to, or safe use of, unassisted transportation.

Assisted Transportation is a higher level of non-emergency medical transportation provided for eligible South Country members who, due to physical or mental condition, cannot safely use unassisted transportation services. Assisted Transportation includes the following services:

- Ambulatory;
- Wheelchair;
- Stretcher; and
- Protected.

Authorization is required for South Country members to receive Assisted Transportation. South Country’s Health Services department performs the level of need (LON) assessments and certify the member for the appropriate level of Assisted NEMT mode of transport. Members requiring Assisted Transportation or renewal of Assisted Transportation authorization must contact South Country Member Services Department at **1-866-567-7242** to complete the LON assessment.

The assisted transportation provider’s driver must provide driver-assisted services. Driver-assisted services include:

- Directly assisting the member to and from the member’s residence/pick up location to exit or enter;
- Directly assisting the member to or from the vehicle including assistance in entering or exiting the vehicle;
- Directly assisting the member with fastening the seat belts (all vehicles must be equipped with the appropriate seat restraints in order to meet safety standards). Infant and adolescent car seats must also be fastened appropriately with seat restraints;
- Assistance in passenger securement or in securing of wheelchairs or stretchers in the vehicle;
- Directly assisting the member to or from the member’s medical facility to enter or exit; and
- Directly assisting the member inside of the medical facility to or from the member’s appropriate medical appointment desk.

A signature must be obtained by the driver at the medical facility indicating a scheduled medical appointment and that the member was taken to the appropriate medical appointment desk.

All Assisted Transportation vehicles must display identification on both sides of the vehicle, including:

- Provider’s business name;
- Provider’s United States Department of Transportation (USDOT) number; and
- If a USDOT number is not obtained, use the MN-DOT STS certificate number.

The name and numbers must be:

- Marked in a color that sharply contrasts with the background;
- Readily legible during daylight hours from a distance of 50-feet while the vehicle is stationary; and
- Maintained in a manner that retains the legibility of the markings. Marking may be removable devices if they meet the identification and legibility requirements.

Eligible Members

To be eligible for Assisted Transportation, a member must be impaired physically or mentally in a manner that keeps him/her from safely accessing and using a bus, taxicab, private automobile or other unassisted transportation.

Authorization is required for South Country members to receive Assisted Transportation. South Country's Health Services department performs the level of need (LON) assessments. Members requiring Assisted Transportation or renewal of Assisted Transportation authorization must contact South Country Member Services Department at **1-866-567-7242** to complete the LON assessment.

Providers can verify eligibility under the eligibility and claims tab and Assisted Transportation level of authorization under the authorization tab for a South Country member using the South Country Provider Portal, at <https://provider.mnscha.org/scha.provider.aspx>. "New Authorization requests can take up to 72 hours to populate in the Provider Portal" will now appear on the Ride Request form. This does NOT guarantee payment.

Level of Need Assessment

The member must require a high level of direct driver assistance, including inside the pick-up and destination location and meet the following criteria:

- Is eligible for Medical Assistance (MA), *OR*
- Is eligible for State-only funded MA benefits due to residing in an Institute of Mental Disease (IMD), *OR*
- Is a MinnesotaCare Child enrollee under the age of 19, *OR*
- Is eligible for Refugee Medical Assistance (RMA).

AND

- Needs assistance from the driver to get inside the member's residence or pick-up location to the vehicle; *AND/OR*
- Needs assistance getting into and out of the vehicle; *AND/OR*
- Needs assistance fastening seat belts or securing wheelchairs or stretchers in the vehicle; *AND/OR*
- Needs assistance getting into and out of the member's medical facility; *AND/OR*
- Needs assistance getting to and from the member's appropriate medical appointment desk inside the medical facility; *AND/OR*
- Needs other high level of direct driver assistance as described by member and provider

Exceptions include members residing in nursing facilities qualify for Assisted Transportation services without LON authorization. Other conditions including Electroconvulsive Therapy (ECT) treatment, dialysis, outpatient procedures with sedation, or if a medical service is urgent as requested by a medical provider qualify for Assisted Transportation Services without LON authorization.

Nursing Facility Members

Members residing in, being admitted to, or being discharged from a licensed nursing facility automatically qualify for the most appropriate level of transportation for all trips. These members do not need a LON assessment authorization. The local county human service agency updates the member's living arrangement code and must indicate that the member resides in a nursing facility. The member's living arrangement must be one of the following for the provider to receive reimbursement for Assisted NEMT transports:

- 41 – NFI (Nursing Facility I) Medicare certified.
- 42 – NFII (Nursing Facility II) Non-Medicare certified.
- 44 – Short Term Stay NFI.
- 45 – Short Term Stay NFII.

