

STATE PLAN UNDER XIX OF THE SOCIAL SECURITY
ACT

State of Indiana

METHODS OF PROVIDING TRANSPORTATION

Transportation to and from an Indiana Medicaid covered service is provided as an optional service under this State Plan by the following methods:

- When transportation is unavailable from a non-Medicaid reimbursed source, with the exception of Medicaid payments for family member mileage, Indiana Medicaid reimburses Medicaid-enrolled vendors for the least expensive type of emergency and non-emergency transportation available that meets the medical needs of the recipient.
- Transportation reimbursement includes the cost of meals and lodging en route to and from medical care and while receiving medical care, and the cost of an attendant to accompany the beneficiary, if necessary, and the cost of the attendant's transportation, meals, lodging, and, if the attendant is not a member of the beneficiary's family, a salary.
- Prior authorization is required for the following transportation services:
 - Interstate transportation or transportation services rendered by a provider located out- of-state in a non-designated area
 - All out of state pick up and destination locations, except in designated sister cities
 - Train services
 - Bus services for trips of 50 miles or more one-way
 - Airline or air ambulance services
- The following transportation services do not require prior authorization :
 - Emergency transportation services when destination is a hospital emergency department
 - Transportation for hospital admissions or discharges
 - Transportation for recipients on renal dialysis
 - Transportation for recipients residing in nursing homes
- An NEMT broker is responsible for the administration of non-emergency transportation for all fee-for-service members eligible for transportation services, except for the following non-brokered services:
 - Non-emergency transportation services for basic life support and advanced life support ambulance transportation.
 - Non-emergency transportation services for members residing in nursing facilities.

- Members enrolled in risk-based managed care receive non-emergency transportation through an NEMT broker contracted with the managed care entity.
- Family members enrolled as transportation providers are eligible for reimbursement for mileage only. Family members or close associates must be enrolled as an Indiana Medicaid provider. Trips are approved by the appropriate NEMT broker. This benefit is provided as an administrative service.

Any provider (including a transportation network company) or individual driver of non-emergency transportation to medically necessary services receiving payments under the State Plan must meet specified minimum requirements:

These minimum requirements include:

- (A) Each provider and individual driver is not excluded from participation in any federal health care program (as defined in section 128B(f) of the Act) and is not listed on the exclusion list of the Inspector General of the Department of Health and Human Services;
- (B) Each such individual driver has a valid driver's license;
- (C) Each such provider has in place a process to address any violation of a state drug law; and
- (D) Each such provider has in place a process to disclose to the state Medicaid program the driving history, including any traffic violations, of each such individual driver employed by such provider, including any traffic violations.