



MISSISSIPPI DIVISION OF
MEDICAID

Administrative Code

Title 23: Medicaid Part 201 Transportation Services

Part 201: Transportation Services

Part 201 Chapter 2: Non-Emergency Transportation (NET) (Non-Ambulance)

Rule 2.1: NET Broker Program

- A. The Division of Medicaid contracts with a Broker to provide non-emergency transportation (NET) to Medicaid beneficiaries in appropriate vehicles, including wheelchair vans, taxis, minivans, and sedans depending on the beneficiary's mobility status and personal capabilities on the date of service.
 - 1. Other non-Medicaid funded sources for non-emergency transportation services must be utilized first with the Medicaid NET program being the last resort.
 - 2. Beneficiaries are not allowed to request a particular NET Provider for transportation.
- B. The NET Broker is responsible for administering and operating the NET Program in accordance with Medicaid policy, including but not limited to, the authorization, coordination, scheduling, management, and reimbursement of NET services and must:
 - 1. Operate statewide.
 - 2. Authorize and schedule NET services within set timeframes:
 - a) Ninety-eight percent (98%) of routine NET services within three (3) business days after receipt of the request, and
 - b) One hundred percent (100%) of routine NET services within ten (10) business days after receipt of the request.
 - 3. Notify the Division of Medicaid prior to denying a request for transport to a provider not geographically closest to the beneficiary's residence if the Broker is unable to obtain a medical certification from the medical provider certifying that the beneficiary is unable to be treated at a closer facility. A medical certification is not required if the transport is to the University of Mississippi Medical Center in Jackson, MS.
 - 4. Allow long distance transportation for up to ninety (90) days, if necessary, if a beneficiary has recently moved to a new area to maintain continuity of care until the transition of the beneficiary's care to a closer appropriate provider is completed. The Broker must monitor the frequency of these NET authorizations involving excessive distances per beneficiary.
 - 5. Ensure NET Providers arrive at the drop-off and pick-up destinations within Medicaid's minimum requirements.

6. Perform post-transportation authorizations in instances when prior authorization was not obtainable.
7. Request additional information, if necessary, within twenty-four (24) hours of the initial receipt of a request and place the request on hold. The request must specify the date the additional information must be submitted. The request for transport can be denied if the information is not received by the date specified with the exception of NET service appointments for chemotherapy, dialysis, and high-risk risk pregnancy.
8. Provide education to beneficiaries and NET Providers on NET services and procedures.
9. Maintain a current Medicaid approved NET Provider Manual/Operations Procedure Manual.
10. Ensure drivers and vehicles meet Medicaid minimum requirements.
11. Perform and document required vehicle inspections with submission of inspection reports to Medicaid no later than the fifteenth (15th) day of the month following the inspection.
12. Maintain an adequate number of NET Providers and trained staff to provide scheduled transports in a given geographical area.
13. Maintain a file of current executed NET Provider contracts and:
 - a) Require provider enrollment forms to include disclosure of complete ownership, control, and relationship information from all providers,
 - b) Include contract language requiring the Broker to notify Medicaid of such disclosures on a timely basis, and
 - c) Provide to Medicaid upon request.
14. Make timely payments to NET Providers.
15. Meet quality assurance and monitoring requirements including, but not limited to:
 - a) On-street observations,
 - b) Accident and incident reporting,
 - c) Statistical reporting of transports,
 - d) Statistical reporting of transport call center operations,
 - e) Analysis of complaints,

- f) Driver licensure, driving records, experience, training and annual random drug testing of all drivers,
 - g) Participant assistance,
 - h) Completion of driver transport logs,
 - i) Driver communication with dispatcher, and
 - j) Routine scheduled vehicle inspections and maintenance.
16. Maintain all required up-to-date electronic and data systems.
 17. Meet all Medicaid call center requirements.
 18. Conduct the following random validation checks of monthly requests to verify NET Provider claims for reimbursement match authorized transports and to verify the transports actually occurred. The Broker must document the reason the NET Provider failed to properly authorize or render the service.
 - a) Three percent (3%) of pre-transportation requests verifying that a beneficiary's appointment with the medical service provider is for a covered medical service, and
 - b) Two percent (2%) of post-transportation services verifying a beneficiary's appointment is for a covered medical service.
 19. Submit reports, data or other materials by the date due as determined by the Division of Medicaid.
 20. Must obtain a medical certification statement from the beneficiary's physician if an adult attendant is required to accompany the beneficiary.
- C. If the Broker fails to perform the responsibilities in Rule 2.1 B. resulting in additional administrative costs to the Division of Medicaid, Medicaid, at its sole discretion, may assess damages.
1. Medicaid must give written notice to the Broker of any unmet responsibility that could result in an assessment of damages and the proposed amount of the damages.
 2. The Broker has thirty (30) days from the date of the notice to dispute the determination.
- D. Reporting
1. The Broker must report within three (3) business days all allegations of sexual harassment or physical abuse by a driver, beneficiary or other passenger to the Division of Medicaid and per state law to the Department of Human Services (DHS).

