



**SENIOR & LONG TERM CARE DIVISION  
COMMUNITY SERVICES BUREAU**

**COMMUNITY FIRST CHOICE  
Policy Manual**

**Section: SERVICE REQUIREMENTS**

**Subject: Medical Escort and Medical  
Transportation Mileage**

*Reference: 37.40.1111, 37.86.2402*

**PURPOSE**

This policy outlines the circumstances when a member may direct an attendant to provide escort to a medical appointment and when the provider agency may provide mileage reimbursement to the attendant.

**MEDICAL ESCORT**

Medical escort service provides a member who demonstrates a medical and functional need for assistance from an attendant en route to or at the medical appointment. Medical escort is available when a family member or informal caregiver is unable to accompany the member.

Note: Medical escort is not authorized to provide a member with cognitive deficits the use of an attendant to communicate and relay medical information at the medical appointment.

Coverage of medical escort is limited to appointments to obtain necessary medical services covered by the Medicaid program. The authorized time is approved to the nearest provider. Nearest providers include providers closest to the member that provide the necessary services or a trip that is prior authorized by Medicaid Transportation (refer to ARM 37.86.2402).

Note: If a provider agency is unsure whether a medical appointment is approved by Medicaid Transportation they may request the member's trip reference number and contact Medicaid Transportation at 1-800-292-7114 to verify the location of the approved provider.

Medical escort is typically not available to members who are 16 years or younger unless a two-person transfer assist is required for health and safety reasons.

Medical escort attendant time is time beyond the Mountain Pacific Quality Health (MPQH) Service Profile authorization.

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MPQH will authorize medical escort on the member's Service Profile by indicating an "A" for authorization of the task "medical escort".

Note: If a member does not have medical escort authorized on their Service Profile, they cannot receive the service unless the provider agency approves a temporary authorization for medical escort based on a member's change in condition or circumstance.

Medical escort attendant time must be tracked on the service delivery record. Tracking must include the total time to and from the appointment and the specific destination of the medical appointment with the name of medical provider and location (i.e., address and town).

If a member chooses to utilize a provider outside of their community, the CFC/PAS program will not reimburse attendant time that exceeds the time it would have taken the member to travel to and see the nearest appropriate provider.

Note: Medicaid Home and Community Based Services (HCBS) Waiver may not be used to pay for medical escort appointments when a member chooses to see a medical provider that is not the nearest provider.

Provider agencies are required to provide documentation that the member attended the medical appointment prior to billing medical escort. Repayment is required for medical escort time that is billed without verification that the member attended the medical appointment.

## **MEDICAL TRANSPORTATION MILEAGE**

Medical Transportation reimbursement is only available to the site nearest the member which provides the necessary service or a site that is prior authorized by MPQH. Medical Transportation is accessed through two different programs.

The primary reimbursement method for transportation and per diem is through Medicaid Transportation. Medicaid Transportation provides mileage fees directly to the member or another entity providing service to the member. Medicaid Transportation reimburses miles for travel out of town and local travel that exceeds \$5 per calendar month. The private vehicle mileage rate is 33 cents per mile. Thus, local travel that exceeds 15 miles per calendar month may be reimbursed through Medicaid

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Transportation.

Note: For information on prior authorization, contact MPQH at 1-800-292-7114. Either the provider agency or the member can call MPQH. To have services authorized by MPQH they must receive the Medicaid ID number of the member, date, time, and location of the appointment, and to whom the mileage check should be issued.

CFC/PAS: Medical transportation mileage through the CFC/PAS program is reimbursement for personal vehicle mileage when a personal care attendant drives a member to obtain a Medicaid reimbursable service. It is only available to reimburse mileage expenditures for local travel that Medicaid Transportation will not cover (i.e. less than \$5 per month).

If the member chooses to attend a medical appointment at a provider that is not the closest provider and is not prior authorized by MPQH the mileage for the trip is not reimbursable. Medicaid Transportation will reimburse the member for the miles to the nearest provider.

Medical transportation mileage must be tracked on a Mileage and Medical Escort form (SLTC-221). Tracking must include odometer readings at the beginning and end of the trip (last three digits of the odometer are acceptable) and the specific destination of the medical appointment with the name of medical provider and location (i.e., address and town). Refer to AB-CFC/PAS 912.