

Bulletin Number: MSA 16-16

Distribution: Ambulance Providers, Hospitals, Medicaid Health Plans

Issued: June 1, 2016

Subject: Ambulance Prior Authorization & Air Ambulance Enrollment Update

Effective: July 1, 2016

Programs Affected: Medicaid, Healthy Michigan Plan, Children's Special Health Care Services, MIChild, Maternity Outpatient Medical Services Program

The purpose of this policy is to further define and amend ambulance policy pertaining to the prior authorization (PA) of ambulance services, and provider enrollment requirements for enrolled air ambulance providers. This policy is effective for dates of services on and after July 1, 2016, and applies to Fee-for-Service beneficiaries. For beneficiaries enrolled in a Medicaid Health Plan (MHP), providers should contact the MHP for policy and coverage information.

Prior Authorization

For services that require PA, the ambulance provider, unless otherwise specified in the Medicaid Provider Manual, must request authorization from the Michigan Department of Health and Human Services (MDHHS) Program Review Division (PRD). The request must include the following information:

- Beneficiary's name and Medicaid ID number
- Diagnosis
- Point of pick-up and destination
- Service(s) to be provided
- Explanation as to why the ambulance transportation is medically necessary
- Explanation as to why the beneficiary cannot be transported by other means
- Name, address, and National Provider Identifier (NPI) of the ambulance provider
- PA requestor's name

Based on the documentation provided, PRD approves or denies the PA request. The ambulance provider may not bill MDHHS for prior authorized services until PRD approves the PA request. PRD must be notified by the PA requestor of any changes made to the approved authorization.

Except as otherwise specified in the Medicaid Provider Manual, the PA number must be entered on the claim before the ambulance provider will be reimbursed for services.

Air Ambulance Provider Enrollment Update

Air ambulance providers who are licensed by MDHHS to provide emergency medical services and are properly enrolled in the Medicaid program may be reimbursed for medically necessary air ambulance services. To become Medicaid-enrolled, Michigan-licensed air ambulance providers must submit a copy of their state-issued aircraft operations license number with their provider enrollment application. For prospective air ambulance providers that are not Michigan-licensed but are licensed in another state, a copy of their respective state aircraft operations license must be submitted with their provider enrollment application along with a copy of their Commission on Accreditation of Medical Transport Systems (CAMTS) accreditation, or an affidavit of substantial

CAMTS accreditation compliance. The Medicaid Provider Enrollment file reflects enrollment as either a fixed wing or helicopter air ambulance provider.

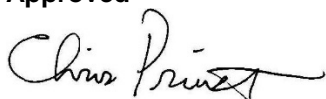
Manual Maintenance

Retain this bulletin until the information is incorporated into the Michigan Medicaid Provider 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. 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

A handwritten signature in black ink that reads "Chris Priest". The signature is written in a cursive style with a long, sweeping underline.

Chris Priest, Director
Medical Services Administration