

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201835 JULY 25, 2018

IHCP further clarifies requirements for brokered NEMT services for dually eligible members

The Indiana Health Coverage Programs (IHCP) published clarification about nonemergency medical transportation (NEMT) for dually eligible members in *IHCP Bulletin BT201834* on July 10, 2018. For members enrolled under the eligibility categories *Specified Low Income Medicare Beneficiary (SLMB) plus Full Medicaid (SLMB-Also)* and *Qualified Medicare Beneficiary (QMB) plus Full Medicaid (QMB-Also)*, corrected guidance is being issued.

Members in the SLMB-Also and QMB-Also eligibility categories have Medicare coverage as well as full Medicaid coverage. Nonemergency transports of members in these categories who live at home or reside within a facility who need basic life support (BLS) or advanced life support (ALS) services during transport or who need transport via stretcher, require ONLY LIMITED coordination with Southeastrans, because Medicare generally covers this type of transportation with proof of medical necessity. The correct guidance for these scenarios is as follows:

- The transport should be scheduled directly with the emergency medical services (EMS) transportation provider.
- Advanced reporting to Southeastrans to secure a Trip Leg ID is not necessary.
- The transport should be billed to Medicare as the primary payer.
- If the Medicare claim is denied, or paid but a balance remains for the member's coinsurance or deductible amount, the provider may submit the claim to Southeastrans on a *CMS-1500* claim form with the Medicare explanation of benefits (EOB) attached for reimbursement consideration.

The table published in the initial bulletin is reprinted below with the corrections **bolded** for emphasis.

Table 1 – Coverage and Southeastrans coordination requirements for IHCP dually eligible members, effective for dates of service on or after June 1, 2018

Eligibility category	Medicaid coverage	Has coverage for NEMT?	Coordination with Southeastrans required?	Southeastrans coordination requirements specified
Qualified Disabled Working Individual (QDWI)	Eligible for payment of Medicare Part A premiums only	No	N/A	N/A
Qualified Individual (QI)	Eligible for payment of Medicare Part B premiums only	No	N/A	N/A

continued

Table 1 – Coverage and Southeastrans coordination requirements for IHCP dually eligible members, effective for dates of service on or after June 1, 2018 (continued)

Eligibility category	Medicaid coverage	Has coverage for NEMT?	Coordination with Southeastrans required?	Southeastrans coordination requirements specified
Specified Low Income Medicare Beneficiary (SLMB-Only)	Eligible for payment of Medicare Part B premiums only	No	N/A	N/A
Qualified Medicare Beneficiary (QMB-Only)	Eligible for payment of Medicare coinsurance and deductibles, Medicare Part A premiums (if any), and Medicare Part B premiums only	No	N/A	N/A
SLMB plus Full Medicaid (SLMB-Also)	Eligible for payment of Medicare Part B premiums and full Medicaid benefits	Yes	Yes	If member lives in his or her own home, ambulatory or wheelchair NEMT services must be scheduled directly with Southeastrans.
			Yes	If member is in a facility (such as a hospital, nursing home, skilled nursing, or other long-term care facility), ambulatory or wheelchair NEMT services must be scheduled directly with Southeastrans.*
			Limited	If member at home or in a facility (such as a hospital, nursing home, skilled nursing, or other long-term care facility) receives NEMT services but needs BLS/ALS services during transport or transport via a stretcher , the trip should be scheduled directly with EMS transportation provider and billed to Medicare as the primary payer. (Denied claims or paid claims with balances for coinsurance or deductibles may be subsequently billed to Southeastrans with the Medicare EOB attached.)

continued

Table 1 – Coverage and Southeastrans coordination requirements for IHCP dually eligible members, effective for dates of service on or after June 1, 2018 (continued)

Eligibility category	Medicaid coverage	Has coverage for NEMT?	Coordination with Southeastrans required?	Southeastrans coordination requirements specified
QMB plus Full Medicaid (QMB-Also)	Eligible for payment of Medicare coinsurance and deductibles, Medicare Part A premiums (if any), and Medicare Part B premiums and full Medicaid benefits	Yes	Yes	If member lives in his or her own home, ambulatory or wheelchair NEMT services must be scheduled directly with Southeastrans.
			Yes	If member is in a facility (such as a hospital, nursing home, skilled nursing, or other long-term care facility), ambulatory or wheelchair NEMT services must be scheduled directly with Southeastrans.*
			Limited	If member at home or in a facility (such as a hospital, nursing home, skilled nursing, or other long-term care facility) receives NEMT services but needs BLS/ALS services during transport or transport via a stretcher , the trip should be scheduled directly with EMS transportation provider and billed to Medicare as the primary payer. (Denied claims or paid claims with balances for coinsurance or deductibles may be subsequently billed to Southeastrans with the Medicare EOB attached.)

**Through September 30, 2018, these transports may be arranged directly with EMS providers if facilities have established, ongoing arrangements in place. Information about this transition period was published in IHCP Bulletin [BT201830](#).*

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