

What every provider needs to know about Medicaid transportation

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This article features general information regarding Wisconsin Medicaid's coverage of transportation services and is not intended to give detailed coverage policies and procedures. Wisconsin Medicaid is providing this information so that providers have the basic information needed to advise or refer recipients about transportation services.

Wisconsin Medicaid covers medically necessary direct recipient care. In addition, Wisconsin Medicaid covers some nonmedical services that recipients require to access Medicaid-covered health care services. Transportation is one of these nonmedical services.

Medicaid transportation policy

Medicaid covers three types of transportation for eligible recipients to and from Medicaid-covered services:

- Common carrier vehicles.
- Specialized medical vehicles (SMVs).
- Ambulances.

All providers may be asked to verify that a Medicaid recipient received Medicaid-covered services at their site on a particular date. This is to ensure that Medicaid is only paying for necessary services.

Common carrier vehicles



A common carrier is any mode of transportation (for example, car, van, taxi, or bus) other than an ambulance or SMV approved by the county or tribal agency to a Medicaid-covered service.

Common carrier transportation for fee-for-service recipients

If the county or tribal agency authorizes common carrier transportation, it will either arrange for transportation or reimburse recipients for a portion of travel costs to and from Medicaid-covered services. Recipients are required to contact their county or tribal agency *before* the trip.

The county or tribal agency has the right to pick the least expensive form of transportation and may choose to cover transportation to only the closest medical provider who can provide the service. The recipient may be authorized to use his or her car, or a friend's car, and be reimbursed for mileage. Providers should refer recipients to their local county or tribal agency for additional information. For a current list of county and tribal agency transportation contacts, see Attachment 1 of this *Update*.

There is no recipient copayment for this mode of transportation.

Common carrier transportation for some Medicaid HMO enrollees

All Medicaid HMOs in Milwaukee County have contracts to provide common carrier transportation for their Medicaid enrollees. Transportation through the HMO is also limited to a trip to and from Medicaid-covered services. A few other counties also subcontract with some Medicaid HMOs for common carrier transportation services.

If a Medicaid recipient enrolled in an HMO is in a county other than Milwaukee County, refer him or her to the local county or tribal agency. The county or tribal agency authorizes transportation services for HMO enrollees the same as fee-for-service recipients as described earlier in this article.

Specialized medical vehicles

Transportation by common carrier meets the needs of most recipients.

However, Wisconsin Medicaid covers transportation by an SMV if the recipient meets all of the following criteria:

- Is legally blind, or indefinitely or temporarily disabled; and
- Cannot use any other means of transportation, as documented in writing by the physician using Attachment 2, the SMV Transportation Physician Certification form.

If the recipient does not have a documented disability, refer him

or her to the local county or tribal agency for transportation by common carrier.

Transportation by an SMV is available only for trips to and from a Medicaid-covered service. Providers should refuse to sign the certification form if they believe the person is not qualified for SMV transportation or if the recipient has not been sufficiently evaluated to determine the need for SMV transportation.

For long-distance travel (more than 40 miles urban, more than 70 miles rural), the provider needs to get prior authorization from Wisconsin Medicaid before the trip. Recipients may call Recipient Services at (800) 362-3002 or (608) 221-5720 for a list of Medicaid-certified SMV providers in their area or for additional information.

Recipients enrolled in a Medicaid HMO should contact the HMO directly.

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Quick-Reference Transportation Services Guide

	Common Carrier	Specialized Medical Vehicles	Emergency Ambulance	Non-emergency Ambulance
Who is eligible	All recipients	Legally blind, indefinitely or temporarily disabled	Seriously ill or injured	Recipients whose medical condition precludes transport by any other means
Authorized/certified by	County/tribal agency	Physician/physician extender*	Not needed	Physician/physician extender**
Contact	County/tribal agency	SMV company	Ambulance company	Ambulance company
Copayment	No copayment	\$1 copayment per trip	No copayment	\$2 copayment per trip

*Physician extender includes physician assistants, nurse midwives, and nurse practitioners.

