Provider Update

Update Regarding Nonemergent Ambulance Transportation

**Summary:** On February 17, 2014, Amerigroup* began using Access2Care (A2C) for all non-emergent transportation needs when MTP is not available. As a result, A2C currently authorizes nonemergent transportation for Medicaid (STAR, STAR+PLUS) and CHIP members. Effective August 1, 2014, requests for non-emergent ambulance transportation will no longer be handled by A2C.

**What this means to you:** Beginning August 1, 2014, please contact Amerigroup for all ambulance nonemergent transportation requests. A2C must continue to be used for nonemergent transportation such as van or taxi as these are part of Amerigroup’s value added program.

**To request authorizations for nonemergent transportation:**

<table>
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<tr>
<th>Type</th>
<th>Contact Information</th>
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<tbody>
<tr>
<td>Ambulance only</td>
<td>Call Amerigroup at 1-800-325-0011</td>
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<tr>
<td>Other than ambulance</td>
<td>Call A2C at 1-855-295-1636</td>
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You may also request authorization for nonemergent transportation by faxing a completed Amerigroup Non-Emergency Ambulance Prior Authorization Request form to 1-866-249-1271. The form is located online at providers.amerigroup.com/TX > Providers Resources & Documents > Forms.

All claims for non-ambulance, non-emergency transportation services, such as van or taxi, that are part of Amerigroup’s value add program must continue to be submitted to Access2Care for payment. Any non-ambulance, nonemergent claim received by Amerigroup will be denied. In the event any non-ambulance claim is paid by Amerigroup, the claim is subject to recovery or recoupment.

Effective August 1, 2014, Amerigroup will be responsible for all claim payments related to non-emergency ambulance transportation services. All ambulance providers must be attested with the Texas Medicaid & Healthcare Partnership. Any ambulance provider who does not have an attested NPI will be denied payment for Medicaid STAR and STAR+PLUS. A TPI is required for Medicaid payments.

Providers have the right to correct claims. The corrected claim process is outlined in the Amerigroup Provider Manual available at providers.amerigroup.com/TX. Corrected claims must be received within 120 days of the Explanation of Payment (EOP).

*Amerigroup members in the Medicaid Rural Service Area are served by Amerigroup Insurance Company; all other Amerigroup members in Texas are served by Amerigroup Texas, Inc.
There are no changes to emergent transportation. All emergent transportation claims continue to be paid by Amerigroup. Amerigroup requires all emergent transportation services to be clearly distinguished with the modifier, ET, in the primary position. Emergent claims that do not have the ET modifier in the primary position on all claim lines will be denied or rejected.

It is important, during the discharge planning process, for hospitals to consider the transportation needs of our members. Discharge planning should allow substantial time to plan and coordinate nonemergent transportation needs. Hospitals should make every effort to ensure the appropriate level of transportation is provided to members. Nonemergent transportation by way of van, taxi, bus or other public transportation must be coordinated with MTP as the primary nonemergent transportation mechanism.

**What if I need assistance?**
If you have questions about this communication, need an authorization, received this fax in error, or need assistance with any other item, contact your local Provider Relations representative or call our Provider Services team at 1-800-454-3730.