

## Non-Emergency Medical Transportation for Traditional Medicaid: Southeastrans Frequently Asked Questions

On June 1, 2018, the Indiana Family and Social Services Administration began working with Southeastrans to manage all non-emergency transportation for Traditional Medicaid members (you may also see this called “fee-for-service” Medicaid.) This includes any member who is NOT in a managed care program such as Hoosier Healthwise, Hoosier Care Connect or the Healthy Indiana Plan.

Please find on the following pages answers to commonly asked questions regarding non-emergency medical transportation for Traditional (fee-for-service) Medicaid members.

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### Transportation Providers

Below are some of our most frequently asked questions that give you guidance on managing issues that may arise during the business day. Remember that many of your questions can be answered by referring to your Provider Handbook and other guides and manuals available on the provider portal.

#### 1. Who is my main point of contact when I have problems I can’t resolve using guides and materials you’ve provided?

The Provider Relations Manager is here to support you and your company. We have two Provider Relations Managers, Kristy Swoveland – Central and Northern region. She can be reached via cell phone at 765-602-6004. For the Southern region please email [DriveIN@Southeastrans.com](mailto:DriveIN@Southeastrans.com).

#### 2. What is the best way to contact the Provider Relations Manager?

With E-mail correspondence you can include many details and it has been found to be the best way to contact the Provider Relations Manager. They can forward the issue if input is needed from other departments.

Calling or texting is a good option if a quick response is needed. But keep in mind that sometimes the Provider Relations Manager can text, but cannot talk, or vice versa at that time.

#### 3. What are the types of services provided to members?

##### Curb-to-curb transport

The passenger waits outside their home, waiting for the driver to arrive. The driver will pull up and stop in front of the curb and assist the passenger onto the vehicle if they require it. Once they arrive at the destination, they will assist the passenger out of the vehicle and not leave until the member safely enters the doorway of the destination.

##### Door-to-door transport

Door-to-door service includes everything described above and also includes assisting the passenger to/from the door of their residence or destination. On the ride back, the rider will assist the passenger all the way back to their door. Going

the extra twenty steps or so ensures the safety of passengers and offers them peace-of-mind knowing that they will have assistance throughout the entirety of the trip.

#### Hand-to-hand transport

Hand-to-hand service includes everything described above but includes receiving the passenger from a caregiver and handing them off to a caregiver at the drop-off. This service is for members who do not have an escort but are too vulnerable to be left to navigate alone. Drivers do not function as caregivers or escorts and are not required to wait during the members appointment.

#### Bed-to-bed transport

Bed-to-bed transport is always the case for passengers who are transported on a stretcher. The EMS crew will transfer the passenger from their bed to the company's stretcher for the transport and then will transfer the passenger from the company's stretcher to the receiving facility's bed for treatment.

### **4. How long can a member be on our vehicle?**

The member must not be in the providers vehicle longer than 45 minutes more than the average travel time for direct transport from point of pick-up to destination. Example: If the trip takes 15 minutes, the member cannot be in the vehicle longer than 1 hour.

### **5. What is considered being on-time for a member drop off?**

Providers shall deliver members to their destinations on or before for their scheduled appointment time. Example: If the appointment is at 9:00 a.m. 9:01 a.m. is late.

### **6. What is considered a Member No-Show?**

It is considered a member no-show when the transportation provider is at the correct address for 10 minutes and the member is not available for pickup. This must be reported to Southeastrans Dispatch or recorded on the iPad before leaving the pick-up location. Drivers not using the iPad must be released by Southeastrans Dispatch prior to leaving to avoid possible liquidation.

### **6. What is considered a Provider No-Show?**

It is considered a provider no show if the driver does not arrive for pickup at the correct address in such time as to get the member safely and timely to their appointment.

### **7. How soon are manifests available for me to see?**

Providers can see their manifests 30 days in advance through the portal. We recommend reviewing your manifest at least once a day. When reviewing your manifest, you should be looking at all your trips for the next week as trips are added throughout the day.

### **8: What happens to the manifest if I'm assigned a trip in less than the 2 days?**

If a trip is assigned to you and the trip pickup time is less than 24 hours out, the manifest will be updated immediately. You will receive a call to accept this trip verbally before it is added to your manifest.

If the trip pickup time is less than 48 hours out but more than 24 hours from when it is assigned to you, it will go within the next 4-hour timeframe. These updates are sent at 8 am, 12 pm, 4 pm, midnight, and 4 am. You will receive a call to accept this trip verbally before it is added to your manifest.

If the trip pickup time is more than 48 hours from the time it is assigned to you, it will go out with the midnight update.

## **9. How do I send back trips we don't want?**

When declining to provide trips that you cannot accommodate, you must give at least 2 business days' notice for Southeastrans to find transportation for the member. Saturdays, Sundays and holidays are not business days. Please refer to the table in your Provider Handbook for the dates to send back trips to avoid possible liquidations.

## **10. Who do I contact when having issues with my iPad?**

If portal and iPad issues arise please e-mail [isupport@southeastrans.com](mailto:isupport@southeastrans.com).

## **11. Can I access multiple pickup and drop off records at the same time on the iPad?**

You can only access one (1) pickup or drop off record at a time.

## **12. I pressed 'Done' on the iPad, but I see an hourglass. What should I do?**

This means the device has poor internet reception. The record will upload once the iPad is in an area with better reception. The driver should never press the 'Done' button on the iPad a second time.

Continue with your next appointment. **\*\*Do not press 'Done' again. Pressing 'done' again can often lead to having the claim denied.\*\***

## **13. Why are my pickup or drop off records still on the iPad?**

This means the pickup or drop off records were not successfully completed. Submit the missing record on a paper trip reimbursement form (TRF) and delete the record from the device.

## **14. Can I get the member's signature en route to the drop off destination?**

No. Our application is GPS-driven and will record the geocode of the location when tapping on "Member's Signature." All records must be completed at the time and point of pickup and drop off.