**Physician extender includes dentists, physician assistants, nurse midwives, and nurse practitioners.

What's new on the Medicaid Web site

The Wisconsin Medicaid Web site includes provider and recipient publications, Medicaid contacts and statistics, and eligibility and benefit information. You may visit the Medicaid Web site at www.dhfs.state.wi.us/medicaid/.

The following is a list of what has recently been added to the Medicaid Web site:

- BadgerCare brochure for recipients including Spanish and Hmong versions.
- Child Care Coordination fee schedule.
- Chronic Renal Disease program brochure.
- February 2000 *Medicaid and BadgerCare Update*.
- Hospital Inpatient DRG weights and rates.
- January 2000 *Forward* newsletter.
- Quarterly Pharmacy Handbook replacement pages.
- Revised HealthyStart brochure for recipients including Spanish and Hmong versions.
- Spousal impoverishment table for 2000.
- Tutorial to help providers download maximum fee schedules.
- Updated Medicaid and BadgerCare caseload statistics.
- *Wisconsin Medicaid HMO Comparison: 1997* report. This report presents data on health care delivered to Medicaid recipients by HMOs.

Keep in mind that if you do not have a computer with Internet access, many libraries have access available. ✦

Electronic claim submission times

The following is important information for providers who submit electronic claims to Wisconsin Medicaid.

Schedule for weekend checkwrite cycle

The following are the deadlines for submission of electronic claims to Wisconsin Medicaid. Providers are encouraged to transmit claims throughout the week. This may avoid heavy transmission volumes at the end of the claims processing week.

Transmission to the Medicaid fiscal agent, EDS

Magnetic tapes

Claims on tapes received by 2:30 p.m. on Friday will be processed during that weekend checkwrite cycle.

3480, 3490, and 3490E Cartridges

Claims on cartridges received by 3:00 p.m. on Thursday will be processed during that weekend checkwrite cycle.

3780 Protocol

Claims transmitted and received by 5:00 p.m. on Friday will be processed during that weekend checkwrite cycle. The transmission lines are not available from 5:00 p.m. to 8:00 p.m. daily.

Reformatter and MicroECS

Claims transmitted and received by 12:00 p.m. on Friday will be processed during that weekend checkwrite cycle. The transmission lines are not available from 12:00 p.m. to 1:00 p.m. daily.

Note: The deadline for daily claim transmission for the Reformatter and

MicroECS has changed to 12:00 p.m.,
Monday through Thursday.

Transportation

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Transmission to Medicaid fiscal agent subcontractor, Proservices

Medicaid software

Claims transmitted by 1:00 p.m. on Friday will be processed during that weekend checkwrite cycle. Transmission lines are not available from 1:00 p.m. to 1:15 p.m. daily.

Holidays

Information regarding changes in transmission deadlines due to holidays will be published in future *Medicaid and BadgerCare Updates* and Remittance and Status (R/S) Report messages.

Further information

Technical questions about Medicaid software should be directed to:

United Wisconsin Proservices, Inc.
401 W. Michigan St.
Milwaukee, WI 53203
(800) 822-8050
Fax: (414) 226-6033

Questions on policy, billing, and other methods of electronic claim submission should be directed to:

Medicaid Provider Services
(800) 947-9627 or (608) 221-9883 ✦

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at www.dhfs.state.wi.us/medicaid/.

There is a \$1 recipient copayment per one-way trip.

Ambulance transportation

Wisconsin Medicaid covers ambulance transportation only when the recipient cannot be transported by any other means to emergency medical care as the result of illness or accident. In non-emergency situations, Wisconsin Medicaid covers ambulance transportation when the recipient's medical condition prevents transportation to Medicaid-covered services by any other means. A physician's prescription is required prior to the trip indicating that an ambulance transfer is necessary.

