
CHAPTER 10: MEDICAL TRANSPORTATION

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SCHEDULING AND DISPATCHING

General Requirements

Requests for transportation may be made by beneficiaries, healthcare providers, or non-profit transportation providers. The transportation broker may not impose a limit on the number of appointments that may be scheduled by a beneficiary or healthcare provider during a single call. Under no circumstances may for-profit providers schedule trips on behalf of beneficiaries. This prohibition extends to healthcare providers who have an ownership interest in the transportation company.

To be eligible for reimbursement, Non-Emergency Medical Transportation (NEMT) trips must be reviewed by the transportation broker, prior to scheduling, for beneficiary eligibility and verification that the originating or destination address belongs to a medical facility. Additional approval requirements for out-of-state travel and commercial air are addressed in this Medicaid Provider Manual.

The transportation broker shall assign transportation providers on the basis of the least costly means available, including the use of free and/or public transportation when possible, with consideration given to the beneficiary's choice of transportation provider. The transportation broker shall ensure that the provider accommodates the level of service required to safely transport the beneficiary (e.g., ambulatory, wheelchair, transfer).

Beneficiaries shall be allowed a choice of providers when the costs of two or more providers are equal, according to LAC 50: XXVII 505(B). When multiple providers meet the least costly standard, the beneficiary may choose a preferred transportation provider, as outlined by the Louisiana Medicaid Plan, Attachment 3.1A, Item 24.a, Page 4, Section II.C.1.f4. When multiple providers meet the least costly standard, the transportation broker should dispatch trips to a provider whose primary service region for operation, according to the provider's Disclosure of Ownership Information Form for Entity and Business, is the same as the beneficiary's domicile and who is able to comply with all travel and wait time standards. The transportation broker is prohibited from dispatching trips to out-of-region providers, unless the transportation broker retains documentation to support that there is no willing and available provider in the administrative region¹ where the beneficiary is domiciled that is able to comply with time requirements or that the out-of-region provider is the least costly option.

With the exception of urgent transportation requests and discharges from inpatient facilities, beneficiaries and healthcare providers are expected to give at least 48 hours' notice when

¹ Defined as the LDH Administrative Regions as illustrated at <https://ldh.la.gov/index.cfm/page/2>.

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requesting transportation; however, the transportation broker must make a reasonable attempt to schedule the trip with less than 48 hours' notice.

The transportation broker shall make every effort to schedule urgent transportation requests and may not deny a request based solely on the appointment being scheduled less than 48 hours in advance. Urgent transportation refers to a request for transportation made by a healthcare provider for a medical service that does not warrant emergency transport but cannot be postponed. Urgent transportation shall include chemotherapy, radiation, dialysis, Opioid Treatment Program (OTP), or other necessary medical care that cannot be rescheduled to a later time. An urgent transportation request may occur concurrently with a standing order.

Transportation providers shall pick up beneficiaries no later than three hours after notification by an inpatient facility of a scheduled discharge or two hours after the scheduled discharge time, whichever is later. Examples are as follows:

1. If a medical facility notifies the transportation broker at 12:00 pm for a 12:30 pm discharge, the beneficiary shall be picked up no later than 3:00 pm;
2. If a medical facility notifies the transportation broker at 12:00 pm for a 2:00 pm discharge, the beneficiary shall be picked up no later than 4:00 pm; and
3. If a medical facility notifies the transportation broker at 8:00 pm for a 7:00 am discharge the next day, the beneficiary shall be picked up no later than 9:00 am.

The transportation broker shall allow beneficiaries who have recurring treatment and therapies, such as dialysis, chemotherapy, OTP, or wound care, to establish a standing order for transportation. This allowance shall extend to the healthcare facility providing the recurring treatment or therapies. The transportation broker shall assign transportation providers to the standing order on the basis of the least costly means available. If multiple transportation providers meet the least costly standard, the standing order should be scheduled with the same transportation provider to ensure continuity of care and to prevent missed treatments.

The standing order shall be flexible, allowing the beneficiary or healthcare facility to revise the pickup and/or drop-off time, incorporate additional recurring appointments, and change the completion date of treatment. The transportation broker shall update the standing order upon request of these changes and may not deny transportation associated with these changes. The transportation broker shall review all standing orders at least once per calendar month to ensure the agreement with the assigned transportation provider is the most cost-effective option available. Results of these reviews shall be retained and made available to LDH upon request.

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When a transportation provider cannot perform the service, the provider must immediately notify the transportation broker in order for the transportation broker to secure an alternate provider.

When the transportation broker is unable to fulfill a beneficiary's request for NEMT services after providing the beneficiary with a confirmation number for the requested transport, the transportation broker shall notify the beneficiary immediately that the transportation services will be canceled. The transportation broker shall notify the beneficiary of any other changes to trip details. Notifications shall be provided via telephone, electronic mail, or Short Message Service (SMS) text message, depending on the beneficiary's preferred method of communication.

The transportation broker shall monitor providers to ensure that they do not reject local trips in favor of long distance trips. Providers who exhibit a pattern of rejecting local trips may be subject to trip reductions or other sanctions, particularly if such action results in actual harm to a beneficiary or places the beneficiary at risk of imminent harm.

If a child is to be transported, either as the beneficiary or an additional passenger, the parent or guardian of the child is responsible for providing an appropriate child passenger restraint system as outlined by La. R.S. 32:295. The transportation broker is responsible for notifying the parents or guardians of this requirement when scheduling the trip.

Additional Passengers

The transportation broker must inform the transportation provider if a beneficiary intends to bring accompanying children or if an attendant is required.

The transportation broker shall prohibit transportation providers from charging the beneficiary or anyone else for the transportation of additional passengers and shall not reimburse any claims submitted for transporting additional passengers.

Children

The transportation provider may refuse to transport accompanying children.

Attendants

The transportation broker is responsible for determining if an attendant is required. If required, the attendant must accompany the beneficiary to and from the medical appointment. The following non-exclusive list of conditions may require an attendant:

1. Sensory deficits;

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2. Need for human assistance for mobility;
3. Dementia or other cognitive impairments;
4. At risk of elopement;
5. Behavioral disorders;
6. Need for interpretation or translation assistance; or
7. Special needs such as:
 - a. Convalescence from surgical procedures;
 - b. Decubitus ulcers or other problems which prohibit sitting for a long period of time;
 - c. Incontinence or lack of bowel control;
 - d. Assistance with toileting; and
 - e. Artificial stoma, colostomy or gastrostomy.

An attendant shall be required when the beneficiary is under the age of 17. This attendant must meet the following criteria:

1. Be a parent, legal guardian, or responsible person designated by the parent/legal guardian; and
2. Be able to authorize medical treatment and care for the beneficiary.

Attendants may not:

1. Be under the age of 17;
2. Be a Medicaid provider or employee of a Medicaid provider that is providing services to the beneficiary being transported, except for employees of a mental health facility in the event a beneficiary has been identified as being a danger to themselves or others or at risk for elopement; or

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3. Be a transportation provider or an employee of a transportation provider.