



## **Non-Emergency Medical Transportation EMS Provider 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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### **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.

**1. How do I submit ALS/BLS claims?**

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

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

The link to the Provider Portal is <https://provider.southeastrans.com/portal>. 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.

**3. 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

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

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

**5. 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.

**6. 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.

**7. 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.

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

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

**9. 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>).

**10. 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.

**11. 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.

**12. 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.

**13. 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.

- 14. 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.

- 15. 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.

- 16. 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.

- 17. 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.

- 18. 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.

- 19. 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 to DXC, 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.

**20. 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

**21. 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.

**22. 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.

**23. 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>)

**24. 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.

**25. 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.

**26. 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



**27. 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/1500 Form) only.

**28. 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.

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

For claims inquiries please contact us via Zendesk which can be accessed via the provider portal.