When scheduling rides for members residing in or being admitted to or from a nursing facility may be scheduled directly with any contracted NEMT provider. RideConnect does not have to be contacted for Ambulatory or Wheelchair transports. All other transportation guidelines must be followed. However, stretcher transport must be scheduled through RideConnect.

Limited Coverage

- **Stretcher Services:**
The use of a stretcher is a covered service for assisted transportation when the medical need of the member requires a higher level of special medical services. Documentation of the need for the stretcher services must be kept on file by the provider.
- **Wheelchair Codes:**
A member who needs a wheelchair-accessible vehicle is defined as a Medical Assistance eligible member with severe permanent or temporary mobility impairments who:
 - Is unable to ambulate without a wheelchair.
 - Whose condition requires the use of a vehicle lift or ramp as in a wheelchair-accessible van.

A wheelchair-accessible van must operate under the authority and in compliance with the official regulations of MN/DOT and be registered as such by MN/DOT.

Assisted Transportation Driver's License Requirement

The Driver License number of the person who transports the member is required on the 837P claim. On Codes T2003, T2005 and A0130 the Loop 2400 under SV101-7, the description field must include the driver's license number, or the claim will reject/deny. The number must be a valid driver license number with no spaces or dashes. Assisted Transportation Procedures Codes and Modifiers

Origin/Destination modifiers must be included with all pick-up charges and mileage claim submissions.

Assisted Transportation Procedure Codes and Modifiers

CPT/HCPCs plus Modifiers	Definition	Guidelines
AMBULATORY		
T2003	Ambulatory: Non-Emergency Transportation; Encounter/trip/pick up charge	You are only able to bill for one pick-up charge per encounter/trip
S0215	Ambulatory Mileage: Non-Emergency Transportation; mileage, per mile	Transportation provider allowed to bill a 5-mile minimum when travel is less than 5 miles
*T2003 TP Modifier Required – Place in the 2nd position	Ambulatory Mileage: Non-Emergency Transportation; Unloaded mileage to pick up the member, per mile See Examples	Provider must bill all unloaded mileage to pick up the member (place of origin) only. NOTE - unloaded miles on a return trip after the member has been dropped off are not billable.
*T2003 52 Modifier Required	Ambulatory No Show See Examples	No reimbursement for mileage
STRETCHER		
T2005	Stretcher: Non-Emergency Transportation; non-ambulatory stretcher van encounter/trip/pick up charge	You are only able to bill for one pick-up charge per encounter/trip
T2049	Stretcher Mileage: Non-Emergency Transportation; non-ambulatory stretcher van mileage, per mile	Transportation provider allowed to bill a 5-mile minimum when travel is less than 5 miles
*T2049 TP Modifier Required – Place in the 2nd position	Stretcher Mileage: Non-Emergency Transportation; non-ambulatory stretcher van Unloaded mileage to pick up the member, per mile See Examples	Provider must bill all unloaded mileage to pick up the member (place of origin) only. NOTE - unloaded miles on a return trip after the member has been dropped off are not billable.
*T2049 52 Modifier Required	Stretcher No Show See Examples	No reimbursement for mileage
WHEELCHAIR		
A0130	Wheelchair: Non-Emergency Transportation; wheelchair van; encounter/trip/pick up charge	You are only able to bill for one pick-up charge per encounter/trip

CPT/HCPCs plus Modifiers	Definition	Guidelines
S0209	Wheelchair Mileage: Non-Emergency Transportation; wheelchair van, mileage, per mile	Transportation provider allowed to bill a 5-mile minimum when travel is less than 5 miles
*S0209 TP Modifier Required – Place in the 2nd position	Wheelchair Mileage: Non-Emergency Transportation; wheelchair van, Unloaded mileage to pick up the member, per mile See Examples	Provider must bill all unloaded mileage to pick up the member (place of origin) only. NOTE - unloaded miles on a return trip after the member has been dropped off are not billable.
*S0209 52 Modifier Required	Wheelchair No Show See Examples	No reimbursement for mileage
PROTECTED		
T2003 UA Modifier Required	Protected: Non-Emergency Transportation; Encounter/trip/pick up charge	You are only able to bill for one pick-up charge per encounter/trip
S0215 UA Modifier Required	Protected: Non-Emergency Transportation; mileage, per mile	Transportation provider allowed to bill a 5-mile minimum when travel is less than 5 miles
*S0215 TP Modifier Required – Place in the 2nd position	Protected: Non-Emergency Transportation; Unloaded mileage to pick up the member, per mile See Examples	Provider must bill all <u>unloaded</u> mileage to <u>pick up the member</u> (place of origin) only. NOTE - unloaded miles on a return trip after the member has been dropped off are not billable.
*T2003 52 Modifier Required	Protected: No Show	No reimbursement for mileage
MISCELLANEOUS		
*T2007	Wait Time: Paid after the first 60 minutes (1 unit = 30 minutes with a limit of 2 units.)	Effective 1/1/2020 Reimbursement is allowed for time waiting on the member after the first 60 minutes with a limit of 2 units. Provider must bill all wait time units. If wait time goes beyond 16 minutes go to the next unit for billing.

