



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Division of Medical Assistance

600 Washington Street
Boston, MA 02111
www.mass.gov/dma

MASSHEALTH
TRANSMITTAL LETTER TRN-26
April 2002

TO: Transportation Providers Participating in MassHealth
FROM: Wendy E. Warring, Commissioner
RE: *Transportation Manual* (Revised Service Codes)

This transmittal letter issues a new Subchapter 6 for the *Transportation Manual*, and reminds providers that the Division of Health Care Finance and Policy (DHCFP) has adopted new rates for Advanced Life Support (ALS) and Basic Life Support (BLS) ambulance services, and chair-car services. Only those services appearing in the revised Subchapter 6 of the *Transportation Manual* are covered services.

Providers can obtain the new DHCFP ambulance and chair-car regulations (114.3 CMR 27.00) from DHCFP's Web site, at http://www.mass.gov/dhcfp/pages/pdf/114.3_27.pdf. The DHCFP regulations include the new fee schedule, service codes, and definitions.

Effective April 15, 2002, claims for ALS and BLS services for dates of service on or after May 15, 2001, must be billed with the new codes or they will be denied. Effective April 15, 2002, claims for chair-car services for dates of service on or after July 1, 2001, must be billed with the new codes or they will be denied.

Adjustments to Previously Paid Claims

Claims for ALS and BLS services with dates of service between May 15, 2001, and March 31, 2002, will be systematically adjusted by the Division if those claims were submitted with the old service codes and processed and paid by March 31, 2002. Claims for chair-car services with dates of service between July 1, 2001, and April 14, 2002, will be systematically adjusted by the Division if those claims were submitted with the old service codes and processed and paid by April 14, 2002. Providers will be responsible for ensuring that all other claims are submitted, resubmitted, or adjusted appropriately to ensure the correct payment rate.

The retroactive systematic adjustments will be made as follows:

OLD CODE	DESCRIPTION	NEW CODE	DESCRIPTION
A0362	Ambulance service, BLS, emergency transport, one way	A0429	Ambulance service, basic life support, emergency transport (BLS–emergency)
A0380	Ambulance service, BLS, per mile	A0425	Ground mileage, per statute mile
A0360	Nonemergency transportation, BLS, one way	A0428	Ambulance service, basic life support, nonemergency transport (BLS)
X0146	Nonemergency ambulance service, BLS, per mile	A0425	Ground mileage, per statute mile
A0370 (I.C.)	Advanced life support service (\$96.37 payment)*	A0426 or A0427	Ambulance service, advanced life support, nonemergency transport, level 1 (ALS 1) Ambulance service, advanced life support, emergency transport, level 1 (ALS 1–emergency) <i>*For all ALS claims processed under Service Code A0370 that were paid at \$96.37 and were indicated as a nonemergency transport, the claim will be adjusted to A0426. If the claim was indicated as an emergency transport, it will be adjusted to A0427.</i>
A0370 (I.C.)	Advanced life support service (\$143.37 payment)	A0427	Ambulance service, advanced life support, emergency transport, level 1 (ALS 1–emergency)
A0370 (I.C.)	Advanced life support service (\$227 payment)	A0433	Advanced life support, level 2 (ALS 2)
A0390	Advanced life support mileage	A0425	Ground mileage, per statute mile
A0130	Chair car, one way (plus mileage)	A0130	Nonemergency transportation: wheelchair van (chair car)
X0174	Chair car, mileage per loaded mile, one way	X0174	Mileage for chair car, each way
X0147	Chair car, each additional person, one way (no additional mileage allowed)	X0147	Chair car, each additional person, each way (no mileage fee allowed)
X0153	Chair car, additional attendant (one way)	X0153	Second attendant, each way

The systematic adjustments for ambulance services will be created as detailed above before the end of October 2002. The adjustments will appear on a single remittance advice, along with any other claims that may be scheduled for payment in the weekly pay cycle. In addition, the systematic adjustments for chair-car services will be implemented as detailed above. The adjustments will appear on a separate remittance advice, along with any other claims that may be scheduled for payment in the pay cycle, before the end of October 2002. Providers will receive the resulting payment as they would normally receive their MassHealth payment (by check or electronic funds transfer).