- a) NET Providers must report all allegations of sexual harassment or physical abuse to the Broker.
 - b) Medicaid beneficiaries should report any incident of abuse or sexual harassment directly to the Broker.
2. The Broker must refer suspected Medicaid fraud, abuse or misuse by beneficiaries, NET Providers or Broker staff to the Division of Medicaid's Bureau of Program Integrity within three (3) business days after discovery of the suspected Medicaid fraud, abuse or misuse.
 3. The Broker must document all accidents/incidents occurring on a scheduled transport when a beneficiary is present in the vehicle and submit the accident/incident report to the Division of Medicaid within seventy-two (72) hours of the accident/incident.

E. Meals and Lodging

1. Meals for day transports are not covered under the NET program.
2. Overnight stays may be warranted if the medical service is only available in another county, city, or state requiring extensive travel time and distance.
 - a) Related travel expenses are covered including overnight lodging and meals for eligible beneficiaries and one (1) adult attendant while in transit to and from the provider rendering the medical service.
 - b) If the medical treatment facility does not provide room and board, overnight lodging and meals are covered for the beneficiary and one (1) adult attendant.

F. Adult Attendants

1. One (1) adult attendant may accompany a beneficiary during transport if all the following conditions are met:
 - a) The beneficiary's need and type of assistance required is certified as medically necessary by the beneficiary's attending medical provider prior to the transport,
 - b) The adult attendant is qualified to provide the type of assistance required, and
 - c) Travel with the adult attendant is prior authorized by the Broker.
2. The Broker must pay the following limited costs for one (1) adult attendant to accompany a beneficiary during transport:
 - a) Expense when a separate ticket must be purchased for the adult attendant to provide

the required assistance to the beneficiary. No other costs associated with the adult attendant's travel will be paid by the Broker.

- b) All costs associated with attendant care must be documented with receipts and submitted to the Division of Medicaid. Meals are not covered for a day transport when an overnight stay is not required.

Source: Miss. Code Ann. § 43-13-121; 42 CFR § 431.53; 42 CFR § 440.170(a)(1) and (3) – (4); 42 CFR 440.170(a)(4)

History: Revised – 04/01/2013

Rule 2.2: Eligibility

A. NET services are non-covered for beneficiaries enrolled in the following categories of eligibility:

- 1. Family Planning Waiver,
- 2. Qualified Medicare Beneficiary (QMB),
- 3. Specified Low-Income Medicare Beneficiary (SLMB), and
- 4. Qualified Individual (QI-1).

B. NET services are covered for beneficiaries who:

- 1. Require the services covered by Medicaid from a Medicaid approved provider,
- 2. Have no other means of getting to and/or from the provider for a Medicaid covered service,
- 3. Have not exceeded any service limits associated with the covered service, and
- 4. Are not able to receive transportation services to medical services from any other source.

Source: Miss. Code Ann. § 43-13-121; 42 CFR 431.53

History: Revised – 04/01/2013

Rule 2.3: NET Services

A. NET services are covered if all the following criteria are met:

- 1. The medical service for which NET service is requested is a covered Medicaid medical service.

2. The beneficiary:
 - a) Is eligible for NET services,
 - b) Has a medical need which requires NET services, and
 - c) Does not have access to available transportation.
3. The transport must be:
 - a) In a vehicle which meets the medical needs of the beneficiary given their mobility status and personal capabilities on the date of service,
 - b) The most economical mode of transportation. The Broker must document the reason in detail if the Broker authorizes a mode of transportation that is not the most economical,
 - c) Provided by a NET Provider closest to the beneficiary. The Broker must document the reason in detail if a transport is authorized for a NET Provider which is not the closest to the beneficiary's residence or medical service provider,
 - d) For a single covered medical service appointment, and
 - e) Requested at least three (3) business days before the NET service is needed.
4. If an adult attendant is necessary the Broker must obtain a medical certification statement from the beneficiary's physician prior to the transport.

