

Medi-Cal Non-Medical Transportation Webinar Q&A

1. Will a copy of this presentation be sent out after the webinar?

Yes, there will be a recording of this webinar and webinar slides provided.

2. Will there be a concise handout or document specifying all this information which we can send to our medical providers to disseminate to their Medi-Cal patients?

This is a provider/advocate flyer. Our ready-to-go patient/client flyer is delayed because of the difficult instructions (emailing, encryption) for FFS. Please know we will BLAST out the patient flyer once the list of FFS providers who can be accessed directly is confirmed!

<http://www.mchaccess.org/pdfs/alerts/Medi-Cal%20Non%20Medical%20Transportation%20MCHA%20Updated%208-10-2018.pdf>

3. What is the process for Medi-Cal Fee-For-Service Beneficiaries to access NMT?

Eventually DHCS will publish a list of Non-Medical Transportation providers here:

<http://www.dhcs.ca.gov/services/medi-cal/Pages/Transportation.aspx>

Until these providers are published, however, please email DHCS-Benefits@dhcs.ca.gov with general information about what the transportation is for, when the appointment is and how urgent the appointment is. DHCS will respond with an encrypted email for you to respond to with your client's personal information.

4. What is the phone number to call for those who do not have an assigned plan?

Clients who are waiting to be assigned to a plan have Fee-For-Service (FFS) Medi-Cal in the interim. They would follow the FFS process for setting up transportation.

Please see the above interim FFS process.

5. Does this apply for patients undocumented with limited (restricted) Medi-Cal?

Yes, but the transportation would only be covered for the services within their scope of Medi-Cal. Someone with restricted Medi-Cal would always go through the FFS process.

6. If this NMT benefit has been available since July, when can we expect very concrete step by step instructions for fee-for-service Medi-Cal patients to access the NMT in counties other than L.A.?

We are waiting for DHCS to provide us with the official instructions once the NMT providers have been posted on the DHCS website. We will send an update to everyone once everything has been finalized.

For now, counties outside of Los Angeles, first need to contact their county contact found here: <http://www.mchaccess.org/pdfs/alerts/Transportation-claiming%20counties%20-%20contact%20listing.pdf>

If contacting the county contact does not work, then an email should be sent to DHCS-Benefits@dhcs.ca.gov.

7. Would the various counties contact their local Medi-Cal plans: i.e. Molina HC or CA Health & Wellness, or Access Blue?

Yes, here's a list of all the Medi-Cal HMOs for each county
<http://www.dhcs.ca.gov/individuals/Pages/MMCDHealthPlanDir.aspx>

Los Angeles County Medi-Cal HMO numbers:

Anthem Blue Cross: (877) 931-4755

Care First: (877) 433-2178

Health Net: (800) 675-6110

Kaiser: (844) 299-6230

LA Care: (866) 529-2141

Molina: (844) 292-2688

8. Does a Minor's Medi-Cal qualify for services? Can their parent(s) accompany minor to scheduled appointments?

Yes, one parent/caretaker per child with an appointment.

9. Is NMT available for doctor appointments for adults?

Yes, this benefit is included for doctor's appointment for adults. All Medi-Cal Covered services are included in this benefit.

10. What about foster youth with fee for service Medi-Cal?

Foster youth would follow the Fee-for-Service process for accessing Non-Medical Transportation, unless they are in a managed care plan. Most foster children are in FFS Medi-Cal, but if the foster parent wishes, they can choose a Medi-Cal HMO for their child.

Source: Medi-Cal Managed Care and Foster Care Issues in Los Angeles County

<http://calhps.com/reports/Medi-cal-Managed-Care-and-Foster-Care-Issues-in-Los-Angeles-County.pdf>

11. If the youth is a foster youth, can the DCFS Social worker consent?

If the foster youth has foster parents, then the foster parent would have to give consent. If the foster youth has not yet been placed in a home, then the consent would come from the individual(s) making medical decisions for the child.

12. Is the parent authorization for teens just a one-time authorization or do they have to grant authorization every time the teen wants to access the transportation?

Each plan has their own process for this. Only Kaiser would confirm that they would allow for putting parental authorization on file for future visits. It is definitely worth asking each plan to go

through a one-time authorization process to see if they will agree not to have to authorize each time.

13. Can an adult take another adult with her if she would like to have a support person available? She doesn't need physical assistance.

Yes, the All Plan Letter No. 17-010 (July 17, 2017), states “NMT coverage includes transportation costs for the member and one attendant, such as a parent, guardian, or spouse, to accompany the member in a vehicle or on public transportation, subject to prior authorization at time of initial NMT authorization request.”

FFS beneficiaries would also be allowed the same provision.