There is a \$2 copayment for non-emergency ambulance service.

Reimbursement

Ambulance and SMV transportation for HMO recipients is included in Medicaid HMO contracts. For fee-for-service recipients, Wisconsin Medicaid reimburses ambulance and SMV providers directly for their services.

For more information

Any provider with questions regarding transportation policies may call Provider Services at (800) 947-9627 or (608) 221-9883. ✦

Wisconsin Medicaid covers ambulance transportation only when the recipient cannot be transported by any other means to emergency medical care as the result of illness or accident.

Forward card training sessions

Wisconsin Medicaid holds additional eligibility verification vendor fairs and information-sharing sessions for the Forward ID cards

In October 1999, Wisconsin Medicaid completed the statewide implementation of the new Forward ID cards. Providers now have some experience with the new ID cards and may be looking for additional information, such as a more efficient eligibility verification method. Two new opportunities for providers to ask questions and to learn more about the Forward ID cards will be available in April.



Wisconsin Medicaid will hold two eligibility verification vendor fairs in April 2000. Several of the commercial eligibility verification vendors will be available throughout the day to demonstrate their products and services and answer questions. Wisconsin Medicaid staff will also be available between sessions to answer questions. In addition, there will be brief information-sharing sessions held at each location.

All providers are welcome to attend the Forward ID card vendor fair and information-sharing sessions in April. These sessions will be held, free of charge, in Milwaukee and Stevens Point. Attendance at these sessions is optional.

Information session times and dates

Providers may attend any of the Forward card information-sharing sessions beginning at 9:00 a.m., 10:00 a.m., 11:00 a.m., 1:00 p.m., and 2:00 p.m. on the following dates:

April 5, 2000	April 13, 2000
Milwaukee	Stevens Point
Four Points Hotel – Sheraton	Holiday Inn
4747 South Howell	1501 North Point Dr.
Milwaukee, WI 53207	Stevens Point, WI 54481
(800) 558-3862	(715) 341-1340

Providers are *not* required to preregister for the information-sharing sessions. Providers who are unable to attend either of the events can view the Wisconsin Medicaid Web site at www.dhfs.state.wi.us/medicaid/, or call Provider Services at (800) 947-9627 or (608) 221-9883 for more information.

What to expect at the information-sharing sessions

The following items will be covered during each information-sharing session:

- Overview of common provider issues/questions that have been raised since implementation.
- Current and future enhancements to the eligibility verification system (EVS) as a result of provider feedback.
- A question and answer period.



Commercial eligibility verification vendors

The following vendors offer eligibility verification services for purchase:

ENVOY Corporation

6077 Primacy Parkway
Suite 203
Memphis, TN 38119
(800) 215-4730, ext. 228

Healtheon WEBMD (formerly MedeAmerica)

Contact name: Robb Larsen
230 River Ridge Circle
Burnsville, MN 55337
(800) 333-3672

MediFAX, The Potomac Group (TPG)

Contact name: Dan Stone
PO Box 290037
Nashville, TN 37229-0037
(800) 846-9035, ext. 2903

United Wisconsin Proservices

401 West Michigan St.
Milwaukee, WI 53203
Contact name: Sean Foley (Southern WI)
(414) 226-6112
Contact name: Fritz Kimball (Northern WI)
(414) 226-5542

Wisconsin Health Information Network (WHIN)

Contact name: Carol Gray Unis
5900 South Lake Drive, Second Floor
Cudahy, WI 53110-3171
(800) 331-9446

Wisconsin Independent Physicians Group (WIPG) (for WIPG member physicians only)

6767 West Greenfield Avenue, Suite 300
Milwaukee, WI 53214
(414) 771-6177

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Attachment 1
Telephone numbers for county and tribal transportation