## **15. I am using the same device a previous driver was using and I do not see my trips listed. What do I do?**

The device could still be signed in under another driver. Tap on the gear icon on the top left corner and choose Logout. Then log in using your id.

## **16. Who is my claims rep and what is their contact number?**

The IN Claims Account Representative is:

- LaShawn Barnes      [lbarnes@southeastrans.com](mailto:lbarnes@southeastrans.com)      Desk Phone      317-613-0838
- You can also send your claims issues to [INclaims@southeastrans.com](mailto:INclaims@southeastrans.com)

## **17. What are the space and time denials? Define SDV and STV.**

The SDV denials are incurred when the driver did not press the "DONE" icon at the point and time of service. STV denials

are incurred when the driver mixes up A or B Leg records. This error will cause a large time stamp variance on the Leg. When resubmitting your claims, you should correct and initial any times or mileages if needed. Provide an explanation to the best of your abilities as to what cause the SDV/STV denial.

#### **18. Why is my deposit different than my pay period report?**

If your reimbursement amount differs from the reimbursement reports, you may have contractual deductions. The descriptions of the deductions are reflected on your check stub or direct deposit advice.

#### **19. When will my direct deposit show in my account?**

Direct deposits should reflect in your account on the reimbursement date, or on the following business day. Contact your financial institution for the time funds will be available. Your Financial Institution may apply additional restrictions.

#### **20. I certified a trip and now it shows an invalid trip ID. Why?**

After 60 days Leg IDs in the iPortal will shift to an "Unknown" status and reflect as invalid. This is because the iPortal will not update our main system after 60 days. It is very important to submit all claims and try to have them completely reconciled before 60 days. Otherwise, you will need to rely on reviewing your reimbursement reports for the status of Leg IDs older than 60 days.

#### **21. Where can I find denial codes, and what do they mean?**

Denial codes are located on the Portal in the Knowledge Base. (<https://southeastrans.zendesk.com/entries/23479796-Current-Claim-Denial-Codes>)

#### **22. How long do I have to resubmit corrections to a denied claim?**

Resubmission of denied or disputed claims must be received within thirty (30) days of denial date for consideration.

#### **23. Where can I get an understanding of all the terms related to claims denials?**

Please refer to your Provider Handbook or provider portal for detailed information and definitions for claims denial terms and codes.

#### **24. How can I get more trips?**

- Look at the available trips in your portal.
- You may want to talk to the Provider Relations Manager about expanding your service days/hours.
- Make sure you get your members to their appointments on time, transportation providers who have consistent issues with their on-time performance will be assigned less trips.
- Avoid complaints. Members who have consistent valid complaints with your service can request not to be assigned to your company again.

#### **25. When do I report an injury?**

Immediately. You should call the Provider Dispatch line at 855-325-7611 to report an accident/incident/injury immediately. Follow up with a written accident/incident report within 24 hours.

#### **26. I received a Request for Explanation (RFE), what is it?**

- A Request for Explanation indicates Southeastrans has received an inquiry or someone has reported a potential concern and we want to obtain and document your side of the story.
- Please be sure to complete the entire RFE before returning it.
- You must return the completed RFE within 24 hours of receiving it.

**27. Who do I contact if I have issues with a member?**

Our Quality Assurance department is here to help ensure quality transportation for our members and to help our Providers when needed. If you have an issue with a member contact: the Indiana Quality Assurance Team at [INQA@southeastrans.com](mailto:INQA@southeastrans.com)

**28. What phone number should I refer members to if they call me to schedule a trip?**

The phone number for members to call is 855-325-7586.

**29. What phone number do I call if I have a problem that will cause a member to be late to their appointment?**

The Provider Dispatch phone number is 855-325-7611. Dispatch is staffed 24/7/365. This number is strictly for transportation providers only. Facilities should call the Healthcare Facility Line at 1-855-325-7588.

**30. How do I set up my company to receive my reimbursement by direct deposit?**

You should download the ACH Deposit Form from the Southeastrans provider portal and email it along with a copy of a voided , blank business check to [electronicpayment@southeastrans.com](mailto:electronicpayment@southeastrans.com). Starter checks are not permitted.

**32. Are there new NEMT rates through SET?**

Southeastrans’ NEMT rate schedule is very similar to the FSSA rate schedule. Each NEMT provider will need to sign a Southeastrans rate agreement detailing the appropriate rates. Contact the IN Provider Relations Team at [DriveIN@Southeastrans.com](mailto:DriveIN@Southeastrans.com) if you have specific questions about rates.

**33. Are hospital discharges excluded from Southeastrans NEMT?**

No. Hospital discharges must be called into Southeastrans just like any other non-emergency medical transports. Southeastrans will work closely with the hospital to find the closest, most appropriate provider to provide the transport and will do our best to respect current preferred provider relationships, where applicable. Southeastrans has 3 hours to pickup hospital discharges. All other pickups, excluding standing orders, SET has 1 hour.

**34. Are interfacility transfers emergent or non-emergent?**

Any non-emergent interfacility transfer should be called into Southeastrans. All emergent transfers should be processed by calling 911 or the usual process for management of emergent transfers. Southeastrans does not provide any emergency transport services.

**35. Who is eligible for a ride?**

Southeastrans will determine eligibility of members by checking the State Medicaid database before assigning a ride. NEMT services are available to Traditional Medicaid members (you may also see this called “fee-for-service” Medicaid). This includes any member who is NOT in a managed care program such as Hoosier Healthwise, Hoosier Care Connect or the Healthy Indiana Plan. Medicaid non-emergency transportation should only be used when there are no other means of transport available to the member. Public Transportation and Gas Reimbursement are covered NEMT options for eligible members.

