

## METHODS OF PROVIDING TRANSPORTATION

1. Ambulance service is a covered service under the plan, subject to the limits in Item 24a of Attachment 3.1-A.
2. Non-emergency Medical Transportation is a covered service under the plan, subject to the limits in Item 24a. of Attachment 3.1A. Recipients are reimbursed for costs associated with medical transportation, subject to the following conditions:
  - a. Member transportation through the nonemergency medical transportation broker is not available to the member when the member is capable of securing the member's own transportation at no cost to the member (e.g., free-gas voucher programs).
  - b. When a member needs nonemergency transportation to receive medical care provided by the Iowa Medicaid program, the member must contact the broker with as much advance notice as possible, but not more than 30 days' advance notice.
  - c. Generally, members who require a ride from a transportation provider scheduled by the broker must contact the broker at least two business days in advance of the member's appointment to schedule the transportation. For purposes of calculating the two-business-day notice obligation, the advance notice includes the day of the medical appointment but not the day of the telephone call.
  - d. If the member's nonemergency transportation need for a ride from a transportation provider scheduled by the broker makes the provision of two business days' notice impossible because of the member's urgent transportation need, the member must provide as much advance notice as is possible before the transportation need so that the broker can appropriately schedule the most economical form of transportation for the member. Urgent transportation needs for a ride from a transportation provider scheduled by the broker are limited to unscheduled episodic situations in which there is no immediate threat to life or limb, but which require that the broker schedule transportation with less than two business days' notice
  - e. The two-business-day advance notice obligation does not apply when the member requests only mileage reimbursement. To be eligible for mileage reimbursement:
    1. The member must notify the broker no later than the day of the trip;
    2. The transportation must be provided by a driver with a valid driver's license and insurance coverage on the vehicle at the time of the transport; and
    3. The member needs transportation services so that they can receive Medicaid-covered services from providers enrolled with the Iowa Medicaid program

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The state assures that all minimum requirements outlined in section 1902(a)(87) of the Act are met. Those requirements include the following:

- (A) Each provider and individual driver is not excluded from participation in any federal health care program (as defined in section 1128B(f) of the Act) and is not listed on the exclusion list of the Inspector General of the Department of Health and Human Services;
- (B) Each such individual driver has a valid driver's license;
- (C) Each such provider has in place a process to address any violation of a state drug law;  
and
- (D) Each such provider has in place a process to disclose to the state Medicaid program the driving history, including any traffic violations, of each such individual driver employed by such provider, including any traffic violations.

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