14. Is transportation covered for health education classes and support groups?

NMT would be covered as long as the health education class is covered within the beneficiaries Medi-Cal scope of benefits. The health education classes or support groups would have to be medically necessary and Medi-Cal covered services in order for the Non-Medical Transportation to be covered.

15. What about to Regional Center for children? Is that covered?

Yes, if Medi-Cal is paying for the child’s services at the Regional Center.

16. What are the aid codes?

Here is a master chart of all the Medi-Cal aid codes.

https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part1/aidcodes_z01c00.doc

However, the important point to know regarding the aid codes is that you can get the Non-Medical Transportation Benefit for any Medi-Cal Covered Services you’re eligible within your scope of benefits. If you are accessing benefits within your restricted aid code you would be able to access the NMT benefit.

17. Going back to the prescription required, is the "prescription" the transportation form that health plans have their members fill out?

Any prescription required for transportation is for NEMT, not NMT. This is an important distinction. If a beneficiary is trying to access NMT they should never need a prescription for the transportation. If health plan members are filling out forms this is likely the attestation about transportation resources have been reasonably exhausted. We are waiting to see copies of this form – please send to us if you have one!

Please note: The beneficiary may need a prescription for the Medi-Cal covered services they are receiving. However, the Non-Medical Transportation (NMT) itself does not require a prescription. Whereas someone accessing Non-Emergency Medical Transportation (NEMT) would need a prescription for the transportation itself.

18. Can you also clarify why a prescription would be needed to access a wheelchair van via NEMT?

This is the process for accessing NEMT. Medi-Cal requires the prescription from the provider to certify that the beneficiary does indeed require Non-Emergency Medical Transportation. The NEMT transportation is specialized and in many cases requires specialized equipment and medically trained staff.

19. The transportation company is asking for the form to be filled out. They have a check box. Does not required the doctor to sign, but they do require we fill it out?

This form may be the attestation that the beneficiary has to fill out regarding exhausting other means of transportation. The transportation company is allowed to give the beneficiary these types of forms to fill out.

The forms we are concerned about are the ones that require the medical provider/doctor to fill out and sign. The forms that have to be submitted to the provider are the forms that are definitely NOT ALLOWED for Non-Medical Transportation.

20. Who bills Medi-Cal for the transportation?

The transportation company bills Medi-Cal.

21. What does "exhaust other options" really mean? What if the parent has a bus pass issued to them and could take the bus, but the ride would be very long, etc. Would they still qualify for NMT?

The All Plan letter states the following for Medi-Cal Health Plans:

- For private conveyance, the member must attest to the MCP in person, electronically, or over the phone that other transportation resources have been reasonably exhausted.
- The attestation may include confirmation that the member:
- Has no valid driver's license.
- Has no working vehicle available in the household.
- Is unable to travel or wait for medical or dental services alone.
- Has a physical, cognitive, mental, or developmental limitation.

DHCS hasn't published specific requirements for FFS Beneficiaries for demonstrating that they have exhausted other options. We'd like to know if a beneficiary is denied transport.

22. Is this service available in the Antelope Valley? San Bernardino County?

Yes, the NMT benefit is available in all counties in California.

23. Does the health plan provide the transportation or does the patient have to provide their own means of transportation and the health plan will reimburse?

The Health Plan has a contract with a transportation provider. The Health Plan would schedule the transportation for the beneficiary. If clients have relatives or friends that are able to drive

them they can ask for gas/mileage reimbursement. If they have their own means of transportation they cannot ask for reimbursement for driving their own vehicle.

24. Will Medi-Cal pay for prior parking payments a family has made due to babies hospital visits, before knowing about these transportation services?

No, parking payments are not available.

25. What happens when a client is waiting for hours to actually be SEEN for their appointment and they are running late? Is there a cut-off for how long the driver will wait?

There should not be a cut off for how long the driver will wait. However, I would recommend calling the transportation company to let them know that the appointment is running late. That way they can reschedule the driver.

When setting up an appointment, be sure to get the transportation company name and number.

26. It seems that sometimes drivers who are to pick up a client leave very quickly, what advice do you have for beneficiaries when they are to be pick up?

First, call the transportation company directly if they leave someone stranded at their home or at their appointment to ask for another driver to be dispatched.

When setting up an appointment, be sure to get the transportation company name and number.

Then, also call the Health Consumer Center's to file a complaint:

Health Consumer Center's dedicated transportation line (Los Angeles) 818-492-5270

Health Consumer Alliance (other counties) 888-804-3536

Please note: We are also waiting on DHCS to give us guidance about whether or not beneficiaries could use other means of transportation such as a taxi or another ride service and ask for reimbursement from Medi-Cal or their Medi-Cal HMO.