TO: Transportation Providers Participating in MassHealth

FROM: Amanda Cassel Kraft, Acting Medicaid Director

RE: MassHealth Coverage and Reimbursement Policy for Transportation Services Related to the 2019 Novel Coronavirus Disease (COVID-19)

Background

MassHealth’s mission is to improve the health outcomes of our diverse members and their families by providing access to integrated health care services that sustainably and equitably promote health, well-being, independence and quality of life. In support of that mission, MassHealth provides broad coverage of medically necessary health care services to its members. In light of the state of emergency declared in the Commonwealth due to the COVID-19 outbreak, MassHealth is introducing additional flexibilities for coverage and billing related to COVID-19, as further described in this bulletin.

This bulletin will be effective for dates of service on or after March 10, 2020, and will remain effective for the duration of the state of emergency declared via Executive Order No. 591.

Wheelchair Van and Nonemergency Ambulance Service for Members Who Are Under Investigation or Known to Have COVID-19

Notwithstanding any language to the contrary in 130 CMR 407.000 including, but not limited to, 130 CMR 407.471(A) and 407.481(A) and (B), wheelchair van and nonemergency ambulance transportation is appropriate for medically necessary transportation for MassHealth members who are persons under investigation or known to have COVID-19. Persons who are under investigation or known to have COVID-19 meet the criteria for use of wheelchair vans and nonemergency ambulances, so long as the transportation is otherwise medically necessary and appropriate. This includes members who are ambulatory and only require curb-to-curb transportation.

Accordingly, members who would ordinarily obtain transportation through the Human Service Transportation (HST) brokerage system with an approved PT-1 form can instead use fee-for-service transportation with a Medical Necessity Form if they are persons under investigation or known to have COVID-19. In such cases, the member’s provider should complete a Medical Necessity Form in accordance with 130 CMR 407.421(D). The provider should document in the Medical Necessity Form that the member is known or suspected to have COVID-19 and that the member will receive a medically necessary service covered by MassHealth.

As a reminder, consistent with 130 CMR 407.411(C), transportation to a medical appointment originates from the member’s home or other appropriate location, such as the office of another provider, and proceeds to the location of the medical appointment. Transportation providers should not refuse to transport members from their homes to medically necessary appointments.
**MassHealth Website**

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**Questions**

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Service Center at (800) 841-2900, email your inquiry to [providersupport@mahealth.net](mailto:providersupport@mahealth.net), or fax your inquiry to (617) 988-8974.