## **CHAPTER 10: MEDICAL TRANSPORTATION**

### **REVISION HISTORY LOG**

Revised/ Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
02/04/22		Table of Contents	3	Revisions made to update to alphanumeric formatting.
02/04/22	10.0	Overview	1	Revisions made to update to alphanumeric formatting.
02/04/22	10.1	Covered Services	3	Revisions made to update to alphanumeric formatting and revisions made to update the eligible expenses criteria.
02/04/22	10.2	Scheduling and Dispatching	5	Revisions made to update to alphanumeric formatting and revisions made to change the name of the section from "Scheduling and Authorization" to "Scheduling and Dispatching" as well as to update the general requirements criteria.
02/04/22	10.3	Provider Requirements	9	Revisions made to update to alphanumeric formatting.
02/04/22	10.4	Provider Responsibilities	4	Revisions made to update to alphanumeric formatting.
02/04/22	10.5	Record Keeping	2	Revisions made to update to alphanumeric formatting.

**ISSUED:** 

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02/04/22	10.7	Ambulance Overview	2	Revisions made to update to alphanumeric formatting.
02/04/22	10.8	Emergency Ambulance Transportation	3	Revisions made to update to alphanumeric formatting and revisions made to incorporate criteria for Emergency Action Procedure.
02/04/22	10.9	Non-Emergency Ambulance Transportation (NEAT)	3	Revisions made to update to alphanumeric formatting and revisions made to incorporate criteria for the following sections: Out-of-State Transportation, Scheduling and Dispatching, Additional Passengers, and Attendants.
02/04/22	10.10	Air Ambulance	1	Revisions made to update to alphanumeric formatting.
02/04/22	10.12	Ambulance – Return Trips and Transfers	1	Revisions made to update to alphanumeric formatting.
02/04/22	10.13	Ambulance – Claims and Encounters	6	Revisions made to update to alphanumeric formatting.
02/04/22	10.14	Record Retention	1	Revisions made to update to alphanumeric formatting.
02/04/22	10.15	Appendixes	1	Revisions made to update to alphanumeric formatting.

## LOUISIANA MEDICAID PROGRAM

**ISSUED:** 

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02/04/22	10.15.1	Contact Information	1	Revisions made to update to alphanumeric formatting.