Service Addendum: Transportation

The provision of contracted, authorized, and provided services shall be in compliance with the provisions of this agreement, the service description and requirements of this section, and if applicable, state certification and licensing criteria.

Specifics

Providers are subject to the same qualifications as providers under the Medicaid State Plan as defined in Wisconsin State Statute 1915 (c) Home and community-Based Waiver services waivers #0367.90 and #0368.90 required under § 46.281 (1) (c).

The services for which Lakeland Care, Inc. (LCI) is contracting with your organization are noted in the Rates and Service Codes chart attached to the LCI Service Provider Contract.

<u>Timeliness and Access to Service</u>

Providers shall make all reasonable efforts to initiate service provision at the date and time requested by the LCI IDT on behalf of the member. In the event that initiation of the service at the member's preferred time is not feasible, the provider will express such to the LCI IDT, who will arrange an alternative start date of services, or, if necessary, arrange to meet the member's needs by other means.

Definition

Transportation (specialized transportation) – community transportation is the provision of transportation services or items that enable a member to gain access to waiver and other community services, activities and resources, as specified in the member's care plan. This service may consist of items such as tickets, fare cards, or other fare media or services where the common carrier, specialized medical vehicle or other provider directly conveys a member and her or his attendant, if any, to destinations. Excludes emergency (ambulance) medical transportation covered under the Medicaid State Plan service. Taxis or common carriers must comply with Wis. Stat. Chapter 194. Public mass transit must comply with Wis. Stat. Chapter 85.20.

Transportation (specialized transportation) - other transportation consists of transportation to receive non-emergency, Medicaid–covered medical services. This service may include items such as tickets, fare cards, or other fare media, reimbursement of mileage expenses, or payment for services where the provider directly conveys the member and her or his attendant, if any, by common carrier or specialized medical vehicle (SMV) as appropriate to and from receiving Medicaid–covered medical services. Members eligible for this service must have decision-making authority over a budget for the purchase of such services. Such members are not limited to providers in the MCO's network (although the credentials of specialized medical vehicle providers must be verified by the MCO), do not require MCO prior authorization to purchase any transportation service from a qualified provider to any Medicaid coverable medical service if the member's budget is sufficient to pay the cost, and advanced scheduling of routine trips is not required if the member can obtain transport. Legally responsible relatives may be paid for providing this service if they meet the conditions under Article VIII.P.2. Excludes ambulance transportation, which is available through the Medicaid State plan. Excludes non-emergency medical transportation when authorized by the MCO as a State Plan

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service for members without budget authority. Excludes non-medical transportation which is provided under the sub-service of Community Transportation; however, the same ride may be used to provide transport to medical appointments and community activities as long as there is not duplication of payment. Specialized transportation agencies must comply with Wisconsin Statutes Chapter 85.21 and Wisconsin Administrative Code DHS 61.45. Individual providers must have a valid driver's license and liability insurance.

Standards, Training, and Competency

Providers of services shall meet the standards of this agreement; and if applicable, agrees to retain licensing in good standing during contract period.

Provider shall ensure that staff providing care to members are adequately trained and proficient in both the skills they are providing and in the needs of the member(s) receiving the services.

Training of staff providing services shall include:

- 1. Provider agency recording and reporting requirements for documentation, critical incident reporting, and other information and procedures necessary for the staff to ensure the health and safety of member(s) receiving supports
- 2. Training on the needs of the target group for the member(s) served under this agreement
- 3. Training on the provision of the services being provided
- 4. Training on the needs, strengths, and preferences of the individual(s) being served
- 5. Training of rights and confidentiality of individuals supported
- 6. Information and provider procedure for adherence to the LCI policies below:
 - a. Incident Management System
 - b. Restraint and Seclusion Policy and Procedure
 - c. Communication Expectations
 - d. Unplanned use of Restrictive Measure
 - e. Confidentiality

Provider shall ensure competency of individual employees performing services to the LCI members. Competency shall include assurance of the general skills and abilities necessary to perform assigned tasks.

Staff to Member Ratio

Staff to member ratio for services will vary based on member needs and long-term care outcomes and will be determined under guidance of the LCI Interdisciplinary Team (IDT) staff.

