

STATE OF LOUISIANA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE OR SERVICES LISTED IN SECTION 1905-(A) OF THE ACT THAT ARE INCLUDED IN THE PROGRAM UNDER THE PLAN ARE DESCRIBED AS FOLLOWS:

CITATION                      Medical and Remedial Care and Services  
42 CFR 440.170              Item 24.a. (cont'd)

**B.      Non-Emergency Medical Transportation**

~~General Provisions—Reimbursement for Services~~Methodology

1. Non-Emergency Medical Transportation (NEMT)

Effective for dates of service on or after October 1, 2014 reimbursement for transportation services shall be based on the published fee schedule ([www.lamedicaid.com](http://www.lamedicaid.com)) and made in accordance with rules and regulations issued by the Louisiana Department of Health (LDH).

LDH reimburses the ~~non-emergency non-ambulance medical (NEMT )~~ transportation services at base rate plus mileage per leg. The Medicaid fee schedule establishes the minimum reimbursement rates for services rendered to beneficiaries. The reimbursement rate shall be no less than the published Medicaid FFS rate in effect on the date of service, unless mutually agreed upon by the transportation broker and the transportation provider in the provider agreement.

The transportation broker may not dispatch trips to out-of-region providers, unless there are no willing and available providers in the domicile region of the beneficiary.

~~1.—Non-emergency non-ambulance  
a.—Individually scheduled trips~~

~~Reimbursement shall be based on mileage according to the published fee schedule.~~ An additional per-mile rate may be included when the Department determines that a NEMT provider requires compensation for travelling far outside of their service area. ~~This~~The additional payment shall only be made when there are no willing and available NEMT providers to complete the requested transportation services in the beneficiary's ~~service area~~domicile region.

~~b.—Recurring Trips~~

~~Payment for non-emergency transportation to regular, predictable, recurring medical services such as hemodialysis, chemotherapy, or rehabilitation therapy, may be based on capitated monthly rates when determined appropriate by the Department.~~

Elevated Level of Care

Reimbursement for NEMT elevated level of care (ELOC) claims shall be paid only when accompanied by the completed prior approval form documenting the- medical necessity for the enhanced level of care.

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2. Non-Emergency Ambulance Transportation

Non-emergency ambulance transportation (NEAT) services are reimbursed at base rate plus mileage ~~as shown on the published fee schedule~~ per leg, minus the amount paid by any liable third-party. The Medicaid fee schedule establishes the minimum reimbursement rates for services rendered to beneficiaries. The reimbursement rate shall be no less than the published Medicaid FFS rate in effect on the date of service, unless mutually agreed upon by the transportation broker and the transportation provider in the provider agreement.

Medically necessary non-emergency, scheduled, repetitive ambulance services are covered if the ambulance provider or supplier, before furnishing the service to the beneficiary, obtains a Certification of Ambulance Transportation (CAT) form dated no earlier than 180 days before the date the service is furnished.

The parish of trip origin is used to assign each encounter as rural/super-rural or non-rural.

Mileage shall be reimbursed in accordance with the type of service indicated by the licensed medical professional on the CAT form.

Medically necessary, scheduled, repetitive NEAT services are reimbursed if, before furnishing the service to the beneficiary, the ambulance provider or supplier, obtains a CAT form dated no earlier than 180 days before the date the service is provided and a clean claim is submitted.

Reimbursement will not be made for any additional person(s) who must accompany the beneficiary to the healthcare facility.

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3. ~~Aircraft and Buses~~ Commercial Aircraft and Public Transit

Non-emergency medical transportation provided by commercial aircraft and buses are reimbursed at their usual and customary rate, subject to maximum limitations based on historical costs for such trips.

Commercial airfare shall be reimbursed for the beneficiary and a maximum of one attendant at the lowest, refundable, coach/economy class fare. Upgrades and additional costs shall not be reimbursed.

~~4. Public Transit~~

~~Effective for dates of service on or after October 1, 2014 reimbursement for non-emergency medical transportation services rendered by public transit providers are reimbursed according to the published fee schedule (-).~~

**C. Auditing**

The Department shall conduct regular audits of service authorization, reimbursement, service delivery and documentation in order to ensure compliance with published rules and regulations. Lack of compliance on the part of transportation providers shall be addressed as described in the provider policy manual. Lack of compliance on the part of Department contractors shall be met with corrective action as described in contract documents.