B. NET services are non-covered if:

1. The beneficiary is not eligible for NET services on the requested date of service,
2. The beneficiary does not have a medical need requiring NET services,
3. The medical service is not covered for NET services requested,
4. The beneficiary has access to available transportation,
5. Transportation to the medical service is covered under another program,
6. The request for post-transportation authorization is not received in a timely manner and/or did not meet established criteria,
7. The medical appointment is not scheduled or was not kept,

8. Broker cannot confirm the medical appointment,
 9. The transport is not requested in a timely manner and is unable to be scheduled for the requested date and time,
 10. Additional documentation was requested by the Broker and not received timely,
 11. The beneficiary refuses the appropriate mode of transportation, or
 12. The beneficiary refuses the NET Provider assigned to the transport and another appropriate NET Provider is not available.
- C. The Broker must deny non-covered NET services and document the reason for the denial on the same business day and mail the denial letter to the beneficiary no later than the next business day following the date of the denial decision.
1. The denial letter must contain the beneficiary's right to appeal.
 2. The Division of Medicaid, in its sole discretion, may add, modify or delete denial reasons without additional payment to the Broker or a contract amendment.

Source: Miss. Code Ann. § 43-13-121

History: Revised – 04/01/2013

Rule 2.4: Transport of Nursing Facility Residents by NET

Non-emergency transportation for nursing facility residents is covered under the NET Program. Refer to Part 207, Chapter 2, Rule 2.11 D.2.d.

Source: Miss. Code Ann. § 43-13-121; 42 CFR 431.53

History: Revised – 04/01/2013

Rule 2.5: Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)

The Division of Medicaid pays for all medically necessary services for EPSDT-eligible beneficiaries in accordance with Part 223 of this Title, without regard to service limitations and with prior authorization.

Source: Miss. Code Ann. § 43-13-121

Rule 2.6: Driver Requirements

- A. The Broker must require all NET Providers comply with Mississippi Statutes regarding criminal background checks, including but not limited to, fingerprinting and verifying the

driver is not listed on the Mississippi Sex Offender Registry and ensure excluded persons or entities are not paid any state or federal funds.

B. Drivers must:

1. Abide by state and local laws.
2. Be at least 18 years of age and have a current valid driver license to operate the assigned vehicle.
3. Be courteous, patient and helpful to all passengers and be neat and clean in appearance.
4. Wear a visible, easily read nametag which identifies the employee and the employer.
5. Provide an appropriate level of assistance to a beneficiary when requested or when necessitated by the beneficiary's mobility status or personal condition, including Curb-to-Curb, Door-to-Door, and Hand-to-Hand assistance, as required.
 - a) The driver must confirm the beneficiary is safely inside the residence or facility before departing the drop-off point.
 - b) The driver is responsible for properly securing any mobility devices used by the beneficiary.
6. Assist beneficiaries in the process of being seated, confirm all seat belts are fastened properly and all passengers are safely and properly secured.
7. Park the vehicle:
 - a) In a safe location out of traffic if a beneficiary or other passenger's behavior or any other condition impedes the safe operation of the vehicle, notify the dispatcher and request assistance.
 - b) To prevent the beneficiary from crossing streets to reach the entrance of their destination.
8. Must provide verbal directions to passengers as appropriate.
9. Notify the NET Provider immediately to report an emergency such as an accident/incident or vehicle breakdown to arrange for alternative transportation for the beneficiaries on board. The NET Provider must report all accidents/incidents and breakdowns to the Broker.
10. Report all no-shows immediately to the NET Provider and the NET Provider must notify the Broker so the authorization can be cancelled.

C. Drivers must not:

1. Leave a beneficiary unattended at any time.
2. Use alcohol, narcotics, illegal drugs, or prescription medications that impair their ability to perform.
3. Smoke in the vehicle, while assisting a beneficiary or in the presence of the beneficiary. Beneficiaries or their adult attendant cannot smoke in the vehicle.
4. Wear any type of headphones while on duty, with the exception of hands-free headsets for mobile telephones which can only be used for communication with the NET Provider or to call 911 in an emergency.
5. Touch any passenger except as appropriate and necessary to assist the passenger into or out of the vehicle, into a seat and to secure the seatbelt or as necessary to render first aid or assistance which the driver has been trained.

D. Drivers must be removed from NET service if they:

1. Fail an annual random drug test,
2. Are convicted of two (2) moving violations or accidents related to transportation provided under the NET Broker Program, or
3. Have a suspended or revoked driver's license for moving traffic violations in the previous five (5) years.

