SECURE MEDICAL TRANSPORTATION SERVICES

ELIGIBLE PROVIDERS

In order to receive payment, all eligible servicing and billing provider’s National Provider Identifiers (NPI) must be enrolled with South Dakota Medicaid. Servicing providers acting as a locum tenen provider must enroll in South Dakota Medicaid and be listed on the claim form. Please refer to the provider enrollment chart for additional details on enrollment eligibility and supporting documentation requirement.

South Dakota Medicaid has a streamlined enrollment process for ordering, referring, and attending physicians that may require no action on the part of the provider as submission of claims constitutes agreement to the South Dakota Medicaid Provider Agreement.

A secure medical transportation provider must use vehicles owned or registered to the transportation provider. License plates issued in South Dakota will be either commercial or exempt plates. In addition, the driver must meet the driver, attendant, vehicle, and insurance requirements outlined in ARSD Ch. 67:16:25.

ELIGIBLE RECIPIENTS

Providers are responsible for checking a recipient’s Medicaid ID card and verifying eligibility before providing services. Eligibility can be verified using South Dakota Medicaid’s online portal.

The following recipients are eligible for medically necessary services covered in accordance with the limitation described in this chapter and in the table below:

<table>
<thead>
<tr>
<th>Coverage Type</th>
<th>Coverage Limitations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid/CHIP Full Coverage</td>
<td>Medically necessary services covered in accordance with the limitations described in this chapter.</td>
</tr>
<tr>
<td>Medicaid – Pregnancy Related Postpartum Care Only (47)</td>
<td>Coverage restricted to family planning and postpartum care only.</td>
</tr>
<tr>
<td>Medicaid – Pregnancy Related Coverage Only (77)</td>
<td>Coverage restricted to pregnancy related services only including medical issues that can harm the life of the mother or baby. Transportation must be to or from pregnancy related medical appointments.</td>
</tr>
<tr>
<td>Unborn Children Prenatal Care Program (79)</td>
<td>Coverage restricted to pregnancy related services only including medical issues that can harm the life of the mother or baby. Transportation must be to or from pregnancy related medical appointments.</td>
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Refer to the Recipient Eligibility manual for additional information regarding eligibility.
Recipients being transported via secure medical transportation must be confined to a wheelchair or must require transportation on a stretcher. “Confined to a wheelchair” means the recipient is unable to walk without the continuous aid of another person or unable to walk in any circumstances. Being discharged from a hospital in a wheelchair does not necessarily mean the recipient is confined to a wheelchair.

**COVERED SERVICES AND LIMITS**

**General Coverage Principles**

Providers should refer to the [General Coverage Principles](#) manual for basic coverage requirements all services must meet. These coverage requirements include:

- The provider must be properly enrolled;
- Services must be medically necessary;
- The recipient must be eligible; and
- If applicable, the service must be prior authorized.

The manual also includes non-discrimination requirements providers must abide by.

**Secure Medical Transportation Coverage**

Transportation services must be provided in accordance with applicable federal, state, and local regulations. An enrolled secure medical transportation provider is eligible to receive payment for non-emergency transportation services from the recipient’s home, place of work, or school to a medical provider for diagnosis or treatment, between medical providers when necessary, or from a medical provider to the recipient’s home, place of work, or school.

**Driver Requirements**

A secure medical transportation provider must ensure and attest the following driver requirements are met:

- Each driver providing services is at least 18 years old with one year of experience as a licensed driver who possesses a valid driver’s license for the class of vehicle driven.
- Each provider must have a process in place to address any violation of state drug law by a driver.
- Each driver providing services has not had a driver’s license suspended under the provisions of [SDCL chapter 32-12](#) or had a conviction of driving under the influence pursuant to [SDCL chapter 32-23](#) or under similar laws of another state during the previous three years.
- Each driver providing services has not been excluded from participation in any [federal health care program](#) and is not listed on the [exclusion list](#) of the Department of Health and Human Services Office of Inspector General.
- Each driver does not have a hearing loss of more than 30 decibels in the better ear with or without a hearing aid. A driver whose hearing meets this minimum requirement only when wearing a hearing aid must wear a hearing aid and have it in operation at all times while driving.
Traffic Violations Disclosure Requirements
Secure medical transportation providers are required to have in place a process to disclose to Medicaid the driving history, including traffic violations, of each driver employed or providing services. Providers should maintain the records of individual drivers’ driving history and traffic violations. Medicaid may request a copy of the records.