**36. How does Southeastrans determine medical necessity for stretcher transports?**

Southeastrans call center representatives ask the caller what type of mobility is required for the member. SET does not determine medical necessity. The facility or member is responsible for accurately reporting and requesting the correct mobility type. If BLS or ALS mobility types are requested on behalf of the member, Southeastrans will request a Letter of Medical Necessity be completed by a nurse for a one-time occurrence or a Physician, Nurse Practitioner, or Physician Assistant for recurring trips. A Letter of Medical Necessity (LMN) can be placed on file for a period of six months.

**37. How are canceled trips communicated to providers?**

Canceled trips are sent via email manifest notifications. If the trip is canceled less than two hours prior to the member's pickup time, a call center agent will notify the transportation provider by phone.

**38. If Southeastrans calls and requests our service for the transport of a member suspected of not requiring stretcher transport, should we ask Southeastrans to clarify that they are specifically requesting stretcher transport?**

Transportation Providers can contact our dispatch 24/7 with questions regarding trips. Southeastrans welcomes feedback from providers regarding fraud, waste, and abuse. If Fraud, waste, or abuse is suspected a provider can email [reportfraud@southeastrans.com](mailto:reportfraud@southeastrans.com)

**39. Who do we send our invoices to at Southeastrans?**

All claims should be sent to the following address:

Southeastrans, Inc.  
Attention: Claims  
4751 Best Road, Suite 300,  
Atlanta, GA 30337

**40. Which claim form should I use?**

Traditional Provider – NEMT Only (not EMS) – please use the Trip Reimbursement Form (TRF) only.  
EMS Providers - NEMT trips please use the CMS 1500 Health Insurance Claim Form (HICF).  
EMS Providers – If the mobility type is ambulatory or wheel chair use the TRF.  
ALS / BLS Trips – please use the (HICF) only.

**41. If a patient didn't apply for Medicaid until after transport and Medicaid approves them retroactively to the Date of Service, will the provider be reimbursed?**

If the individual is not Medicaid eligible on the date the trip was requested, the transportation provider may schedule and handle the trip with no guarantee of Medicaid payment. If/when the member becomes retroactively Medicaid fee-for-service eligible and was eligible on the date the trip was provided, then the provider may submit a Trip Reimbursement form and Completed Trip Detail Log for non-EMS providers, or the 1500 form for EMS providers, to SET for claims payment. These forms are available on the Southeastrans website.

**42. How do new transportation providers learn the procedure for processing claims?**

Southeastrans conducts claims training every week for new providers. Please contact Atlanta Claims at 678-510-4590 for your claims questions.

**43. If my client is qualified and I have a Trip ID, but the client didn't understand how to request transportation, may I still file a claim for the trip?**

No. All trips must be prior authorized by Southeastrans to be eligible for payment. Providers must have a LEG ID to submit for reimbursement.

**44. Where do I find the instructions on how to submit claims electronically?**

There are multiple ways to submit electronic claims all of which are covered during provider portal and iPad training classes. You may also find information on the Southeastrans website at [www.southeastrans.com](http://www.southeastrans.com).

**45. Will Southeastrans trainers provide a roster of training class attendees?**

Yes. Upon completion of the two-day class.

**46. When are drivers eligible to perform trips?**

Drivers must meet all credentialing requirements before being made active. Credentials include: Request for Qualifications, Business License/Retail Merchant License, Employer Identification/IRS Form, W-9 Form, Copy of Corp, LLC or Inc, Cert of Amendment, Disclosure of Ownership form, LPI# - IHCP Verified Provider... For more details regarding credentials request or review your Indiana Contracted Provider Checklist.

**47. When will there be dates for driver training in our area?**

[Compliance](#) coordinators assign driver training.

**48. Why can't magnetic signs be used on our vehicles?**

Per the provider agreement and in accordance with the Indiana Department of Public Safety, magnetic signs are not permitted. Magnetic signs can too easily be lost or removed. It is critical that members and facilities know of the transportation provider by signage on the vehicle.

**49. How will wheelchair securement be adequately covered in training class?**

Drivers for Southeastrans-contracted providers that provide wheelchair mobility transportation are trained in the Passenger Assistance Safety and Sensitivity (PASS) course. This program ensures that drivers have the current expertise in serving members with disabilities, including wheelchair securement.

**50. Will Southeastrans hold monthly driver training classes? May newly hired drivers perform trips while they are awaiting class?**

Training is a crucial part of the credentialing process to ensure member safety and security. Southeastrans does not grant training waivers, so newly hired drivers cannot perform trips before completion of classroom instruction.

**51. Will the driver drug screens at the time of hire suffice or will new ones be required?**

Southeastrans will accept drug screens that meet the contractual requirement that are no more than six months old.

**52. Can MediRoutes be used for scheduling and invoicing?**

Yes. Contact [isupport@southeastrans.com](mailto:isupport@southeastrans.com) to begin the integration process.

**53. When will providers receive the iPads?**

After completion of 200 trips in a one month period. Please continue to use the paper IN-Trip Reimbursement Form to document your Southeastrans trips until you receive iPads.

**54. When will androids tablets be available for use?**

Contact [isupport@southeastrans.com](mailto:isupport@southeastrans.com) to facilitate your needs.

**55. Is the iPad system needed if we have MediRoutes?**

No, iPads are not necessary for MediRoutes.

**56. Can the portal be categorized by BLS, wheelchair, or ambulatory?**

Yes, by downloading into Microsoft Excel and filtering/sorting by type.

**57. How does Southeastrans handle urgent trips?**

Urgent Care is defined as an unscheduled episodic situation, in which there is no immediate threat to life or limb, but the member must be seen on the day of the request and treatment cannot be delayed until the next day. Urgent trips include hospital discharges and appointments established by medical care providers allowing insufficient time for routine scheduling. Valid requests for urgent care transports shall be honored within three (3) hours of the time the request is made.

**58. How can facilities learn about Southeastrans and its policies and procedures?**

To learn more about Southeastrans and its policies, please visit the "[facilities](#)" page on the Southeastrans website, which includes important updates, frequently asked questions and facility forms. You may also contact the Facility Outreach Manager, Jodie Little at [jolittle@southeastrans.com](mailto:jolittle@southeastrans.com).