County and department	Telephone number
Adams County, Health & Social Services	(608) 339-3356
Ashland County, Human Services	(715) 682-7004
Barron County Social Services	(715) 537-5691
Bayfield County, Human Services	(715) 373-6144
Brown County, Social Services	(920) 448-6460, ext. 240
Buffalo County, Human Services	(608) 685-4412
Burnett County, Social Services	(715) 349-7600
Calumet County, Human Services	(920) 849-1451
Chippewa County, Social Services	(715) 726-7840
Clark County, Human Services	(715) 743-5233
Columbia County, Human Services	(608) 742-9227
Crawford County, Human Services	(608) 326-0248
Dane County, Human Services	(608) 242-4566
Dodge County, Human Services	(920) 386-3500
Door County, Social Services	(920) 746-2300
Douglas County, Human Services	(715) 395-1479
Dunn County, Human Services	(715) 232-1116
Eau Claire County, Human Services	(715) 831-5693
Florence County, Human Services	(715) 528-3296
Fond du Lac County, Social Services	(920) 929-3443 (920) 929-7041
Forest County, Social Services	(715) 478-3351
Grant County, Social Services	(608) 723-2136
Green County, Human Services	(608) 328-9364
Green Lake County, Human Services	(920) 294-4070
Iowa County, Social Services	(608) 935-0389
Iron County, Human Services	(715) 561-3636
Jackson County, Human Services	(715) 284-4301, ext. 242
Jefferson County, Human Services	(920) 674-3105
Juneau County, Human Services	(608) 847-9371
Kenosha County, Social Services	(262) 697-5880
Kewaunee County, Social Services	(920) 388-3777
La Crosse County, Human Services	(608) 785-5707
La Fayette County, Human Services	(608) 776-4888
Langlade County, Social Services	(715) 627-4750
Lincoln County, Social Services	(715) 536-6200
Manitowoc County, Human Services	(920) 683-4280
Marathon County, Social Services	(715) 261-7500
Marinette County, Human Services	(800) 990-4242
Marquette County, Social Services	(608) 297-9110
Menominee County, Human Services	(715) 799-3861
Milwaukee County, Human Services	(414) 289-6110 (414) 289-6543
Monroe County, Human Services	(608) 269-8690

County and department	Telephone number
Oconto County, Human Services	(920) 834-7000
Oneida County, Social Services	(715) 362-5695
Outagamie County, Human Services	(920) 832-5168
Ozaukee County, Social Services	(262) 238-8120 (262) 284-8120
Pepin County, Human Services	(715) 672-8936
Pierce County, Human Services	(715) 273-6780
Polk County Human Services	(715) 485-8400
Portage County, Human Services	(715) 345-5350
Price County, Human Services	(715) 339-3943
Racine County, Social Services	(262) 638-6321
Richland County, Social Services	(608) 647-6266
Rock County, Human Services	(608) 757-5054
Rusk County, Social Services	(715) 532-5031
St. Croix County, Human Services	(715) 381-4360
Sauk County, Human Services	(608) 355-4200
Sawyer County, Social Services	(715) 634-3000
Shawano County, Social Services	(715) 526-4700
Sheboygan County, Human Services	(920) 459-6418
Taylor County, Human Services	(715) 748-1492
Trempeleau County, Social Services	(715) 538-2311, ext. 247
Vernon County, Human Services	(608) 637-5210
Vilas County, Social Services	(715) 479-3625
Walworth County, Human Services	(262) 741-3200
Washburn County, Social Services	(715) 468-4747
Washington County, Social Services	(262) 306-2222
Waukesha County, Human Services	(262) 548-7848
Waupaca County, Human Services	(715) 258-6279
Waushara County, Social Services	(920) 787-0403
Winnebago County, Social Services	(920) 236-4650
Wood County, Social Services	(715) 421-8600

