



Alaska Medical Assistance

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Remittance Advice (RA) Message

Title: **Procedure Code Required on Nonemergency Ground Transportation Claims**

Issue Date: 05/21/2019

Run Length: 8 weeks

Provider Type(s): 83, 84, 86, 90, 100

Message: Effective for dates of service on or after July 1, 2019, claims submitted by nonemergency ground transportation providers must include the appropriate provider-specific procedure code in field 17 of the AK-04 or 24d of the CMS-1500:

Procedure Code

A0100 – Taxi

A0120 – Bus and Ferry

A0130 – Wheelchair Van (urban)

A0130 TN – Wheelchair Van (rural)

Claims for dates of service on or after July 1, 2019 that are submitted without the appropriate provider-specific procedure codes will be denied.