**59. Does Southeastrans reimburse for no-show trips?**

FSSA and CMS do not allow Southeastrans to reimburse for no-show trips.

**60. If we have registered our patients with an Excel spreadsheet, do we have to submit a standing-order form?**

Yes. Healthcare providers or medical facilities must submit a standing-order form to ensure members are properly registered.

**61. What if transportation providers are unable to meet the 3-hour window for discharges?**

Southeastrans should be informed immediately so that an alternate transportation provider may be assigned the trip.

**62. If an ambulance is owned and operated by a hospital, will Southeastrans accept the organization's Physician Certification letter as the letter of medical necessity?**

Yes, Southeastrans accepts the Physician Certification letter as a confirmation of medical necessity.

**63. Indiana Medicaid requires prior authorizations for transports over 50 miles. Will this regulation remain and, if so, will it go through Southeastrans?**

Yes. Southeastrans requires prior authorizations for all transports over 50 miles and coordinates the requests with the State's prior authorization vendor CMCS.



**64. What should providers tell members who would prefer to contact a provider directly instead of going through Southeastrans?**

Providers should give the member the Member Reservation Line number 1-855-325-7586 to call for a trip request. Medicaid non-emergency medical transportation should only be used when there are no other means of transport available to the member. Public Transportation and Gas Reimbursement are covered NEMT options for eligible members.

**65. Does Southeastrans encourage members to visit local facilities for their medical needs rather than taking trips out of town?**

Southeastrans schedules NEMT trips based on the member's individual medical requirements regardless of whether their trip is local or out of town.

**66. Can Southeastrans send trips with more than 5 days' notice?**

Yes. We are sending trips with 30 days' notice at this time.

**67. How far in advance can members schedule trips with Southeastrans?**

Non-urgent trips and initial standing order trips can be scheduled between 2-30 days in advance. Subsequent standing order trips may be booked up to 90 days out.

**68. Do transportation providers and members call the same number to schedule a trip?**

No. Transportation providers should not schedule trips. Only, members, members' representatives or facilities may schedule trips. It is a conflict and violation of CMS guidelines for a transportation provider to schedule their own trips.

**69. Can Southeastrans ask members for a return trip time from an appointment rather than a 2 hour will call?**

Each reservationist is trained to ask callers if they know the time they would like the driver to return to pick them up or if they would like to leave that time open. Many of the trips are repetitive in nature and scheduled return times are possible, but many are not. It is very difficult to be able to estimate accurately when a doctor's office will complete an exam or visit. A 2-hour window is applied, with "will call" indicated, as a standard of practice. This indicated on the manifest.

**70. If we are using paper manifests, is there a way to update the trip in the system ourselves?**

Unless you are using the Southeastrans application, you cannot update trips electronically. Trip modifications other than adding pickup and drop-off detail must be made by Southeastrans staff.

**71. If members give you a time frame for their appointment, will you schedule a specific time for the return trip?**

Yes. If a member has a set return time, we schedule that time as the B leg pickup time. In this case, "will call" will NOT be indicated on the manifest.

**72. We continue to receive trips that we've already turned back. Is there a way to prevent that?**

Yes. Please send trip examples to your Provider Relations Manager and we will review with our agents.

**73. Can we receive manifests via email any time a new trip is assigned? Can we opt to receive the emailed manifests (which also need to be protected) again?**

Notifications of manifest updates are delivered via email. The actual manifest with full trip details is available on the portal. If a provider is having trouble accessing or maneuvering within the portal, please contact [isupport@southeastrans.com](mailto:isupport@southeastrans.com) for assistance.

**74. Is there a way to turn back trips on the portal? (due to cancellations or no-shows)**

Mark cancellations and rider no-shows on your Trip Reimbursement Form. The turn back or Send Back feature on the portal is for use **PRE**trip for those trips that the provider cannot or will not accommodate.

**75. When confirming appointments, if the member or facility states the appointment time is different than manifest, does the member or facility need to call Southeastrans to make changes?**

Transportation Providers should call members directly to confirm trips. However, if the provider does find that information listed on the manifest is incorrect, they should direct the member or facility to contact Southeastrans.

**76. Will trips automatically assigned by Southeastrans stop without verification from the transportation provider that did not accept the trips?**

Advance trips assigned to providers' manifests are considered accepted unless the provider uses the "send back" feature on the portal to reject the trip within the proper time frames. Trips assigned to providers with 2 or fewer days' notice require verbal acceptance from the provider before being added to the manifest.

## **Indiana EMS Providers**

EMS providers are critical to the NEMT program in Indiana. To assist the EMS providers, we have listed frequently asked questions to assist in the administration of EMS for the NEMT network.

**77. How do I submit claims?**

Submit claims to Southeastrans by using the 1500/HCFA Form.

**78. How do we access the Provider Portal?**

The link to the Provider Portal is <https://provider.southeastrans.com/iportal>. If you experience trouble with your portal account, please email [isupport@southeastrans.com](mailto:isupport@southeastrans.com) and include your first/last name, email address, company name, and a brief explanation of the issue: can't access portal, can't see trips, never got email to register for portal, etc.

**79. What can I do on the Southeastrans Provider Portal?**

- View assigned trips, review manifest
- Access the available trip list
- Send back trips that cannot be accommodated
- View reports

**80. Do EMS providers need iPads to document their trips?**

No. EMS providers should not use Southeastrans provided iPads. These are for regular transportation providers.

**81. Do EMS providers need to have their vehicles inspected by Southeastrans staff?**

No. EMS providers have other oversight agencies and no inspections are required of ambulances. If the EMS agency has ambulatory or wheelchair vehicles, they will need to be inspected like any other provider.

