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## Non-Emergency Medical Transportation

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### 4.225 Non-Emergency Medical Transportation (04/01/2021, GCR 20-097)

#### 4.225.1 Definitions

The following definitions shall apply for use in Rule 4.225:

- (a) **“Broker”** means an entity that, pursuant to a contract with Vermont Medicaid, procures and manages non-emergency transportation for eligible Medicaid beneficiaries.
- (b) **“Related travel expenses”** means the cost of meals and lodging en route to and from medical care at per diem rates established by Vermont Medicaid.

#### 4.225.2 Covered Services

- (a) Transportation to and from necessary, non-emergency medical services is covered and available to eligible Medicaid beneficiaries on a statewide basis. Transportation includes expenses for non-emergency medical transportation and other related travel expenses determined to be necessary by Vermont Medicaid to secure medically necessary services.
- (b) Medicaid will cover transportation and related travel expenses for one adult attendant while the need exists if the beneficiary:
  - (1) Is a minor under 18 years of age, or
  - (2) Has documented medical need from their treating provider for an attendant to accompany them to and from medical care.
- (c) Ambulance services, including for non-emergency care, are described in Rule 4.226 Ambulance Services.

#### 4.225.3 Qualified Providers

Only transportation providers subcontracted with the Broker and enrolled in Vermont Medicaid are eligible to receive Medicaid payment to provide transportation under this rule.

#### 4.225.4 Conditions for Coverage

The following limitations on coverage shall apply:

- (a) Transportation is not otherwise available to the Medicaid beneficiary.
- (b) Transportation is to and from medically necessary services.
- (c) Transportation is to a provider located within a 30-mile radius of the beneficiary’s home. If there is no qualified provider within this 30-mile radius, Vermont Medicaid will transport to the nearest available qualified provider.
- (d) Payment is made for the least expensive mode of transportation available and appropriate to meet the medical needs of the beneficiary.

#### 4.225.5 Prior Authorization Requirements

Prior authorization is required for coverage of transportation.

4.225.6 Non-Covered Services

Transportation to any activity, program, or service that is not payable by Vermont Medicaid or is not directly provided to a Medicaid beneficiary by a Medicaid-enrolled provider is not covered.