Nursing Homes and Non-emergency Transportation
Frequently Asked Questions

1. **Question:** In the past, the county has sometimes provided non-emergency transportation for nursing home residents and billed Medicaid for the transportation services. Can counties continue to provide transportation for nursing home residents and bill ForwardHealth?

   **Answer:** Counties cannot bill ForwardHealth for transportation unless the county is certified with ForwardHealth as an SMV provider. If they are certified, they can bill just like any other SMV. The nursing home may contract with the county to provide these rides. The nursing home would then bill these rides to Medicaid as an ancillary fee-for-service charge.

2. **Question:** Are nursing homes responsible to make the arrangements with Logisticare to admit a new resident from the hospital?

   **Answer:** Logisticare is responsible for NEMT to a nursing home for initial admission and discharges from nursing home to non-institutional setting such as the member’s home. Hospitals and nursing homes should continue to work together regarding a member’s transportation needs.

3. **Question:** Are hospital case managers & social workers aware of the fact that nursing homes will need to arrange for transportation for a resident's readmission to a Skilled Nursing Facility?

   **Answer:** This is not a new situation. Hospitals and nursing homes should continue to work together regarding transportation between the two entities in the same manner prior to the new NEMT initiative. The only change to this process involves contacting Logisticare under the following conditions:

   Logisticare is responsible to transport a member to a nursing home if the member has not already been admitted. When discharged, Logisticare is responsible to transport a member from the nursing home to a non-institutional setting.

4. **Question:** When a nursing home resident is hospitalized and ready to return to the NH, who arranges the transport back to the NH and who pays for the transport?

   **Answer:** Nursing homes will arrange the transportation and use one of the methods listed in the Non-emergency Medical Transportation Nursing Home Options and Methods for Reimbursement handout linked to this training.

5. **Question:** Who is responsible for transportation if an MA recipient goes from one nursing home, NH #1, to the hospital and then to another nursing home, NH#2?

   **Answer:** Under PASARR this is defined as an “interfacility transfer” and it would be the responsibility of NH #2 and the hospital to arrange for a safe and orderly transfer to NH#2. The NH can bill ForwardHealth for that transport or a “certified” SMV could bill ForwardHealth.

6. **Question:** If a nursing home resident is discharged to a hospital from a nursing home, and goes past the 15 day bedhold, who is responsible for the transportation back to the nursing home?

   **Answer:** This scenario does not meet the definition of a discharge by PASARR, Preadmission Screen and Resident Review, guidelines so this would still be a transport responsible to the nursing home. Please see:

   **Guidelines §483.12**
   This requirement applies to transfers or discharges that are initiated by the facility, not by the resident. Whether or not a resident agrees to the facility’s decision, these requirements apply whenever a facility initiates the transfer or discharge. “Transfer” is moving the resident from the facility to another legally responsible institutional setting, while “discharge” is moving the resident to a non-institutional setting when the releasing facility ceases to be responsible for the resident’s care.
7. **Question:** Can a nursing home bill ForwardHealth for a member to be picked-up from the hospital and brought to the nursing home for admittance on the same day?

   **Answer:**
   Medicaid payor status Resident: No, these transports are already paid for in the payment to LogistiCare.
   Medicare payor status Resident: It does not matter if the member is dual eligible or not, the nursing home will not be able to bill Medicaid for the service as this would be a LogistiCare transport.

   **Note:** If a nursing home wishes to transport they may, but they will not be allowed to bill for this ride.

8. **Question:** How can nursing homes schedule a pick-up time from the hospital if the hospital's dictate that?

   **Answer:** The nursing home admission staff and hospital discharge staff should be in contact with each other to arrange the pick-up time from the hospital. LogistiCare is responsible to transport a member to a nursing home if the member has not already been admitted to that nursing home.

9. **Question:** Are there any limitations on a nursing home using a private SMV provider?

   **Answer:** In order for the SMV to bill ForwardHealth they need to be MA certified.

   If the private SMV provider is not MA certified, then the nursing home should bill ForwardHealth fee-for-service as an ancillary charge for transportation provided to a resident Medicaid member at a rate of $10 per day of ride plus $1.00 per mile.

10. **Question:** What is the member’s copay if a nursing home utilizes a private SMV provider for the resident’s transportation?

    **Answer:** There are no copays for members in a nursing home if the resident is receiving Medicaid services that initiated the transport of the resident.

11. **Question:** If nursing home resident needs to go to the clinic for a procedure or exam, who pays? Can nursing homes ask the family to transport or have the family pay the cost?

    **Answer:** Eligible ForwardHealth members are entitled to transportation to medically necessary appointments under their benefit package. This does not prohibit a family member from transporting the resident for medically necessary appointment. Nursing homes cannot ask a member or their family to pay for the cost of transportation.

12. **Question:** If a transport is only 4 blocks, can nursing homes charge the minimum of $1.00?

    **Answer:** The maximum allowed reimbursement is $1.00 per mile, but providers should bill their usual and customary charge. In addition, providers should be billing actual mileage, not rounding to the nearest whole mile.

13. **Question:** Is there a sample billing that can be downloaded?

    **Answer:** Yes, it is available in the Nursing Home Online Handbook under Claims > Submission > 1500 Health Insurance Claim Form Completion Instructions for Non-Emergency Transportation and additionally as an attachment to Update 2010-05.

14. **Question:** If a nursing home resident goes to two appointments in one day, can nursing homes bill mileage for both trips?

    **Answer:** Yes, the total mileage for the member per day can be billed, however only one base rate per date of service can be billed.
15. **Question:** Is it necessary for members in a nursing home to have a Certificate of Need on file for transportation by a specialized medical vehicle?

   **Answer:** Yes, the Certificate of Need for SMV transportation form continues to be required for SMV services provided to ForwardHealth members not affected by the new NEMT management.

16. **Question:** How can Fee for Service Claims be submitted to ForwardHealth?

   **Answer:** Nursing Home claims for Non-emergency medical transportation can be sent electronically to ForwardHealth or, if sent on paper, can be mailed to:

   - ForwardHealth Claims and Adjustments
   - 6406 Bridge Rd
   - Madison WI 53784-0002