

## Transportation Benefits for MetroPlus Members

The table below indicates how the transportation service is provided to our members. FOR EMERGENCY TRANSPORTATION CALL 911, ALWAYS!!			
Plan Name	Type of Benefit	Contractor	Considerations
Medicaid; HIV SNP & HARP	Carved out	Medical Answering Services (MAS) For a list of Transportation services check <a href="https://www.emedny.org/ProviderManuals/Transportation/PDFS/Transportation_PA_Guidelines&gt;Contact_List.pdf">https://www.emedny.org/ProviderManuals/Transportation/PDFS/Transportation_PA_Guidelines&gt;Contact_List.pdf</a>	<ul style="list-style-type: none"> <li>&gt; Emergency and/or non-emergency medical transportation will be covered by regular Medicaid.</li> <li>&gt; Emergency transportation call <b>911</b>.</li> <li>&gt; For additional information call MetroPlus Customer services at <b>1-800-303-9626</b></li> <li>&gt; Non-emergency transportation:               <ul style="list-style-type: none"> <li><input type="checkbox"/> Must be requested by the member or the provider office on behalf of the member.</li> <li><input type="checkbox"/> Must call 72 hours prior the appointment and provide appointment date and time, address where the member is going, and doctor that he or she is seeing.</li> <li><input type="checkbox"/> Non-emergency medical transportation includes a personal vehicle, bus, taxi, ambulette and public transportation.</li> <li><input type="checkbox"/> Member's need to contact MAS at <b>1-844-666-6270</b> (The member would typically appear on a file that the state provides with the level of eligibility/transport type required).</li> </ul> </li> <li>&gt; For detailed information check <b>MAS</b> at <a href="http://www.medanswering.com/page.taf?ID=278">www.medanswering.com/page.taf?ID=278</a></li> </ul>
Essential Plan	Plan Covered	Directly Provided by ambulance services* Medical Answering Services (MAS)** For a list of Transportation services check <a href="https://www.emedny.org/ProviderManuals/Transportation/PDFS/Transportation_PA_Guidelines&gt;Contact_List.pdf">https://www.emedny.org/ProviderManuals/Transportation/PDFS/Transportation_PA_Guidelines&gt;Contact_List.pdf</a>	<p><b>*Essential Plans 1 &amp; 2:</b> Pre-Hospital Emergency Medical Services for the treatment of an Emergency Condition, when such services are provided by an ambulance service, are covered by the Plan for all essential plans.</p> <ul style="list-style-type: none"> <li>&gt; Non-Emergency Ambulance Transportation.</li> </ul> <p>The plan also covers non-emergency ambulance transportation in the following cases:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> From a non-participating Hospital to a participating Hospital.</li> <li><input type="checkbox"/> To a Hospital that provides a higher level.</li> <li><input type="checkbox"/> To a more cost-effective Acute care Facility.</li> <li><input type="checkbox"/> From an Acute care Facility to a sub-Acute setting.</li> </ul> <ul style="list-style-type: none"> <li>&gt; Emergency transportation call <b>911</b>.</li> <li>&gt; For additional information call MetroPlus Customer services at <b>1-855-809-4073</b></li> </ul> <p><b>**Essential Plan 3 &amp; 4 ONLY</b></p> <ul style="list-style-type: none"> <li>&gt; Pre-hospital emergency transportation is same than Essential Plans 1&amp; 2.</li> <li>&gt; Members are also eligible for non-emergency medical transportation to ambulatory services. Members should contact MAS at <b>1-844-666-6270</b> (The member would typically appear on a file that the state provides with the level of eligibility/transport type required).</li> <li>&gt; For detailed information check <b>MAS</b> at <a href="http://www.medanswering.com/page.taf?ID=278">www.medanswering.com/page.taf?ID=278</a></li> </ul>
Plan Name	Type of Benefit	Contractor	Considerations

<b>MLTC</b>	Plan Covered	Directly provided by MetroPlus	<ul style="list-style-type: none"> <li>&gt; Emergency transportation is not included in the Plan coverage. It is covered by Medicaid.</li> <li>&gt; Emergency transportation call <b>911</b>.</li> <li>&gt; For non-emergency transportation, MetroPlus members would need to contact Customer Services at <b>1-855-355-6582 select transportation prompt via IVR</b>. Transportation Vendor National MedTrans (631-302-5510 ) Requirements and reviewed by transportation rep: <ul style="list-style-type: none"> <li><input type="checkbox"/> Eligibility</li> <li><input type="checkbox"/> Demographics</li> <li><input type="checkbox"/> Appointment type (details).</li> <li><input type="checkbox"/> Authorization details on system</li> <li><input type="checkbox"/> Arrange services with transportation vendor</li> </ul> </li> </ul>
<b>Medicare Advantage</b>	Carved out	Medical Answering Services (MAS) Transportation services check <a href="https://www.emedny.org/ProviderManuals/Transportation/PDFS/Transportation_PA_Guidelines_Contact_List.pdf">https://www.emedny.org/ProviderManuals/Transportation/PDFS/Transportation_PA_Guidelines_Contact_List.pdf</a>	<ul style="list-style-type: none"> <li>&gt; Emergency and/or non-emergency medical transportation will be covered by regular Medicaid.</li> <li>&gt; Emergency transportation call <b>911</b>.</li> <li>&gt; Member or Provider need to contact MAS at <b>1-844-666-6270</b> (The member would typically appear on a file that the state provides with the level of eligibility/transport type required).</li> <li>&gt; For detailed information check <b>MAS</b> at <a href="http://www.medanswering.com/page.taf?ID=278">www.medanswering.com/page.taf?ID=278</a></li> </ul>
<b>Medicare Platinum QHP Gold CHP</b>	Plan Covered	Directly Provide by Ambulance Services***	<ul style="list-style-type: none"> <li>&gt; Emergency transportation call <b>911</b>.</li> </ul> <p>***Plan covers emergency transportation and or hospital to hospital transportation <b>only</b>. For additional information about Gold Plan benefits call <b>1-877-475-3795</b>.</p>