Driver and Attendant Required Training
A secure medical transportation provider must ensure that each driver and attendant is able to assist a passenger into and out of a vehicle and that each receives the following training:

1. Before providing services, instruction in the operation of the vehicle ramp, wheelchair lift, and securement device;
2. Before providing services, instruction in the procedures to follow in case of a medical emergency or an accident; and
3. Before providing services, instruction in the use of the fire extinguisher located in the vehicle used for secure medical transportation.

Required Vehicle Equipment
Each vehicle used for secure medical transportation services must be equipped with vehicle safety equipment and a first aid kit. Vehicle safety equipment should include appropriate items in the event of a roadside emergency or inclement weather. Suggested equipment includes:

- A cell phone;
- A fire extinguisher;
- Emergency warning triangles; and
- An ice scraper and blanket when seasonally appropriate.

Securement Devices
A vehicle used for secure medical transportation must be equipped with a securement device and an occupant restraint system for each occupant being transported. Each securement device must be installed and used according to the manufacturer’s instruction. Each occupant restraint system must provide pelvic and upper torso restraint and must comply with the requirements of 49 CFR 571.222, S5.4.1 to S5.4.4, inclusive. The driver or the attendant must ensure that the occupant restraint system is fastened around the user before the driver sets the vehicle in motion.

Vehicle Inspections
Each day, before a secure medical transportation vehicle is used to transport a South Dakota Medicaid recipient, the provider must ensure that:

- The vehicle’s coolant, fuel, and windshield washer fluid levels are full;
- The lights, turn signals, hazard flashers, and windshield wipers are operational; and
- The tires do not have cuts in the fabric or are not worn so that the fabric is visible, do not have knots or bulges in the sidewall or tread, and have tread which measures at least two thirty-seconds of an inch on any two adjacent tread grooves.
In addition, the provider must ensure that there is a safety inspection of the vehicle once each week or every 1,000 miles, whichever occurs first. The safety inspection must ensure the following:

- The vehicle’s oil and brake fluid levels are maintained at the levels recommended by the manufacturer;
- The air pressure in the tires is maintained at the levels recommended by the manufacturer;
- The horn, brakes, and parking brakes are in working order;
- The instrument panel is fully operational;
- The fan belt is not worn and in need of replacing;
- The wheelchair ramp, lift, and lift electrical systems are in working order;
- The securement devices are not damaged and are able to be used to safely restrain the passenger;
- The passenger heating and cooling systems are in working order;
- The emergency doors and windows function properly.

After the safety inspection, any equipment determined to be nonfunctioning or in need of maintenance must be repaired or serviced before transporting a South Dakota Medicaid recipient.

Smoking is prohibited in a secure medical transportation vehicle whenever a South Dakota Medicaid recipient is being transported. A “No Smoking” sign must be posted in the vehicle so that it is visible to all passengers.

Drivers and passengers must use seatbelts whenever the vehicle is in motion. Before pulling away from a stop, the driver or attendant must instruct the passengers that seatbelt use is required and must make sure the passengers have seatbelts properly secured.

The driver or attendant must ensure that the securement devices and the seatbelt assemblies are retracted, removed, or otherwise stored when not in use.

If a vehicle is stopped for an emergency purpose or is disabled on the roadway or shoulder of a highway outside a business or residence district during the time when headlights must be displayed, the driver must place an emergency warning triangle on the traffic side of the road within ten feet from the rear of the vehicle in the direction of traffic approaching in that lane. A second emergency warning triangle must be placed approximately 100 feet from the rear of the vehicle in the direction of traffic approaching in that lane. If the vehicle is stopped or disabled on a one-way road, the driver must place an additional warning triangle approximately 200 feet from the rear of the vehicle in the direction of approaching traffic.