Collaboration and Coordination of Care

Through the use of the Resource Allocation Decision method (RAD), the LCI IDT staff shall assess the member's needs and outcomes to determine the amount of services to be authorized. The LCI IDT staff shall exchange pertinent information with the provider at the time the referral is made to assure all health and safety needs are provided during the services. This information exchange shall include the assessed needs and amount of authorized units as it relates to services.

All aspect of services shall be discussed between the LCI IDT staff, member or legal representative, and provider to ensure proper collaboration.

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Billable Units

Provider rates for provision of services will incorporate all administrative and business functions related to the provision of service. Contracted rates include the provision of administrative functions necessary for services and are not billable beyond units provided to each authorized member.

Providers should reference the Rates and Service Codes chart of the agreement for contract units and rates. Contracted transportation services are often authorized by trip/mile and/or route:

<u>Trips</u>

A trip consists of the point of member's pick-up to delivery at member's destination. For example, if a member is picked up at home and transported to the clinic, one trip has been completed when the member is dropped off at the clinic.

A trip charge includes the following services:

- Dispatch of vehicle to the member's pick-up point
- Escort of the member from their point of origination to their destination
- Escort of the member from their destination to their point of origination
- This may include door-to-door, curb-to-curb or door-through-door accompaniment of members.
 - * If the services provided to LCI members do not meet all 3 of these criteria, Provider may not bill a trip charge.

Mileage

Mileage for non-medical appointments is the distance traveled after the first <u>seven</u> miles included in the trip charge. Mileage for medical appointments is the distance traveled after the first five miles included in the trip charge.

Mileage cannot be billed for trips where a route rate or flat fee has been established.

LCI covers mileage for the shortest, most direct route from the point of member's pick-up point to the member's destination. Dispute of mileage will be resolved with www.maps.google.com using the shortest distance.

<u>Unloaded Mileage</u>

Unloaded mileage is the distance traveled without a passenger to pick up a passenger for LCI-authorized transportation. Unloaded mileage may be billable by SMV providers under the following circumstances.

- The vehicle travels empty more than 20 miles by the shortest route available from the dispatch point (i.e., vehicle starting location) to the member's location.
- Unloaded mileage is not reimbursed for travel less than 20 miles.
- Unloaded mileage is reimbursed only once when multiple members are being carried on one trip.
- Unloaded mileage is not reimbursed for a vehicle returning empty to its home base.

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Route

Route transportation is the provision of travel from one location to another established location with an agreed upon rate. Route reimbursement rates may include travel from one city to another city or from the member's home location to a regularly routed and scheduled location. Additional mileage cannot be billed separately when a route rate has been contracted. Contracted route rates will be reimbursed per the provisions of the Rates and Service Codes chart in the contract.

Wait Time

Wait time is the time a vehicle and its driver spend waiting for a member upon arrival at their destination. Wait time rates may be negotiated between Provider and LCI. Wait time is only billable to LCI in situations where, due to location, Provider does not have the opportunity to provide other transportation services.

Providers should use increments as listed in the rates and service codes chart to bill LCI up to the authorized number of units for the member. Providers can only bill for services rendered to the member. Provider will refund LCI the total amount of any/all units billed without services rendered to the LCI member.

Providers are required to provide for all identified care needs during the provision of services and are specifically prohibited from billing fraudulently for additional services during the provision of these services.

Family Care services administered by LCI are funded by state and federal tax dollars though the Medical Assistance program. As a publicly-funded system, LCI strives to maintain the integrity of the program by ensuring that all services are billed as authorized by LCI, and as rendered to members. LCI ensures this protection, by regularly conducting random reviews of claims submitted by its contracted providers. LCI reserves the right to request verification documentation from providers. This could include but is not limited to: providers' case notes, files, documentation and records.

Additional Considerations:

- Services will be provided as identified and authorized by the LCI IDT staff.
- Providers may not limit or deny any LCI member services due to dissatisfaction with their LCI contracted rate.
- LCI pre-authorizes all of its services. If provider bills for more units than authorized without prior authorization, these services may be denied.
- In the case that a LCI member cancels service, the provider must contact the LCI IDT staff. Services cancelled will not necessarily be rescheduled and should not be assumed by the provider.

Additional Contract Expectations:

- Transportation service providers are allotted a 15-minute window for pick up/drop-off times for rides scheduled in advance
- Negotiated out of county flat route rates include mileage and 2 hours of wait time.

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