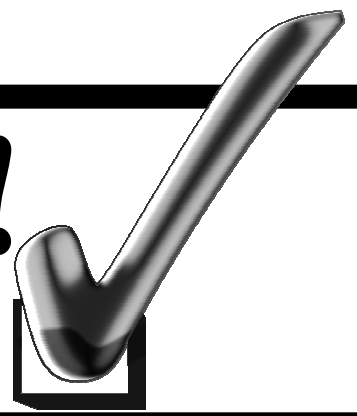

IMPORTANT!



Molina Provider News:

Transportation Tip Sheet

Non-Emergent Transportation (NEMT) is transportation for any beneficiary who has no other means of transportation available to any medically necessary Medicaid-compensable service for the purpose of receiving treatment, medical evaluation, or therapy. Molina Healthcare provides NEMT through Access2Care Transportation.

Transportation Reservations

To make a reservation for a transportation service, contact Access2Care's reservation line for Molina Healthcare Members at: (888) 298-4781. If the member needs further assistance, they can also call (866) 472-4585 and a Member Services Representative will assist them with this request.

Advanced Life Support (ALS)

ALS is the provision of medically necessary supplies and services during ground ambulance transportation, including the provision of at least one ALS intervention. The ALS intervention must be medically necessary and in accordance with state and local laws, required to be performed by an emergency medical technician-intermediate (EMT-Intermediate or EMT-Paramedic). Level 2 (ALS2) includes additional services.

- A0427 (Level 1)
- A0433 (Level 2)

All ambulance transportation must be the most cost-effective and most appropriate method of transportation available. Ambulance providers must enroll in Medicaid as an ambulance provider. The following HCPCS codes identify Ambulance services: **A0021 – A0999**. The description of the HCPCS code indicates if the service is emergency or non-emergency.

Authorization Requests

Emergent transportation claims are paid at 100% of Medicaid. Prior authorization is not required for emergency transportation.

Non-emergent ambulance transports billed with a hospital to hospital modifier (GG, GH, HG and HH) do not require an authorization.

Claim Submission

Providers must submit claims, whether paper or electronic, within 6 months after discharge. Claims may be submitted:

- Online:

Molina Portal (for existing registered providers/users): <https://provider.molinahealthcare.com>.

*** The Molina Legacy Provider Portal is no longer accepting new provider registrations. As of March 1, 2022, the Molina Legacy Provider Portal will no longer accept new user registrations. Providers should register on the **Availity Portal** at <https://availity.com/molinahealthcare> to avoid any disruption in accessibility and functionality.*

- Via a clearinghouse, **Payer ID #51062**
- On paper to:
Molina Healthcare
PO Box 22812
Long Beach, CA 90801

When Molina is secondary, claims, whether paper or electronic, must be submitted within 90 days from the final determination by the primary insurance carrier. If Medicare is the primary carrier, claims must be submitted to Molina within 36 months from discharge or one (1) year from Medicare’s determination, whichever is later.

Before filing a claim, please review the following:

- Member eligibility and ID#
- Claim’s timely filing
- Primary versus secondary insurance
- Patient Liability has been confirmed through DCF documentation or the DCF website
- Rendered services are covered
- Rendered services were authorized, if appropriate

Ambulance Codes

Code	Description
A0080	Nonemergency transportation, per mile - vehicle provided by volunteer (individual or organization), with no vested interest
A0090	Nonemergency transportation, per mile - vehicle provided by individual (family member, self, neighbor) with vested interest
A0100	Nonemergency transportation; taxi
A0110	Nonemergency transportation and bus, intra or inter state carrier, per trip/ride
A0130	Nonemergency transportation: wheelchair van
A0380	BLS mileage (per mile)
A0425	Ground mileage, per statute mile
A0426	Ambulance service, advanced life support, nonemergency transport, level (ALS1)
A0428	Ambulance service, basic life support (BLS), nonemergency transport, (BLS)
A0434	Specialty care transport (SCT) - Bariatric wheelchair/stretchers van
S0209	Wheelchair van, mileage, per mile
S0215	Nonemergency transportation; mileage, per mile
T2005	Nonemergency transportation; stretchers van

For additional information, please visit the resources listed below and our website at www.molinahealthcare.com. You may also call Molina Healthcare at 866-472-4585.

Thank you for your continued care to our Members!

Provider Resources

Medicaid Provider General Handbook

https://ahca.myflorida.com/medicaid/review/General/59G_5020_Provider_General_REQUIREMENTS.pdf

Medicaid Provider Handbook, Coverage Policies, and Fee Schedules

<https://ahca.myflorida.com/medicaid/review/Promulgated.shtml>