Source: Miss. Code Ann. § 43-13-121

History: 04/01/2012

Rule 2.7: Vehicle Requirements

A. All vehicles used for transport must:

1. Adhere to all federal, state, county or local laws and ordinances.
2. Not exceed the vehicle manufacturer's approved seating capacity for number of persons in the vehicle, including the driver.
3. Have a functioning heating and air-conditioning system which maintains a temperature comfortable to the beneficiary at all times.
4. Have functioning seat belts and restraints as required by federal, state, county or local statute or ordinance and:

- a) Have an easily visible interior sign that states: “ALL PASSENGERS MUST WEAR SEAT BELTS”,
 - b) Store seat belts off the floor when not in use,
 - c) Have at least two (2) seat belt extensions available, and
 - d) Be equipped with at least one (1) seat belt cutter within easy reach of the driver for use in emergency situations.
5. Have an accurate, operating speedometer and odometer.
 6. Be operated within the manufacturer’s safe operating standards at all times.
 7. Have two (2) exterior rear view mirrors, one (1) on each side of the vehicle.
 8. Be equipped with an interior mirror for monitoring the passenger compartment.
 9. Have a clean exterior free of broken mirrors or windows, excessive grime, major dents or paint damage that detracts from the overall appearance of the vehicles.
 10. Have a clean interior free of torn upholstery, floor or ceiling covering; damaged or broken seats; protruding sharp edges; dirt, oil, grease or litter; hazardous debris; or unsecured items.
 11. Display the NET Provider’s business name and telephone number in a minimum of three (3) inch high lettering in a color that contrasts with the surrounding background on at least both sides of the exterior of the vehicle and have:
 - a) No words displayed on the interior or exterior of the vehicle indicating Medicaid beneficiaries are being transported, or
 - b) A NET Provider’s business name which does not imply Medicaid beneficiaries are being transported.
 12. Have the license number and Broker’s toll-free and local phone numbers prominently displayed in the interior of each vehicle with complaint procedures clearly visible and available in written format upon request.
 13. Be non-smoking at all times with a visible interior sign that states: “NO SMOKING”.
 14. Have a vehicle information packet containing vehicle registration, insurance card, and accident procedures and forms.
 15. Be equipped with a first aid kit stocked with antiseptic cleansing wipes, triple antibiotic

ointment, assorted sizes of adhesive and gauze bandages, tape, scissors, latex-free or other impermeable gloves and sterile eyewash.

16. Contain a current map of the applicable geographic area with sufficient detail to locate beneficiary and provider addresses.
17. Be equipped with an appropriate working fire extinguisher stored in a safe, secure location.
18. Have insurance coverage for all vehicles at all times in compliance with state law and any county or city ordinance.
19. Be equipped with a “spill kit” that includes liquid spill absorbent, latex-free or other impermeable gloves, hazardous waste disposal bags, scrub brush, disinfectant and deodorizer.
20. Be in compliance with applicable Americans With Disabilities Act (ADA) Accessibility Specifications for Transportation.

B. The Broker must:

1. Ensure all NET Providers maintain all vehicles which meet or exceed local, state and federal requirements and the manufacturer’s safety mechanical operating, and maintenance standards.
2. Supply all NET Providers with a copy of the ADA vehicle requirements and inspect the vehicles for compliance during the scheduled bi-annual vehicle inspections.
3. Have in its network NET Providers with the capability to perform bariatric transports of beneficiaries up to eight hundred (800) pounds.
4. Maintain documentation on the lifting capacity of each vehicle in its network to timely schedule transports for beneficiaries requiring a lift.
5. Require every vehicle in a NET Provider’s fleet has a real-time link via a phone or two-way radio. Pagers are not acceptable as a substitute.
6. Test all communication equipment during regularly scheduled vehicle inspections.
7. Inspect all NET Provider vehicles prior to the Operations Start Date and at least every six (6) months thereafter.
8. Place the Medicaid approved inspection sticker on the outside of the passenger side rear window upon completion of a successful inspection.
9. Maintain records of inspections and make them available to Medicaid upon request.

C. Authorized employees of Medicaid or the Broker must immediately remove from service any vehicle or driver found to be out of compliance with Rule 2.1 or with any state or federal regulations.

1. The vehicle or driver may be returned to service only after the Broker verifies the deficiencies have been corrected.
2. Any deficiencies and actions taken to remedy deficiencies shall be documented and become a part of the vehicle's and the driver's permanent records.

Source: Miss. Code Ann. § 43-13-121

History: 04/01/2012