CPT/HCPCs plus Modifiers	Definition	Guidelines
<p>*Ambulatory T2003 TU Modifier Required - Place in the First Position</p> <p>*Stretcher T2005 TU Modifier Required - Place in the First Position</p> <p>*Wheelchair A0130 TU Modifier Required - Place in the First Position</p>	After hours pick up: Applies to hours between 12:00 a.m. and 7:00 a.m.	You are only able to bill for one pick-up charge per encounter/trip
T2001	Extra Attendant: Non-Emergency Transportation; patient attendant/escort	Only reimbursable with Stretcher transportation mode if Member requires an extra attendant

* Non-contracted providers are not reimbursed for unloaded mileage, no shows, wait time, or additionally for afterhours pick up.

AMBULANCE TRANSPORTATION SERVICES

Ambulance services is the transport of a member whose medical condition or diagnosis requires medically necessary services before and during transport. This includes emergency and nonemergency ambulance services.

Eligible Providers

Eligible providers must be licensed as a transportation service provider for advanced life support, basic life support or scheduled life support.

Eligible Members

Emergency Ambulance Transportation: All South Country members.

Non-Emergency Ambulance Transportation: South Country members enrolled in the following programs may be eligible for a ride if they do not have access to their own transportation:

- [Medical Assistance \(Families & Children\);](#)
- [Minnesota Senior Care Plus \(MSC+\);](#)
- [SingleCare \(SNBC\);](#)
- [SharedCare \(SNBC\);](#)
- [AbilityCare \(HMO D-SNP\);](#)
- [SeniorCare Complete \(HMO D-SNP\); and](#)
- [MinnesotaCare.](#)

Covered Services

South Country covers ambulance services when the member's transportation is in response to:

- A 911 emergency call;
- A police or fire department call;
- An emergency call received by the provider;

- Between two facilities, only when the first facility discharges the member to another facility because the first facility could not provide the level of care required by the member;
- Medically necessary and documented as defined in [Prehospital Care Data; and](#)
- A transfer of an infant from an NICU level II or III nursery to a hospital near the family's home, if the distance from the NICU facility to the family home is greater than 40 miles.

Transportation is covered according to the following if a member is pronounced dead by a legally authorized person:

- After transportation is called, but before it arrives, service to the point of pickup is covered;
- En route, or dead on arrival, the transportation is covered; and
- Before transportation is called, transportation is not covered.

South Country covers ambulance no-load transportation only if the ambulance transportation staff provided medically necessary treatment to the member at the pickup point.

Air Ambulance

South Country covers air ambulance when the following criteria are met:

- The member has a potentially life-threatening condition that does not permit the use of another form of ambulance transportation;
- The referring facility does not have adequate facilities to provide the medical services needed by the member; and
- Transport must be to the nearest appropriate facility capable of providing the level of care required by the member.

Air Ambulance requires a Service Authorization if originating or final destination is an out-of-state non-contracted provider.

If medical necessity is not proven and proper documentation does not exist, air ambulance transportation for a member not having a potentially life-threatening condition will be denied and must be resubmitted as ground ambulance transportation.

Ground Ambulance

South Country covers ground ambulance when the following criteria are met:

- The member has a potentially life-threatening condition that does not permit the use of another form of transportation;
- Service is medically necessary;
- The referring facility does not have adequate facilities to provide the medical services needed by the member; and
- Transport must be to the nearest appropriate facility by the most direct route.

Submit ground ambulance claims with the "Origin" and "Destination" indicators (modifier) to indicate the transport is from and to any of the following:

- Hospitals (HH);
- Skilled nursing facilities (NN);
- Residential, domiciliary or custodial facilities (EE);

- Diagnostic or therapeutic sites (DD);
- Hospital based ESRD facilities (GG);
- Freestanding ESRD facilities (JJ), also GJ and JG; and
- Site of transfer to site of transfer (II).

Also note the following when billing for ground ambulance transport:

- Submit procedure code A0998 (ambulance response and treatment, no transport) without a modifier.
- Use the appropriate ambulance transport service code to indicate the level of ambulance transport service provided.