**82. Do the EMT's and Paramedics have to go through the required training that is required for regular providers?**

No, with one exception. If the EMS provider runs only ambulances, they do not need their employees to receive additional training. However, if the EMS organization runs ambulatory or wheelchair vehicles, EMTs or paramedics must complete the "Wheelchair Securement" portion of the training. There is no cost for this training and takes less than an hour. It can usually be done while SET is inspecting the ambulatory or wheelchair vehicles at the EMS operation.

**83. How do I process 911 downgrade trips?**

EMS Providers will submit 911 Downgrades on the CMS 1500 Health Insurance Claims Form (HICF), identifying these claims by placing "911 Downgrade" in box 23.

**84. What is the average turn around time for support emails?**

On average our turnaround time is less than two business days.

**85. For providers that do not have iPads, how do we view the manifest?**

Southeastrans provides access to your trip manifests from the Southeastrans Provider Portal (<https://provider.southeastrans.com/iportal>).

**86. How do we request trips off the Available Trips List?**

The Available Trips List is a report that is available to transportation providers. If a provider would like to obtain a trip from the Available Trips List they need to inform Southeastrans of that trip by emailing [INDispatch@southeastrans.com](mailto:INDispatch@southeastrans.com). Southeastrans will assign that trip to you and provide the trip to you on your manifest.

**87. On the Southeastrans web portal reports section, it currently only allows you to choose a single date for which to run a report. Can this be modified to allow for date ranges?**

Manifests and the Available Trips report can only be run one day at a time. Other reports, such as Pay Period reports, do span multiple days.

**88. We were advised we do not have to do EFT, is this correct, or has this information changed?**

EFT payments are not mandatory, however please understand that timely delivery of checks are subject to the United States Postal Service. We recommend EFT payments to ensure the provider receives their reimbursements in a timely manner.

**89. Are providers responsible for verifying eligibility or requesting prior authorizations?**

Southeastrans is responsible for eligibility and prior authorizations for all trips scheduled through Southeastrans prior to the trip. Southeastrans is not responsible for eligibility and prior authorizations for trips not scheduled through Southeastrans prior to the trip.

**90. If the patient's coverage on the IHCP portal shows NEMT with the MCO as Southeastrans, are those the only members that have this coverage? If that MCO information does not show under a member's number, do they not have NEMT coverage?**

Correct. Southeastrans will show as the MCO for members that are covered for Non-Emergency Transportation with Southeastrans. NEMT + Fee for Service will show on the Managed Care Detail Screen of the provider portal.

**91. If a provider is enrolled with Southeastrans, can we submit claims electronically? If so, what is the payer ID# ? How do we enroll for electronic payments and electronic remits?**

Claims can only be submitted electronically by providers that are using the iPads supplied by Southeastrans to capture trip information.

**92. If a member or facility calls Southeastrans for transportation and the member is told transportation has been denied, how is the provider to know the transportation was denied if the member or facility does not inform us? What is the procedure for notifying providers of denied trips?**

All trips must be scheduled with Southeastrans prior to the trip. Southeastrans will only assign eligible trips to providers.

**93. If Southeastrans calls and requests our service for the transport of a member suspected of not requiring stretcher transport, should we ask Southeastrans to clarify that they are specifically requesting stretcher transport?**

Providers can contact our dispatch 24/7 with questions regarding trips. Southeastrans welcomes feedback from providers regarding fraud, waste and abuse. If fraud, waste or abuse is suspected a provider can email [reportfraud@southeastrans.com](mailto:reportfraud@southeastrans.com). SET may assign/authorize a member to stretcher transport when wheel chair transport is not available.

**94. How do you intend to handle cases in which the member cannot sign at the time of transport?**

If a member cannot sign then the escort for the member should sign. If the escort cannot sign then a representative from the destination facility should sign.

**95. What exactly is a "911 downgrade"?**

The IHCP considers all transports to an emergency room in response to 9-1-1 dispatches to be emergent. For 9-1-1 dispatched trips to an emergency room, ambulance providers should bill the appropriate procedure codes for emergency advanced life support (ALS) or basic life support (BLS) services, based on the types of services provided during the transport. This coverage policy applies to all IHCP programs, subject to limitations for certain benefit plans.

If an ambulance dispatched by 9-1-1 transports a member to a destination other than the emergency room, the transport is considered nonemergent, and must be authorized by Southeastrans. .. Southeastrans is not an emergency transportation provider. Please reference IHCP bulletin BT201842 dated August 9, 2018 for more detail.

**96. What is the process for discharge from the Emergency Room for "medically necessary" ambulance transports?**

If the member is eligible for Non-Emergency Transportation through Southeastrans then the trip must be scheduled with Southeastrans. Our dispatch center is open 24/7/365 to accommodate requests at any time by calling 855-325-7611 for more detail

**97. Will a transportation provider not be assigned Medicare trips when the beneficiary has both Medicare and Medicaid?**

Southeastrans is only responsible for Non-Emergency Transportation of Traditional Medicaid members and for some trips for members with both Medicare and full Medicaid coverage. Southeastrans is not responsible for transportation of Medicare members. Please reference IHCP bulletin BT201835 dated July 25, 2018 for more detail.

**98. Will the trip number come to the EMS provider from Southeastrans directly or will it be provided by the facility calling for a patient transfer?**

Southeastrans has set up a dedicated Facility Dispatch telephone line at 888-822-6104. Please refer to IHCP bulletin BT201830 dated June 22, 2018 which describes this process in more detail.

## **Indiana Healthcare Facilities**

Healthcare facilities are important partners in Southeastrans' management of transportation services for Indiana fee-for-service members. The following list of FAQs answers many of the common questions healthcare facilities have concerning the transportation of members to and from their medical appointments. Healthcare providers should contact Southeastrans for any additional questions. Communication with Southeastrans is essential to ensuring members arrive at their appointments on time and are picked up after their appointment in a timely manner.

**99. How does a healthcare provider make transportation arrangements?**

Healthcare facilities should contact Southeastrans or use the facility portal to arrange non-emergency transportation for Indiana fee-for-service members. You should contact Southeastrans' Healthcare Facility Reservation Line by calling 1-855-325-7588.

