STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE OF ALABAMA
METHODS OF PROVIDING TRANSPORTATION

Effective Date: 02/01/09
The Alabama Medicaid Agency assures that necessary transportation of recipients to and from sources of medical care will be provided as follows:

I. Non-emergency Transportation Services - Ambulance:

A. All non-emergency ambulance services rendered to eligible Alabama Medicaid recipients for trips over 100 miles one way, where medical care is received requires prior authorization. Certification that medical conditions warrant the use of ambulance services are required by the attending physician.

B. Non-emergency ambulance service is provided to eligible recipients who must be bed-confined or have debilitating physical condition(s) that require travel by stretcher only and require ground transportation to receive medical services.

Effective Date: 12/01/14
II. Non-emergency Transportation Services:
Any appropriate means of transportation which can be obtained without charge through volunteer groups, nonprofit organizations, public services, relatives or other persons is the preferred method of transportation. If transportation is not available without charge, the Alabama Medicaid Agency will make reimbursement for non-emergency transportation, with the exception of ambulance transports, directly to the recipient through an Electronic Benefit Transfer (EBT) system. The state will have on file the rates charged by the major transporters across the state. When a recipient requests assistance, the reimbursements will be issued based on the most cost-effective rate for the appropriate mode of transportation, considering the rates for the particular area and the options available to the requesting recipient.

The NEMT Program provides necessary non-ambulance transportation services to Medicaid recipients. Medicaid pays for rides to a doctor or clinic for medical care or treatment that is covered by Medicaid. The types of transportation being provided are: a) automobile (volunteer driver); b) friends; c) Medicaid recipient’s/relative’s vehicle; d) wheelchair van services; e) bus (commercial or city transit); f) airplane; and g) train service. Medicaid will not reimburse services if recipient has access to free transportation, except in the case of evident hardship.

NEMT – Call Center and NEMT staff are responsible for screening beneficiaries for eligibility for a ride.

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Escorts are covered if their presence is required to assist a recipient during transport while at the place of treatment. Only one escort is covered per recipient in need and the recipient must prove an identifiable need for the escort. The escort cannot be an employee of a NEMT transporter. Medicaid allows escorts for recipients under the age of 21. Escort services are utilized in-state or out of state for recipients over 21 years of age when a physician’s statement documents that an escort is required because the recipient is blind, deaf, intellectually disabled or mentally ill or physically handicapped to such a degree personal assistance is necessary.

The recipient or his/her representative arranges the ride by calling the Medicaid toll free number in advance of the need for the ride. Rides can also be arranged through a facility social worker.

A maximum of one round trip may be reimbursed per date of service per recipient, without prior authorized exception. The most inexpensive mode of transportation that meets the recipient’s needs must be used. The recipient must be traveling to a Medicaid covered service with a Medicaid provider. Recipients must contact the Agency to request transportation assistance five days prior to the needed transportation or within 24 hours after urgent care appointments. Medicaid does not pay for ride to the emergency room for a problem that can wait until the doctor’s office or clinic is open.

For out-of-state transportation, the recipient’s physician must provide a statement that justifies the need for out-of-state services and assure that such services cannot be obtained in-state. The NEMT Coordinator requests this information from the recipient’s physician. The Coordinator then provides this information to their supervisor who submits it for review to Alabama Medicaid’s Medical Review Team who will approve or deny the need for out of state transportation. For long distance travel, the recipient’s physician must certify that the treatment is not available locally and the location of the closest available treatment. When overnight travel is necessary, Medicaid pays for meals and lodging for the recipient and one escort (when authorized). Medicaid must receive receipts or confirmation of expenses before reimbursement can be made. Reimbursement will not exceed $50 per person, per day. NEMT reimbursements will be issued for transportation costs to and from covered necessary medical services for which the recipient has benefits available.

The NEMT system verifies eligibility, appointments, mode of transportation, calculates and issues reimbursements for the trip. NEMT reimburses ambulatory and wheelchair transportation. The least costly mode of transportation appropriate to the needs of the recipient must be used. A tiered fee payment structure is utilized based upon factors such as: mileage; clients physical, mental or medical condition; whether the beneficiary is ambulatory or recumbent; prevailing rates in the region; availability of transportation resources; level of appropriate transportation required; and whether they are transported by a family member, commercial carrier, or ambulance provider.

Internal audits are performed by NEMT Staff.

NEMT is provided under the administrative option and is matched at 50%.
III. Non-emergency Transportation Services – Other:
Non-Emergency Medical Transportation for clients receiving allowable mental health services at Community Mental Health Centers are provided through contract with the Alabama Department of Mental Health (DMH).

Medicaid reimburses DMH as stated in Attachment 4.19-B, Page 14.a, Section 27.

The Alabama Medicaid Agency attests that all minimum requirements that ensure any provider (including a transportation network company) or individual driver of non-emergency transportation to medically necessary services receiving payments under such plan (but excluding any public transit authority), outlined in 1902(a)(87) of the Consolidated Appropriations Act, 2021 are met.
IV. Emergency Transportation Services - Ambulance:

All emergency ambulance transportation must be medically necessary and reasonable. No payment may be made for emergency ambulance services if some other means of transportation could be utilized without endangering the recipient's health.

A. Emergency ambulance services are provided to eligible recipients between:

(1) Scene or address of emergency and hospital.
(2) Nursing home and hospital.
(3) Local hospital and specialized hospital.
   Example: From Montgomery to University of Alabama Hospital in Birmingham.

B. Certification that medical conditions warrant the use of ambulance services are required by the attending physician.

V. Air Transportation Services:

A. Air Transportation services are covered for adults and children.

B. Air transportation may be rendered only when basic and advanced life support land ambulance services are not appropriate.

C. All air transportation services must be approved by Alabama Medicaid prior to payment.