



Alaska Medical Assistance

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Remittance Advice (RA) Message

Title: **Providers Should Utilize Service Authorization Forms for Local and Out-of-Area Travel Requests**

Issue Date: 08/10/2021

Run Length: 6 weeks

Provider Type(s): 001, 002, 003, 005, 008, 012, 020, 021, 025, 030, 033, 034, 035, 036, 039, 040, 041, 042, 043, 045, 046, 051, 054, 055, 056, 075, 081, 107, 108, 110, 112, 114, 116

Message: Alaska Medicaid has two forms available for requesting travel service authorizations (SA) titled Local Travel Service Authorization Request and Out-of-Area Travel Service Authorization Request. The Local Travel Service Authorization Request form must be used when requesting a travel SA for a member traveling within their home community to receive medical care. This form contains fields for notating all travel to and from medical appointments for a single member within a single calendar month. The Out-of-Area Travel Service Authorization Request form must be used by providers submitting 10 or more travel requests at a time; travel requests may only be for members traveling outside of their home communities to receive medical care.

Both forms are available on the [Alaska Medicaid Forms](#) page under Service Authorization Forms.

Questions? Please contact Provider Inquiry at 907.644.6800, option 1, 1, or toll-free in Alaska at 800.770.5650, option 1, 1, 1.