**100. What if the vehicle is more than 15 minutes late to pick up the member?**

Call Southeastrans' **Where's My Ride** line to speak directly with a representative at 1-855-325-7586, **option 2**.

**101. What is an urgent care trip?**

Urgent Care is defined as an unscheduled episodic situation, in which there is no immediate threat to life or limb, but the member must be seen on the day of the request and treatment cannot be delayed until the next day. Urgent trips include hospital discharges and appointments established by medical care providers allowing insufficient time for routine scheduling. Valid requests for urgent care transports shall be honored within three (3) hours of the time the request is made.

**102. What is a standing order?**

A standing order is defined as two or more transports per week to and from a recurring medical appointment for a covered service, for the same member, with the same healthcare provider, for the same treatment or condition.

Standing Orders can be made by completing a Standing Order Form, available on the Southeastrans website (<https://s30161.pcdn.co/wp-content/uploads/2018/05/Indiana-Standing-Order-Form.pdf>) or by calling the Facility line and requesting a Standing Order Form. Healthcare providers will be able set up trips and create Standing Orders using Southeastrans' Facility Portal.

**103. How does a member qualify for non-emergency medical transportation?**

The member must be eligible for Medicaid services on the date of service. Medicaid non-emergency transportation should only be used when there are no other means of transport available to the member.

**104. How do I request a ride for a member?**

Southeastrans Customer Service and Special Service Representatives can assist with scheduling transportation for fee-for-service Medicaid members. The telephone numbers below are also listed on the Member Resources page of our website at: <https://www.southeastrans.com/members/indiana-fssa/>

*Toll-free Reservation Lines*

1-855-325-7586

option 1 – Customer Service

option 2 – Where’s My Ride

option 9 – Spanish

*Toll-free Healthcare Facility Line*

1-855-325-7588

**105. How does a member get transportation after an appointment is complete?**

The member or the healthcare provider must call Southeastrans after the appointment is complete to request return pick-up. Transportation Providers have up to one (1) hour from time of notification to pick up the member. The member or member representative should call 1-855-325-7586, then select *Option 2* for Where’s My Ride to request pick-up following the appointment.

**106. Can I set up a trip online?**

Yes. Healthcare facilities can schedule transportation online using Southeastrans’ Facility portal (<https://facility.southeastrans.com>).

**107. What information is needed when I request transportation?**

Please have the following information ready for the Customer Service Representative when you call. If you are missing any of the information below, you will be asked to call back with the complete information.

- Member’s full name, phone number, primary address, date of birth and county of residence
- Member’s Medicaid/ID number as it appears on the Medicaid/ID Card
- Complete destination address, including physician name, city, state, zip code, and phone number
- Mobility type
- Physician Name
- Date and time of the appointment
- For wheelchair users, weight and size of the wheelchair

**108. How do I file a complaint?**

Feedback regarding concerns with transportation services can be provided by speaking to any Southeastrans representative or submitted on our website at

<https://www.southeastrans.com/members/member-contact-us/>

**109. Where I can obtain forms?**

Forms are located on the Facilities Forms page of our website:

<https://www.southeastrans.com/facilities/facility-forms/>

**110. Can I schedule a member to ride public transportation and does Southeastrans provide passes?**

If a member is able to use Public Transportation to get to their medical appointment, please let us know when scheduling their transportation. Please allow up to five days to receive the bus pass via U.S. Postal service. Southeastrans will provide them with a ticket or pass for the trip if the member's home and the healthcare provider are near fixed route stops.

**111. What is considered being on-time for a driver when picking up a member?**

Transportation providers have up to one (1) hour to pick-up members from the time of notification that the member is ready to be picked up from the facility.

**112. Who is eligible for a ride?**

Southeastrans will determine eligibility of members by checking the State Medicaid database before assigning a ride. NEMT services are available to Traditional Medicaid members (you may also see this called "fee-for-service" Medicaid). This includes any member who is NOT in a managed care program such as Hoosier Healthwise, Hoosier Care Connect or the Healthy Indiana Plan.

**113. Is the facility required to call Southeastrans to get the trip number or should the transportation provider?**

Yes, a facility, as the member's representative, is required to call Southeastrans to schedule a trip. If the facility or member has a preferred provider arrangement, then the facility may use the Nursing Facility Reservation line to request that provider and receive a trip ID. The trip ID documents the trip request and the leg ID is the verification for the NF to pass on to the transportation provider as an authorized trip for billing. Requests through the Member Reservation Line will not be provided with a leg ID.

**114. What kind of liability insurance do transportation providers carry? Also, if there is an emergency, are the drivers trained and equipped to handle emergency situations?**

FSSA requires providers transporting members to maintain \$1M in automobile liability coverage. Drivers are trained in First Aid and CPR.

**115. At this time, are all providers trained in proper wheelchair securement?**

Drivers for Southeastrans contracted providers that provide wheelchair mobility transportation are trained in the Passenger Assistance Safety and Sensitivity (PASS) course. This program ensures that drivers have the current expertise in serving members with disabilities, including wheelchair securement.

**116. How does a health care facility become a registered facility to be able to use the portal to aid in transportation scheduling?**

You may register to use the Facility Portal by contacting the Facility Outreach Manager at 317-613-0812.

**117. How do I make an appointment for a Medicaid pending resident?**

If the individual is not Medicaid eligible on the date the ride was requested, the transportation provider may schedule and handle the trip with no guarantee of Medicaid payment. If/when the member becomes retroactively Medicaid fee-for-service eligible and was eligible on the date the ride was provided, then the provider may submit a Trip Reimbursement form and Completed Trip Detail Log for non-EMS providers or the 1500 form for EMS providers to SET for claims payment. These forms are available on the Southeastrans website.

