FREQUENTLY ASKED QUESTIONS (FAQs)

Non-Emergency Ambulance Services Shift from HealthChoice IL (HCI) Managed Care Organization (MCO) Plans to Fee-for-Service (FFS)

- 1. Why is this change taking place? This change is a result of Public Act 102-0661.
- 2. When will this change go into effect? January 1, 2022.
- 3. Will this change also affect the Medicare Medicaid Alignment Initiative (MMAI) Managed Care Organization (MCO) customers? No, MMAI MCO plan customers will continue to request non-emergency transportation services through their appropriate MCO/transportation broker.
- 4. What timeframe is needed to schedule trips? For both single trip requests and standing orders, preferably 7 days in advance of the trip date.
- 5. When non-emergency ground ambulance transport is needed, who can coordinate or schedule a trip for a customer? A customer, care coordinator, non-emergency transportation provider, MCO transportation broker or any other HIPAA designated person can request services on behalf of a customer by contacting First Transit's Customer Line: 877-725-0569 or Non-Emergency Transportation Provider Line: 866-503-9040.
- Which non-emergency ground ambulance transportation codes will be moving from HealthChoice IL Managed Care Organization (MCO) Plans to the FFS side for handling? A0422, A0425, A0426, A0428, A0433, A0434
- 7. How will non-emergency transportation providers know who to contact to book an ambulance trip request for an MCO customer? Utilize MEDI to look up a customer's eligibility status.
 - If a customer is enrolled in an MCO (including customers enrolled in MLTSS programs) and has an exclusion code of 6 (or exclusion code 3 under Meridian's YouthCare Plan) this customer is in a HCI MCO Plan. For these customers, contact First Transit Non-Emergency Transportation Services Prior Approval Program (NETSPAP) for assistance with any nonemergency ground ambulance transportation.
 - If the customer is currently in an MCO and has an active exclusion code of 8, this customer is enrolled in the MCO's MMAI Plan. For these customers, contact the appropriate MCO broker to request non-emergency ground ambulance transportation.
- 8. How will the prior approval process and billing work for this change be handled?
 - HCI MCO customers with exclusion code 3 or 6 (see eligibility status listed in MEDI –
 example screen shot below) should request prior approval from First Transit for nonemergency ambulance services not covered by Medicare and will bill HFS for these services.
 - MMAI customers (identified in MEDI with exclusion code 8) will go through the appropriate MCO/Broker process for prior authorization and providers will submit claims to Medicare and/or the appropriate MCO.

Managed Care Organization				
Plan Code:	19	Site Name:	MERIDIAN HEALTH PLAN INC MMCP	
Exclusion Code:	<mark>6</mark>	Organization Name:	MERIDIAN HEALTH PLAN OF ILLINO	
Site Number:	001	Organization Phone:		
Begin Date:	05/09/2022	Street:	222 N LA SALLE ST	
End Date:	05/09/2022	City - State - Zip:	CHICAGO, IL 60601	
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MCO Program Code (Exclusion Cd)	MCO Program Code Description	
3	DCFS	
6	Health Choice, IL (MMCP)	
8	Medicare Medicaid Alignment Initiative (MMAI).	

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- 9. Is emergency ground ambulance also handled by FFS? Yes
- 10. Will air ambulance transport be moving from MCOs to the FFS for processing? No
- 11. Beginning 1/1/22, who should providers and/or customers contact to request non-emergency ground ambulance transportation trips?
 - Non-emergency providers should contact First Transit at: 866-503-9040 (Monday Friday, 8am to 5pm CST).
 - MCO customers and/or medically-authorized representatives calling on behalf of customers may contact First Transit at: 877-725-0569 (Monday-Friday, 8am to 5pm CST).
- 12. What are the timely filing requirements for my transportation company to submit any trips that require post approval consideration (i.e. trips occurring after hours, weekends, holidays, etc.)? First Transit processes post authorization requests made within 30 calendar days of the date of service. Requests must include the same information as required for a prior authorization. Requests submitted to First Transit for transports beyond 30 calendar days of the date of service will be denied. See 89 Illinois Administrative Code Section 140.491 and the HFS Transportation Handbook for further information.
- 13. How will downgraded trips be handled? First Transit will deny the trip if it does not meet medical necessity. The non-emergency transportation provider will be responsible for following-up with the appropriate MCO/Broker for payment. An ambulance provider may appeal a decision by the Department or its authorized approval agents.

First Transit receives appeal packets mainly by mail from the ambulance transportation providers. The materials submitted in the packets are digitized and each packet is date stamped and assigned an individual tracking number. Per administrative rule, First Transit conducts an informal review within 60 days of the receipt of the appeal packet. The purpose of the review is to determine whether the submitted documentation is sufficient to reverse the original denial. If the submitted documentation does not support an approval of an ambulance transport, the original denial is affirmed. First Transit mails out written responses for each appeal, notifying the providers of the result of the informal review. The ambulance provider has the right to request a formal hearing through HFS Fair Hearings regarding this decision. Please see 89 Illinois Administrative Code Section 140.491 for further information in this regard. Providers should not attempt to bill an MCO for a downgraded trip if they have filed an appeal with the Department.

- 14. Is there an online portal that non-emergency transportation providers can access requests for a non-emergency ambulance trip for a customer? Non-Emergency transportation providers can utilize First Transit's PassPORT portal to book trips. PassPORT's direct link is PassPORT and instructions on how to access can be located at the following link PassPORT Instructions.
- 15. How will First Transit determine the need for a non-emergency ground ambulance transport? First Transit asks a series of questions to assess whether a customer requires an ambulance transport. An MCO or MCO broker should not attempt to upgrade a trip to an ambulance category of service if no medicar or service car provider can be located for a trip. First Transit will not approve an ambulance transport for a customer unless it meets medical necessity. In these situations, the MCO would be responsible for handling the transport request for the customer. Providers can access the HFS 2270 PCS form on the Medical Forms page. First Transit currently assesses for the appropriate level of service based on medical necessity.

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- 16. How will the call be handled if First Transit determines an ambulance level of transport is not medically necessary? If it is determined that the MCO customer does not meet the medical necessity criteria for ambulance transport, First Transit will advise the caller to contact the appropriate MCO/Broker. If the customer disputes this decision, the request will be reviewed by nursing staff at First Transit. First Transit will notify the customer of a final decision regarding the appropriate level of service for the requested trip within 1 business day.
- 17. What happens if a call is misdirected for ambulance (i.e. the MCO customer needs a medicar or service car transport)? First Transit will advise the caller to contact the appropriate MCO/Broker.
- 18. How will Hospital to Hospital trips be affected by this change? Hospital to hospital transports are only covered by the Department for a higher level of care (i.e., medically necessary services not available at the originating hospital) and do not require prior approval from First Transit.
- 19. If an ambulance transport is denied for medical necessity, can the provider bill the member? No.