

Fact Sheet

Non-Emergency Medical Transportation (NEMT) Part 1

Provider Playbook: NC Medicaid Managed Care

Who is responsible for NEMT under NC Medicaid Managed Care?

NC Medicaid is required to provide transportation to medical appointments for all Medicaid eligible individuals who need and request assistance with transportation. NC Health Choice beneficiaries are not eligible for these services.

For beneficiaries enrolled in NC Medicaid Managed Care, Health Plans are required to provide non-emergency medical transportation (NEMT) services. Health Plans will use transportation brokers to arrange and provide transportation or contract directly with transportation providers.

For beneficiaries in NC Medicaid Direct and the Eastern Band of Cherokee Indians (EBCI) Tribal Option, local Departments of Social Services (DSS) will continue to arrange NEMT services. Counties will continue to follow current North Carolina NEMT policy, and providers will continue to bill NCTracks for reimbursement.

For all beneficiaries in NC Medicaid Managed Care and NC Medicaid Direct, transportation will be available if the beneficiary receives a Medicaid covered service provided by a qualified, enrolled Medicaid provider. Medicaid pays for the least expensive means of transportation suitable to the beneficiary's needs.

WILL BENEFICIARIES RECEIVE THE SAME SERVICE FROM HEALTH PLANS THAT THEY ARE USED TO RECEIVING FROM DSS?

Beneficiaries will receive the same service from Health Plans. The amount, duration, and scope of the NEMT service is NOT changing. NEMT will be provided by the Health Plan in which the beneficiary is enrolled. Health Plans are contracting with statewide NEMT brokers to arrange and provide NEMT to enrolled members.

Health Plans are required to:

- Provide NEMT appropriate for the member to the nearest enrolled medical provider.

- Provide NEMT to a Medicaid-covered service provider, including services not covered through NC Medicaid Managed Care, provided by a qualified, enrolled Medicaid provider.
- Provide travel-related expenses including:
 - Lodging
 - Food
 - Parking fees/tolls
 - Transportation vouchers (e.g., taxis, ride-sharing services, public transit)
 - Mileage
- Develop a network of NEMT providers.

Health Plans are also required to:

- Provide training to NEMT providers.



- Address any behavioral or medical needs or issues that arise during transportation.
- Establish rates for reimbursement.
- Have contractual requirements for quality of care, vehicles, drivers, timeliness, and no-shows.

Members will:

- Be informed that there is no cost for NEMT services.
- Be informed of who may accompany them without cost.
- Be informed that any member under the age of eighteen (18) must have an adult present.
- Have the Health Plan NEMT policy explained including:
 - How to request or cancel a trip
 - Limitations on transportation
 - Advanced notice requirements
 - Expected member conduct and procedures for no-shows
- Be able to arrive at the provider's location in time for the scheduled appointment but no sooner than one hour before the appointment.
- Not have to wait more than one hour after the conclusion of the treatment for transportation home.
- Not be picked up prior to the completion of treatment.
- Be able to request an appeal if the request for transportation assistance is denied.

HOW AND WHEN CAN HEALTH PLAN MEMBERS SCHEDULE NEMT?

Health Plans will send Welcome Packets to enrolled members that include information on how to access NEMT services. Health Plans will begin accepting member calls on June 1, 2021 to schedule appointments for transportation on or after July 1, 2021.

Health Plans must ensure that:

- Members are not required to make transportation requests more than two days in advance.
- Members are not required to make transportation requests in person.
- Urgent transportation services are exempt from any advance notice requirement.

Members are encouraged to call their Health Plan to schedule NEMT services at the time their appointment is scheduled.

WILL NC HEALTH CHOICE BENEFICIARIES HAVE ACCESS TO NEMT UNDER MEDICAID MANAGED CARE?

It is important to note that NC Health Choice beneficiaries are not eligible to receive NEMT services, unless offered by the health plan as a Value-Added benefit. Contact the Health Plan's Member Services to inquire about Value Added Transportation Service.

CAN DSS CONTRACT WITH THE HEALTH PLANS FOR NEMT SERVICES?

Health Plans should be contacting counties and may contract with them to use existing NEMT providers, including county-owned transportation services or fleets. NCDHHS does not need to participate in these discussions. If there are issues or questions related to NEMT, the Health Plans or the DSS offices should bring them to NC Medicaid for discussion and resolution.

WHO ARE THE NEMT BROKERS FOR EACH HEALTH PLAN?

PHP	NEMT Broker	Contact Information
WellCare	One Call	Kala Datz Phone: 224-256-3105 Email: Kala_Datz@onecallcm.com Website: www.onecallcm.com
UnitedHealthcare Community Plan	ModivCare	Phone: 866-910-7684 ext. 0 Email: ncnetwork@logisticare.com Website: https://modivcare.com/
HealthyBlue	ModivCare	Phone: 866-910-7684 ext. 0 Email: ncnetwork@logisticare.com Website: https://modivcare.com/
AmeriHealth Caritas	ModivCare	Phone: 866-910-7684 ext. 0 Email: ncnetwork@logisticare.com Website: https://modivcare.com/
Carolina Complete Health	ModivCare	Phone: 866-910-7684 ext. 0 Email: ncnetwork@logisticare.com Website: https://modivcare.com/