**Liability Insurance**

At a minimum, the provider must have liability insurance coverage in the amount of $1,000,000 for bodily injury to or death of any person in a single accident. If the policy is written on a single limit basis, the policy must specify that the limit is $1,000,000 for each occurrence.

**Complaints**
If South Dakota Medicaid receives a complaint concerning the condition of a vehicle used to transport recipients or the vehicle’s equipment, South Dakota Medicaid may inspect or provide for an inspection of the vehicle. The inspection may be unannounced. If it is determined that the vehicle needs repairs, the South Dakota Medicaid shall provide a written notice to the provider detailing the needed repairs or maintenance. The vehicle may not be used to transport recipients until after the repairs are made and the provider has sent written verification to South Dakota Medicaid that the repairs are made. Failure to permit an inspection results in the immediate termination of the provider’s contract.

If a provider receives a complaint against a driver or an attendant, the provider must investigate the complaint and attempt to resolve the issue. The provider must prepare and maintain a written report that contains a description of the complaint, the results of the investigation, and the action taken, if any.

**Multiple Trips per Day**

If a recipient is seeing several medical providers in one day we can pay up to 4 one way community transportation and secure medical transportation trips within one date of service.

1. If a recipient is picked up at his/her residence and sees three providers in different locations, requiring transportation, and is then taken back home the claim needs to be billed as follows:
   - First line with A0130/A0120 and 2 units.
   - Second line with A0130/A0120 59 modifier and 2 units.

2. If a recipient is picked up at his/her residence and sees one provider and is returned home and then sees another provider again later in the day (getting picked up at home and dropped off at home again) the claim needs to be billed as follows:
   - First line with A0130/A0120 and 2 units.
   - Second line with A0130/A0120 59 modifier and 2 units.

3. If a recipient is picked up at his/her residence and sees two providers in different locations, requiring transportation, and then taken back home the claim needs to be billed as follows:
   - First line A0130/A0120 and 2 units.
   - Second line A0130/A0120 59 modifier and 1 unit.

It is inappropriate to bill the third-round trip on a different day than the date of service to get reimbursement. If a recipient schedules more than two round trips a day, the third trip is the patient’s responsibility.

**Non-Covered Services**

**General Non-Covered Services**

Providers should refer to ARSD 67:16:01:08 or the General Coverage Principles manual for a general list of services that are not covered by South Dakota Medicaid.

**Secure Medical Transportation Non-Covered Services**

Services not specifically listed in the covered services section are considered non-covered. Transportation to pick-up prescriptions or eyeglasses is not covered.

**Documentation Requirements**
General Requirements
Providers must keep legible medical and financial records that fully justify and disclose the extent of services provided and billed to South Dakota Medicaid. These records must be retained for at least 6 years after the last date a claim was paid or denied. Please refer to the Documentation and Record Keeping manual for additional requirements.

Secure Medical Transportation Documentation Requirements
A secure medical transportation provider must maintain the following written documents and must make them available to the department on request:

- The dates each of the requirements contained in ARSD 67:16:25:04.01 and ARSD 67:16:25:04.02 were verified by the provider;
- A statement signed and dated by the provider which verifies that each vehicle used for secure medical transportation contains the equipment required in ARSD 67:16:25:04.03;
- A statement signed and dated by the provider which verifies that the securement devices meet the requirements of ARSD 67:16:04.04;
- A record of the safety inspections conducted under ARSD 67:16:25:04.05. The record must contain the date of the inspection, the odometer reading, the result of the inspection, and a notation of the repairs needed;
- The service records for each vehicle and wheelchair lift indicating the date, the odometer reading, and the nature of the maintenance work performed;
- A statement from the insurance carrier that verifies that each vehicle used to transport South Dakota Medical Program recipients has insurance which meets or exceeds the requirements established in ARSD 67:16:25:04.06;
- The accident records of each vehicle involved in an accident; and
- A record of complaints received and a statement describing how the provider responded to each complaint.