**118. Could you explain how Southeastrans will work with Medicaid waiver recipients who reside in assisted living?**

Southeastrans covers medical transportation for Medicaid waiver members. Requests can be made by the member or their representative through the Member Reservation line at 844-325-7586. Transportation to all other waiver services are covered by the waiver provider, not Southeastrans.

**119. If a hospital is enrolling a member into the Medicaid system, but by the time of discharge they don't have a member number, will Southeastrans still authorize the discharge with a provider?**

No. However, if the transportation provider is a Southeastrans provider, they are able to submit the claims to Southeastrans once the member becomes eligible.

**120. What do we do in the case of an emergent transport to the hospital for a blood transfusion?**

Southeastrans is only responsible for non-emergency transports. Emergent requests should go through 911.

**121. When a client is transported to an appointment and they are given a number to call when ready to be picked up, what happens if they can't leave a voicemail?**

Members should call Southeastrans Where's My Ride at 855-325-7586 and select option 2 when they are ready to be picked up. Our call center is staffed 24/7/365. There is no voicemail option.

**122. I have an Alzheimer's care unit, and I am really uncomfortable sending one of my dementia residents in a taxi to an appointment because they don't meet "medical necessity." Will they be attended to throughout their appointment?**

For individuals requiring constant supervision, the escort should be provided by the facility and stay with the member during the appointment. Southeastrans must be notified of an escort at the time of booking the trip. An **attendant** is provided by the transportation provider to accompany a Member or group of Members during transport in order to ensure the safe operation of the vehicle. The Attendant does not stay with the member at the appointment. Attendants must be requested at the time of booking the trip.

**123. If we are serving a resident under Medicare, do we use Southeastrans? Are the Healthy Indiana Medicaid plans part of the program?**

No, Southeastrans is only responsible for Non-Emergency Transportation for traditional Medicaid members. No, Southeastrans is only responsible for Non-Emergency Transportation for traditional "fee-for-service" Medicaid members.

**124. Transportation providers are stating that they have been told they are "door to door" only: meaning waiting outside for facility residents. Is this correct?**



Please refer to #3 on types of services provided. Southeastrans allows transportation providers to use their discretion whether to utilize a “hand-to-hand” level of service when picking up or delivering a member for whom “door-to-door” was requested. “Hand-to-hand” service involves the transportation of Members from the hands of a person at the point of pick-up into the hands of a facility staff member, family member, or other responsible party at the destination.

**125. Can facility transportation services join Southeastrans’ network as a provider to meet the transportation needs of members in their facility?**

Yes, we welcome new transportation providers and encourage facilities to contact Provider Relations at [DriveIN@Southeastrans.com](mailto:DriveIN@Southeastrans.com) for more information. DXC Technology is the State’s fiscal agent and processes the provider enrollment for IHCP. Southeastrans can facilitate this connection or the facility may call their IHCP provider representative at DXC.

**126. Is the facility solely responsible for providing an escort for an appointment or is it Southeastrans?**

An escort is provided by the facility and stays with the member at the appointment. Southeastrans must be notified of an escort at the time of booking the trip to ensure their seat for the trip. If an attendant is provided by the transportation provider they do not stay with the member at the appointment. Attendants must be requested at the time of booking the trip.

**127. Do you have a Southeastrans contact directory?**

Yes. Please find contact information on our Facilities web page at <https://www.southeastrans.com/indiana-facilities>.

**128. Are transportation providers required to follow a dress code and should they have ID?**

Our provider agreement states that all drivers must be professional in appearance. Our provider agreements state the following regarding ID: *“All drivers and attendants must wear visible, easily readable, official company identifications badges. Provider’s company identification badges are subject to **BROKER’S** approval. The badges must be dispersed to all staff members whose job duties require face-to-face interaction with Members. All badges must be worn on authorized driver’s/attendant’s outerwear in plain sight between the neckline and the waist.”*

**129. How do I arrange transportation for a Medicaid pending resident who requires multiple trips per week?**

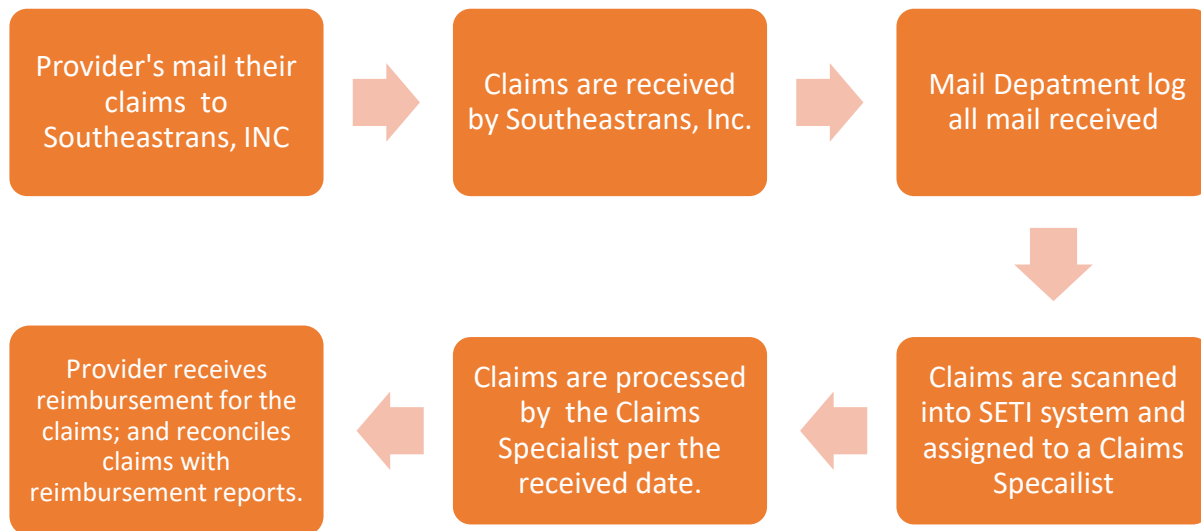
If/when the member becomes retroactively Medicaid fee-for-service eligible and was eligible on the date the ride was provided, then the transportation provider may submit a Trip Reimbursement form and Completed Trip Detail Log for non-EMS providers or the 1500 form for EMS providers to SET for claims payment. These forms are available on the Southeastrans website.