Tribe	Telephone number
Bad River	(715) 682-7137
Ho-Chunk	(715) 284-9343, ext. 1108
Lac Courte Oreille	(715) 634-4153, ext. 121
Lac du Flambeau	(715) 588-9801
Menominee Tribal Legislature	(715) 799-3361
Oneida Business Committee	(920) 869-1658 (920) 869-1659
Potawatomi Community Inc.	(715) 478-7300
Red Cliff Tribal Council	(715) 779-3706, ext. 27
St. Croix	(715) 349-2195, ext. 104
Stockbridge-Munsee	(715) 793-5040
Sokaogon Chippewa	(715) 478-3265



**ATTACHMENT 2
SMV TRANSPORTATION
PHYSICIAN CERTIFICATION**

All areas of this form must be completed by a physician, physician assistant, nurse midwife or nurse practitioner to justify the need for SMV transportation.

Please complete this form **only** if the Medicaid recipient is legally blind or disabled to the extent that he/she cannot safely use private vehicles or mass transit services. *Refer recipients who can safely travel in an automobile, taxi, or bus to the Medicaid transportation coordinator in their tribal agency or county human or social services department.*

I,	<input style="width:95%;" type="text"/>	have evaluated	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
	(Certifying Provider's name)		(Recipient's Name)	(Date of Birth)	(Medicaid ID Number)
on	<input style="width:95%;" type="text"/>	and certify that he/she requires the use of a specialized medical vehicle (SMV) for transportation to receive medical services and is <i>unable to</i>			
	(Date)	<i>manage available transportation by common carrier (e.g., car, taxi, bus).</i> The recipient has the following medical diagnoses/problems which justify the need for SMV transportation.			
	Diagnosis/Problem	ICD-9-CM Code	Describe how diagnosis/problem necessitates the need for SMV services		
	<input style="width:95%; height: 20px;" type="text"/>	<input style="width:95%; height: 20px;" type="text"/>	<input style="width:95%; height: 20px;" type="text"/>		
	<input style="width:95%; height: 20px;" type="text"/>	<input style="width:95%; height: 20px;" type="text"/>	<input style="width:95%; height: 20px;" type="text"/>		
	<input style="width:95%; height: 20px;" type="text"/>	<input style="width:95%; height: 20px;" type="text"/>	<input style="width:95%; height: 20px;" type="text"/>		
	<input style="width:95%; height: 20px;" type="text"/>	<input style="width:95%; height: 20px;" type="text"/>	<input style="width:95%; height: 20px;" type="text"/>		

Select one or some (but not all) of the following that describe the recipient's level of assistance requirements:

A11 <input type="checkbox"/> Cot/Stretcher (must have help) B11 <input type="checkbox"/> Wheelchair C11 <input type="checkbox"/> Cane/Crutches/Walker/Low Stamina/or Unsteady Gait (must have help) C21 <input type="checkbox"/> Cane/Crutches/Walker/Low Stamina/or Unsteady Gait (moderate help) C31 <input type="checkbox"/> Cane/Crutches/Walker/Low Stamina/or Unsteady Gait (minimal help) D11 <input type="checkbox"/> Behavior/Cognitive Problem (must have help) D21 <input type="checkbox"/> Behavior/Cognitive Problem (moderate help) D31 <input type="checkbox"/> Behavior/Cognitive Problem (minimal help) G11 <input type="checkbox"/> Hospital/Nursing Home Discharge	I certify the recipient's disability is indefinite or temporary (check one). Indefinite <input type="checkbox"/> (Certification must be renewed yearly.) Temporary <input type="checkbox"/> If temporary, specify expected number of days to resolution of condition/problem: Days <input style="width: 50px;" type="text"/> (Maximum 90 days)
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<input style="width:95%; height: 40px;" type="text"/>	<input style="width:95%; height: 20px;" type="text"/>	<input style="width:95%; height: 40px;" type="text"/>
(Signature)	(Date)	(UPIN or Medicaid Provider Number)



Dept. of Health & Family Services
Division of Health Care Financing
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PO Box 309
Madison, WI 53701-0309

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