The department requires secure medical transportation providers keep documentation on file that supports that the recipient was transported to a medical appointment. Providers should also document that the recipient was confined to a wheelchair or required transportation on a stretcher. As a best practice South Dakota Medicaid recommends providers use the department’s Transportation Documentation Form, which satisfies this requirement.

**Reimbursement and Claim Instructions**

**Timely Filing**
Medicaid recipients may have one or more additional source of coverage for health services. South Dakota Medicaid is generally the payer of last resort, meaning Medicaid only pays for a service if there are no other liable third-party payers. Providers must pursue the availability of third-party payment sources and should use the Medicare Crossover or Third-Party Liability billing instructions when applicable. Providers should refer to the General Claim Guidance manual for additional information.

**Reimbursement**
The rate of payment for secure medical transportation services is limited to the lesser of the provider’s
usual and customary charge or the fee contained on the department's fee schedule website. Payment for secure medical transportation services outside the city limits includes the applicable trip fee as indicated on the fee schedule and loaded mileage calculated from the point the trip goes outside the city limits to the destination. Only one mileage allowance is payable for each trip regardless of the number of passengers. Attendant passengers are not billable. Mileage may only be claimed for trips outside the city limits. To be eligible for loaded mileage for trips outside the city limits, the provider must have legal authority to operate outside the city limits.

Claim Instructions

- The point of origin and destination of the recipient being transported are required on the claim form.
- When applicable, the following modifier codes must be included on a provider's claim:
  - TK - Additional South Dakota Medicaid recipient
  - QM - Hospital arranged secure medical transfer
    - The QM modifier can only be used with A0130 (base rate for non-emergency secure medical transportation). The QM modifier is used for a pick-up from the hospital when the recipient is discharged, and the hospital made the arrangement.
    - Applicable descriptive modifiers are required to be included on the claim.
  - Modifier payment effects are described on the department’s website.

DEFINITIONS

1. "Confined to a wheelchair or stretcher," unable to walk without the continuous aid of another person; unable to walk in any circumstances;

2. "Loaded mileage," mileage driven or flown while a patient is being transported;

3. "Secure medical transportation provider," a company, firm, or individual that uses specifically designed and equipped vehicles to provide nonemergency transportation to and from medical care for recipients confined to wheelchairs or requiring transportation on a stretcher; and

4. "Trip," the transporting of a person from the person's home to a medical provider, between medical providers, or from a medical provider to the person's home.

REFERENCES

- Administrative Rule of South Dakota (ARSD)
- South Dakota Medicaid State Plan
- Code of Federal Regulations

QUICK ANSWERS

1. Can the same vehicle be used for secure and community transportation services?
A vehicle that provides securement devices as well as non-secured seating (ex: bus with wheelchair ramp) can be used to provide both types of transportation as long as the provider meets all eligibility conditions.

2. **How does a secure medical transportation provider that is also enrolled as a community transportation provider bill for community transportation services?**

   Providers should refer to the [Community Transportation] manual for claim instructions. Community transportation services must be billed for using the applicable community transportation codes on the [Transportation Services Fee Schedule]. Billing for community transportation services using secure medical transportation codes is considered fraud and abuse of the program.

3. **Can an ambulance be a secure medical transportation provider?**

   Yes, an ambulance provider may enroll as a secure medical transportation provider and bill for services at the secure medical transportation provider rates.

4. **Does South Dakota Medicaid provide a list of enrolled secure medical transportation providers to recipients?**

   A list of enrolled provider is available on our website at [https://dss.sd.gov/medicaid/recipients/securemedtransportation.aspx]. Providers can contact [sdmedxgeneral@state.sd.us](mailto:sdmedxgeneral@state.sd.us) to update information on the list.

5. **Can a provider limit which Medicaid recipients they serve?**

   Providers may set reasonable limits such as hours of service or areas of operation; however, providers must serve all Medicaid recipients within the parameters of these limits. Transportation providers may not limit services to specific Medicaid recipients. For example, an assisted living provider cannot limit transportation to their own residents.