

**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE ARIZONA**

METHODS OF PROVIDING TRANSPORTATION

Transportation Services

The State attests that all minimum transportation requirements outlined in 1902(a)(87) of the Social Security Act are met.

Transportation to an emergency destination for eligible persons is a covered service if medically necessary when the eligible person demonstrates life threatening circumstances according to the prudent layperson standard. Transportation to an alternative destination for eligible persons by an emergency transportation provider is a covered service only: (1) when the ambulance provider is already at the site of the reported emergency, (2) the ambulance provider determines that the member requires medically necessary treatment, but an alternative destination is appropriate. Payment is limited to the cost of transporting eligible persons in a ground ambulance to the nearest and most appropriate destination only when there is no other appropriate transportation available. Transportation to an alternative destination for eligible persons is only permitted by ground ambulance.

If the eligible person is enrolled with a Health Plan or Program Contractor, the ground or air ambulance provider shall notify the Health Plan or Program Contractor within 10 (ten) working days from the date the emergency transportation is provided. Failure to notify the contractor shall be cause for denial or non-payment of the claim.

Medically Necessary Transportation

Whenever free transportation services are unavailable and an eligible person is unable to arrange or pay for transportation to a service site or location to receive a covered AHCCCS service, nonemergency medical transportation is provided. The provider shall obtain prior authorization when the transportation is more than 100 miles.

If the eligible person is enrolled with a Health Plan or Program Contractor, the Health Plan or Program Contractor has the discretion to require prior authorization. However, all claims for medically necessary transportation are subject to review for medical necessity by the Health Plan or Program Contractor.

Individuals enrolled in managed care receive medically necessary transportation by contacting the health plan or the subcontracted transportation provider. The health plan or subcontractor is responsible for determining eligibility for medically necessary transportation, appropriateness of the request, and the most appropriate and least costly mode of transportation. Individuals enrolled in FFS request transportation by contacting the AHCCCS Administration.

Air Ambulance Services

Air ambulance services are covered for eligible persons only if the request is initiated by an emergency response unit, a law enforcement official, a hospital, a physician or clinic medical staff; and

- (1) the point of pickup is inaccessible by ground ambulance; or
- (2) great distances or other obstacles are involved in getting emergency services to the eligible person and transporting that person to the nearest appropriate hospital or other provider; or
- (3) the medical condition of the eligible person requires ambulance service by a method faster than a ground ambulance service is able to provide.

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Meals, Lodging and Attendant Services

Expenses for meals, lodging and transportation for an eligible person are covered while en route to, or returning from, a health care service site which is outside of the eligible person's service area or county of residence, when the visit has been prior authorized.

Meals, lodging and transportation expenses of an attendant accompanying an eligible person out of the service area are covered services if the services of the attendant are ordered, in writing, by the primary care physician. The attendant may be a member of the eligible person's family household. The salary of an attendant is covered only when the attendant is not a member of the eligible person's family household.

Payment for meals, lodging, transportation and salary of an attendant (not to exceed federal minimum wage) is allowed only when the eligible person requires services which are not available in the service area. If the eligible person is admitted to an inpatient facility, the attendant's meals, lodging and salary are covered only when accompanying the eligible person en route to and returning from the facility.

Limitations

Family household members, friends and neighbors may be reimbursed for providing transportation services for the eligible person only if the services are authorized and free transportation or public transportation is unavailable.

A charitable organization, which routinely provides free transportation services to ambulatory or wheelchair-bound persons shall not charge or seek reimbursement from the Administration or contractors for the provision of transportation services to eligible persons, unless they have entered into subcontracting agreements with AHCCCS contractors for medically necessary transportation services.

Prior Authorization

A provider shall obtain prior authorization from the Administration for transportation services provided for a FFS member for the following:

1. Medically necessary nonemergency transportation services not originated through a 911 call or other emergency response system when the distance traveled exceeds 100 miles (whether one way or round trip); and
2. All meals, lodging, and services of an escort accompanying the eligible person under this Section.

A provider shall obtain prior authorization from Contractors for eligible persons enrolled in managed care in accordance with the Contractors' requirements.

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