

**Bulletin Number:** MSA 15-14

**Distribution:** Bridges Eligibility Manual (BEM) and Bridges Administrative Manual (BAM) Holders, Medicaid Health Plans

**Issued:** June 1, 2015

**Subject:** Reimbursement for Wheelchair Lift and Medivan Transportation; Medical Needs Form Clarification

**Effective:** July 1, 2015

**Programs Affected:** Medicaid, Healthy Michigan Plan

The purpose of this bulletin is to inform local Michigan Department of Health and Human Services (MDHHS) staff of changes to Medicaid's Non-Emergency Medical Transportation (NEMT) policy. It addresses reimbursement for wheelchair lift vehicles and medivans, and clarifies the Medical Needs form (DHS-54-A) requirements for all arranged NEMT. This policy is effective for dates of service on and after July 1, 2015. Refer to the MDHHS Bridges Administrative Manual (BAM) 825 for complete information regarding Medicaid NEMT policy.

### **Wheelchair Lift and Medivan Transportation Reimbursement**

NEMT services may be authorized for an individual in order to obtain medical evidence or receive any Medicaid-covered service from any Medicaid-enrolled provider. Non-ambulatory individuals may be authorized to receive NEMT services provided by wheelchair lift vehicles and medivans owned by commercial or non-profit entities. Reimbursement for commercial and non-profit wheelchair lift vehicles or medivans is \$30.00 per round trip plus \$0.27 per loaded mile.

### **Medical Needs Forms**

A completed DHS-54-A is required for all arranged medical transportation. The DHS-54-A must be obtained no later than the date of the medical appointment for a one-time medical visit. For transportation needs related to ongoing treatment (e.g., dialysis, chemotherapy, etc.), the completed DHS-54-A must be obtained no later than the date of the first appointment.

### **Manual Maintenance**

Retain this bulletin until the information is incorporated into the Bridges Administrative Manual.

### **Questions**

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov). When you submit an e-mail be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

### **Approved**

  
Stephen Fitton, Director  
Medical Services Administration