## The Claims Process

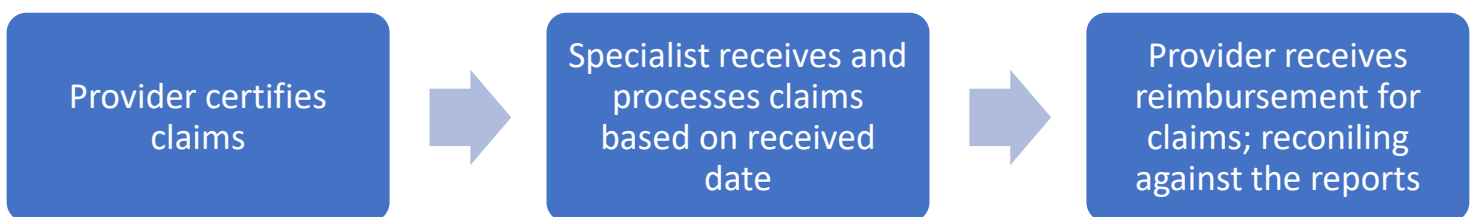
The Claims process starts once a claim is received. Southeastrans has two different methods a provider can use to submit claims: electronic submissions and mailed submissions. Both methods of submission are processed based on the date the claims are received by Southeastrans. Claims are processed within 7 days of receipt and reimbursed within 21 days.

Electronic claims are the preferred method of claims submission. Below you will see the difference when claims are submitted electronically and when paper claims are submitted.

### Mailed Claims



### Electronic Claims



Claims that are received by mail have the following disadvantages for providers:

- Unless sent by priority mail, providers are unable to determine the date the claims were received
- Generally, claims are received 3 to 4 days after the provider mails the documents
- Claims have the potential to be lost in the mail

Claims that are received electronically have the following advantages:

- Provider knows the exact dates claims are received
- Provider knows when claims will be reimbursed
- Provider can review claims for corrections prior to certifying trip

## Claims Specialist Process

When the Claims Specialist receives the paperwork, they begin to process the claims by received date. Each Claims Specialist will take the following steps to process claims:

- Access the system
  - o Create a batch of claims based on the following:
    - Provider's name
    - Received dates
    - Driver's name
    - VIN's
    - SETI Decal (as applicable). We enter the information as viewed on the trip reimbursement forms.

All claims are then entered into the system by leg ID and automatically calculated based upon provider rate agreement and the approved mileage as identified on the provider manifest. If any of this information is missed on the provider paperwork and/or is unauthorized (cancelled trips, assigned to another provider, etc.) it will cause a delay with the providers reimbursement.



## Did you know

**Carefully read the items below, these items will assist with reimbursement discrepancies.**

- **Mailed Claims**
  - o When claims are sent through traditional mail providers are unable to track when claims are received. This leads to issues with the expected reimbursement date.
- **Reimbursements**
  - o **Mileage**- providers are reimbursed per the approved mileage on the manifest. If the providers have mileage discrepancies, they should be contacting the Call Center for approval prior to submitting the claim.
  - o **Mobility (Mode of Transport)**- providers are reimbursed per the approved mobility type as notated on the manifest. If the provider arrives to pick-up a member and the mobility is different from what is listed on the manifest the provider must contact the Call Center to inform of incorrect mobility type on the manifest. The Call Center will correct the mobility type.
  - o **Wait time**- Providers must get wait times approved by the Call Center. Ideally, wait time should be requested once the provider reviews the manifest, well in advance. The provider will contact the Call Center and advise them of the need for wait time. If wait time is approved, the provider is sent a modified manifest advising them of the approved wait time. This is done prior to claims submissions.
  - o **Reimbursement Reports**- Be sure to reconcile your claims weekly by reviewing your reimbursement reports. This report can be presented in a summary or detail format. The detail format provides you with the date of service, leg ID, name of the member, to and from location, procedure codes, and the amount reimbursed for the

- trips. It also provides denial codes for those claims that were denied in our system. A denial legend and a denial reference guide can be found on the portal.
- **Rejected Claims-** Claims that are rejected are done so by the Call Center. These claims are mailed into our Claims Department, Atlanta location, without the SETI leg ID's. They are documented on the mail log and given to the Call Center that resides in Claims, Atlanta location, for updating.
  
  - The Call Center Agent will provide authorizations for claims and/or reject claims for one or more of the following reasons:
    - Member ineligible for NEMT
    - Missing/invalid member information
    - Member is not eligible for post- authorizations
    - Provider did not provide enough detail for transport
      - Ex: Member pick-up address/ drop-off destination missing
    - Claims submitted to the wrong payer
      - Ex: 911 Downgrades
    - Hospital to Hospital transports
    - Non-Covered location
    - Missing/Invalid mobility type
    - Cannot confirm members eligibility

A rejected letter and a copy of the claim is mailed back to the provider by the Atlanta Call Center; this information is documented on a log sheet.
  
  - **Denied Claims-** Claims are denied by the Atlanta Claims Department.
  - Typical reasons for denied claim are as follows:
    - **Cancelled Trips (SNPM)-** These trips were cancelled by the member and/or facility by a Call Center Agent. If these claims are submitted the provider will receive an error. If you think it was cancelled in error, you will need to contact the Call Center for assistance.
    - **MEOB-** A claim is submitted and advised that the member has another health benefit plan, but the provider did not submit the EOB. This claim would be denied for MEOB
    - **UAD-** A transport is performed by a driver that was not authorized to transport the member. If this occurs, the provider will receive this denial code. Please contact the compliance for assistance with updating your drivers list.
    - **UAV-** A transport is performed in a vehicle that was not authorized to transport the member.