Upon receiving the remittance advices containing the adjustment claims, providers will have 30 days from the date of the remittance advices to review the remittance advices for accuracy and notify the Division of any discrepancies. If providers believe that an adjustment has resulted in a claim being underpaid, they must submit a letter detailing the underpayment and providing all supporting documentation (for example, a copy of the remittance advice with claim highlighted) to the following address:

Division of Medical Assistance
Andrea Costello
Attn: Ambulance and Chair Car Retroactive Adjustments
600 Washington Street
Boston, MA 02111

If an adjustment has resulted in a claim being overpaid, providers must return the overpayment to the Division as required under the Division's regulations (130 CMR 450.235). Overpayments must be returned by preparing and submitting negative adjustment claims to Unisys.

New Service Codes and Billing Instructions

Claims for ALS services must now be billed with the applicable service code. ALS claims will no longer suspend for pricing and, consequently, can be billed electronically or on paper without attachments.

Providers should note that the definition of Service Code X0165 has changed. X0165, which was previously defined as "Each additional person, one way (no additional mileage fee allowed)," should now be used for transportation of an additional person, one way, in an emergency situation. Claims for an additional person in emergency situations must be billed with Service Code X0165, and will suspend to the Division for the appropriate pricing at one-half the applicable base rate. Transportation by ambulance of an additional person in a nonemergency situation is no longer a covered service.

The following codes will be changed or eliminated as of April 15, 2002:

- X0165 Each additional person, one way (no additional mileage fee allowed)
- X0163 Round-trip nonemergency ambulance, same day (base rate)
- X0173 Mileage for round-trip nonemergency ambulance, same day (after one mile)
- X0166 Each additional person, round-trip (no additional mileage fee allowed)
- X0150 Round-trip, chair car (base rate)
- X0175 Mileage for chair-car round-trip (after 10 miles)
- X0151 Each additional person, round-trip (no mileage fee allowed)
- X0154 Second attendant, round-trip

Round trips should now be billed as two units of the applicable service.

If you have any questions about the information in this transmittal letter, please contact MassHealth Provider Services at 617-628-4141 or 1-800-325-5231.

NEW MATERIAL

(The pages listed here contain new or revised language.)

Transportation Manual

Pages 6-1 and 6-2

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Transportation Manual

Pages 6-1 and 6-2 — transmitted by Transmittal Letter TRN-22

Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series TRANSPORTATION MANUAL	SUBCHAPTER NUMBER AND TITLE 6 SERVICE CODES AND DESCRIPTIONS	PAGE 6-1
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601 Service Codes and Descriptions: Dial-A-Ride Services

Service

Code Service Description

X0137 One-way dial-a-ride services (I.C.)
 X0138 Round-trip dial-a-ride services (I.C.)

602 Service Codes and Descriptions: Taxi Services

Service

Code Service Description

A0100 Nonemergency transportation: taxi–intracity (one passenger)
 X0141 Waiting time, after 40 miles round trip (per hour, maximum two hours)
 X0143 Two or more passengers

603 Service Codes and Descriptions: Chair-Car Services

Service

Code Service Description

One-Way Trip

A0130 Nonemergency transportation: wheelchair van (chair car)
 X0174 Mileage for chair car, each way
 X0147 Chair car, each additional person, each way (no mileage fee allowed)
 X0153 Second attendant, each way

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604 Service Codes and Descriptions: Ambulance Services

Service

Code Service Description

Ground Mileage

A0425 Ground mileage, per statute mile

Ambulance Service, Advanced Life Support

A0426 Ambulance service, advanced life support, nonemergency transport, level 1 (ALS 1)
 A0427 Ambulance service, advanced life support, emergency transport, level 1 (ALS 1–emergency)
 A0433 Advanced life support, level 2 (ALS 2)
 X0165 Additional person in emergency situation, advanced life support, level 1 (ALS 1) (I.C.)
 X0165 Additional person in emergency situation, advanced life support, level 2 (ALS 2) (I.C.)

Ambulance Service, Basic Life Support

A0428 Ambulance service, basic life support, nonemergency transport (BLS)
 A0429 Ambulance service, basic life support, emergency transport (BLS–emergency)
 X0165 Additional person in emergency situation, basic life support (BLS) (I.C.)

605 Service Codes and Descriptions: Other Licensed Carriers

Service

Code Service Description

A0110 Nonemergency transportation and bus, intra- or interstate carrier
 A0140 Nonemergency transportation and air travel (private or commercial), intra- or interstate