

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: West Virginia

Attachments 3.1-D

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**METHODS OF PROVIDING TRANSPORTATION**

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Transportation (For Categorically Needy and Medically Needy)

- A. The Bureau for Medical Services assures that medically necessary transportation of recipients to and from providers of medically necessary services will be provided. The methods that will be used are as follows:
1. Any appropriate means of transportation which can be secured without charge through volunteer organizations, public services such as fire department and public ambulances, or relatives will be used.
  2. Non-emergency medical transportation shall be provided with limitations through a risk capitation brokered transportation program by a single contracted broker to directly coordinate statewide non-emergency medical transportation.
    - a. Non-emergency medical transportation will be provided by a single contracted transportation broker for the least expensive means of transportation by fixed route, private auto, basic vehicle, enhanced vehicle, and commercial carrier, such as buses, taxis and/or airplanes.
    - b. Non-emergency medical transportation will be provided by a single contracted transportation broker to the nearest medically appropriate and qualified provider not to exceed 125 miles from the members home in state or within 30 miles of the West Virginia border.
    - c. Ancillary expenses associated with out-of-state travel, such as meals and lodging, shall be provided for a Member and one parent, guardian, or attendant, when medically necessary.

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3. Ambulance service shall be reimbursable only when it is the least expensive and most appropriate for the recipient's medical needs and the following criteria shall be met.
  - a. Emergency ambulance services to the nearest appropriate medical facility are provided without preauthorization when the emergency treatment is specified and rendered.
  - b. Nonemergency ambulance services to a hospital, clinic, physician's office, or other health facility to secure medically necessary Medicaid covered services for a "stretcher bound" Medicaid recipient. "Stretcher bound" denotes the inability to get up from bed without assistance, the inability to ambulate, and the inability to sit in a chair or wheelchair.
  - c. Air ambulance services may be provided for transport to a medical facility beyond the county of residence or state boundaries when ground ambulance services are determined not appropriate by the attending facility.
  - d. Any determination of medical necessity of ambulance transportation, and provision of preauthorization and post-authorization, is made by the Bureau for Medical Services or by the Bureau's representative.
  - e. Ambulance services shall be provided outside of the transportation brokerage contract and, if medically necessary, is reimbursable on a fee for service basis.

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The state attests that all the minimum requirements outlined in 1902(a)(87) of the Act are met.

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