



## Memorandum

Date: May 1, 2015

To: Provider staff arranging travel for Medicaid beneficiaries

From: Margaret Brodie, Director

Subject: Medicaid policy clarification for non-emergent out of area travel

This memo provides formal guidance and clarification concerning existing Alaska Medicaid travel policy.

Program members may qualify for travel benefits outside the member's local area when approved by prior authorization under Department regulations [7AAC 105.130(a)(1); 7AAC 120.410]. Medicaid may also authorize an escort to accompany a member requiring travel under certain circumstances [7AAC 120.430]. An overview of relevant Department policies is available in our provider manual electronically (<http://manuals.medicaidalaska.com/physician/physician.htm>).

The attached tables are intended to help guide providers arranging Medicaid travel, who may refer to the examples listed to determine whether a particular member's trip may qualify for coverage, and whether an escort may be authorized. The examples apply to non-emergent out-of-area travel, and are grouped by member age: 21 years or under vs. 22 years or older for the travel benefit itself; 17 years or under vs. 18 years or older for possible escort coverage. The Department's fiscal intermediary, Xerox, will continue to be responsible for approving member travel, and will use this guidance when making determinations.

In accordance with regulations concerning sustained fiscal integrity of Medicaid and avoidance of waste and abuse [7 AAC 105.130(c)(2)-(3)], travel may not be arranged for members' personal needs. Travel arrangers should attempt to coordinate appointments so that all necessary provider visits may occur during a single trip when possible. Attempts should also be made to coordinate appointments into a single trip when multiple members within a family need care.

## Non-Emergent Out of Local Area Medical Travel Policy Medicaid Member Policy Clarifications

Policy Clarifications and Examples	Child (21 years or younger)	Adult (22 years or older)
<b>Non-emergent diagnostic or treatment services</b> available locally by CHA, licensed provider, and/or telemedicine, or expected to be locally available within 3 months (by traveling provider or by telemedicine)	Not covered	Not covered
<b>Non-emergent diagnostic or treatment services</b> recommended by non-licensed provider (e.g. CHA, medical assistant) without consulting licensed provider.	Not covered	Not covered
<b>Non-emergent diagnostic or treatment service</b> determined by a licensed provider (MD, ANP, PA, DMD) to be medically necessary for a specific condition at a level higher than available locally or with telemedicine, and not expected to be available for at least 3 months.	Covered	Covered
<b>Non-emergent diagnostic or treatment service</b> expected to be locally available within 3 months, but licensed provider specifies that care is needed before available locally	Covered, with letter of medical necessity <sup>1</sup> from appropriate licensed provider <sup>2</sup>	Covered, with letter of medical necessity <sup>1</sup> from appropriate licensed provider <sup>2</sup>
<b>Screening:</b> Routine screening colonoscopy or flexible sigmoidoscopy	N/A	Not covered
<b>Screening:</b> Other recommended <b>adult</b> preventive services not available in local community (e.g., screening women exams, routine immunizations, routine vision screens)	N/A	Covered, with letter of medical necessity <sup>1</sup> from appropriate licensed provider <sup>2</sup>
<b>Pediatric screening:</b> Recommended preventive services not available in local community from CHA or licensed provider, and not expected to be available within three months	Covered	N/A
<b>Therapies (PT/OT/Speech):</b> non-emergent behavioral health care or therapeutic services which are not available locally or by telemedicine, and not expected to be available, with no letter from provider.	Not covered	Not covered
<b>Therapies (PT/OT/Speech):</b> as above, with letter from provider, or with ILP plan for children 3 and under.	Covered	Covered
<b>Therapies (Behavioral Health):</b> member requires behavioral health counseling services but has personal relationships with all local counselors and behavioral telehealth is unavailable	Covered, with letter of medical necessity <sup>1</sup> from appropriate licensed provider <sup>3</sup>	Covered, with letter of medical necessity <sup>1</sup> from appropriate licensed provider <sup>3</sup>

<sup>1</sup> Letter of medical necessity must be signed and dated, and must include:

- Provider name and Medicaid ID number
- Member's name and Medicaid ID number
- A detailed explanation why travel is medically necessary
- Explanation why services cannot be performed locally or through telemedicine; if local services will be available within 3 months, why the member cannot wait until an appropriate provider is available locally.

<sup>2</sup> MD, ANP, PA, DMD

<sup>3</sup> MD, ANP, PA, psychologist, social worker, mental health clinician

**Non-Emergent Out of Local Area Medical Travel Policy  
Escort Policy Clarifications**

Policy Clarifications and Examples	Child (17 years or younger)	Adult (18 years or older)
Adult member receiving screening or preventive services	N/A	Not covered
Adult member with limited English language ability	N/A	Not covered
Elderly member who is <b>not</b> mobile or who cannot ambulate on his/her own or with cane/walker	N/A	Covered
Elderly member who is mobile and able to ambulate on his/her own or with cane/walker	N/A	Not covered
Member with significant cognitive or physical dysfunction from developmental disability or from acquired conditions such as stroke or dementia.	Covered	Covered
Developmentally disabled <b>adult</b> , without significant cognitive dysfunction or physical disability (e.g., CP or muscular dystrophy)	N/A	Not covered
Confined to a wheelchair or blind	Covered	Covered
Member age 21 years or younger who does not meet PA criteria for travel coverage	Not covered	Not covered
Member age 17 or younger, who does meet criteria for travel coverage	Covered	N/A
Member age 18-21, who meets criteria for travel coverage, but does not meet adult escort criteria	Not covered	Not covered
Member age 18-21, who meets criteria for travel coverage, and also meets adult escort criteria	Covered	Covered