California Code Of Regulations
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Title 22@ Social Security
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Division 3@ Health Care Services
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Subdivision 1@ California Medical Assistance Program
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Chapter 3@ Health Care Services
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Article 4@ Scope and Duration of Benefits
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Section 51323@ Medical Transportation Services

# **51323 Medical Transportation Services**

### (a)

Ambulance, litter van and wheelchair van medical transportation services are covered when the beneficiary's medical and physical condition is such that transport by ordinary means of public or private conveyance is medically contraindicated, and transportation is required for the purpose of obtaining needed medical care. (1) Ambulance services are covered when the patient's medical condition contraindicates the use of other forms of medical transportation. (2) Litter van services are covered when the patient's medical and physical condition: (A) 1. Requires that the patient be transported in a prone or supine position, because the patient is incapable of sitting for the period of time needed to transport. 2. LEA specialized medical transportation services shall not be subject to subsection (a)(2)(A)1. (B) Requires specialized safety equipment over and above that normally available in passenger cars, taxicabs or other forms of public conveyance. (C) Does not require the specialized services, equipment and personnel provided in an ambulance because the patient is in stable condition and does not need constant observation. (3) Wheelchair van services are covered when the patient's medical and physical condition: (A) Renders the patient incapable of sitting in a private vehicle, taxi or other form of public transportation for the period of time needed to transport. (B) 1. Requires that the patient be transported in a wheelchair or assisted to and from residence, vehicle and place of

treatment because of a disabling physical or mental limitation. 2. LEA specialized medical transportation services shall not be subject to subsection (a)(3)(B)1. (C) Requires specialized safety equipment over and above that normally available in passenger cars, taxicabs or other forms of public conveyance. (D) Does not require the specialized services, equipment and personnel provided in an ambulance, because the patient is in stable condition and does not need constant observation.

**(1)** 

Ambulance services are covered when the patient's medical condition contraindicates the use of other forms of medical transportation.

(2)

Litter van services are covered when the patient's medical and physical condition: (A)

1. Requires that the patient be transported in a prone or supine position, because the patient is incapable of sitting for the period of time needed to transport. 2. LEA specialized medical transportation services shall not be subject to subsection (a)(2)(A)1. (B) Requires specialized safety equipment over and above that normally available in passenger cars, taxicabs or other forms of public conveyance. (C) Does not require the specialized services, equipment and personnel provided in an ambulance because the patient is in stable condition and does not need constant observation.

(A)

- 1. Requires that the patient be transported in a prone or supine position, because the patient is incapable of sitting for the period of time needed to transport. 2. LEA specialized medical transportation services shall not be subject to subsection (a)(2)(A)1.
  - 1.

Requires that the patient be transported in a prone or supine position, because the patient is incapable of sitting for the period of time needed to transport.

2.

(B)

Requires specialized safety equipment over and above that normally available in passenger cars, taxicabs or other forms of public conveyance.

(C)

Does not require the specialized services, equipment and personnel provided in an ambulance because the patient is in stable condition and does not need constant observation.

(3)

Wheelchair van services are covered when the patient's medical and physical condition:

(A) Renders the patient incapable of sitting in a private vehicle, taxi or other form of public transportation for the period of time needed to transport. (B) 1. Requires that the patient be transported in a wheelchair or assisted to and from residence, vehicle and place of treatment because of a disabling physical or mental limitation. 2. LEA specialized medical transportation services shall not be subject to subsection (a)(3)(B)1.

(C) Requires specialized safety equipment over and above that normally available in passenger cars, taxicabs or other forms of public conveyance. (D) Does not require the specialized services, equipment and personnel provided in an ambulance, because the patient is in stable condition and does not need constant observation.

(A)

Renders the patient incapable of sitting in a private vehicle, taxi or other form of public transportation for the period of time needed to transport.

(B)

1. Requires that the patient be transported in a wheelchair or assisted to and from residence, vehicle and place of treatment because of a disabling physical or mental limitation. 2. LEA specialized medical transportation services shall not be subject to subsection (a)(3)(B)1.

1.

Requires that the patient be transported in a wheelchair or assisted to and from residence, vehicle and place of treatment because of a disabling physical or mental limitation.

2.

LEA specialized medical transportation services shall not be subject to subsection (a)(3)(B)1.

(C)

Requires specialized safety equipment over and above that normally available in passenger cars, taxicabs or other forms of public conveyance.

(D)

Does not require the specialized services, equipment and personnel provided in an ambulance, because the patient is in stable condition and does not need constant observation.

## (b)

Authorization shall be granted or Medi-Cal reimbursement shall be approved only for the lowest cost type of medical transportation that is adequate for the patient's medical needs, and is available at the time transportation is required. (1) Emergency medical transportation is covered, without prior authorization, to the nearest facility capable of meeting the medical needs of the patient. Each claim for program reimbursement of emergency medical transportation shall be accompanied by a written statement which will support a finding that an emergency existed. Notwithstanding Section 51056(b), the statement may be made by the provider of the emergency transportation, describing the circumstances necessitating the emergency service. The statement shall include the name of the person or agency requesting the service, the nature and time of the emergency, the facility to which the patient was transported, relevant clinical information about the patient's condition, why the emergency services rendered were considered to be immediately necessary and the name of the physician

accepting responsibility for the patient at the facility. (2) All nonemergency medical transportation, necessary to obtain program covered services, requires a physician's, dentist's or podiatrist's prescription and prior authorization except as provided in (C). (A) When the service needed is of such an urgent nature that written authorization could not have reasonably been submitted beforehand, the medical transportation provider may request prior authorization by telephone.

Such telephone authorization shall be valid only if confirmed by a written request for authorization. (B) Transportation shall be authorized only to the nearest facility capable of meeting the patient's medical needs. (C) Nonemergency transportation services are exempt from prior authorization when provided to a patient being transferred from an acute care hospital immediately following a stay as an inpatient at the acute level of care to a skilled nursing facility or an intermediate care facility licensed pursuant to Section 1250 of the Health and Safety Code.

**(1)** 

Emergency medical transportation is covered, without prior authorization, to the nearest facility capable of meeting the medical needs of the patient. Each claim for program reimbursement of emergency medical transportation shall be accompanied by a written statement which will support a finding that an emergency existed.

Notwithstanding Section 51056(b), the statement may be made by the provider of the emergency transportation, describing the circumstances necessitating the emergency service. The statement shall include the name of the person or agency requesting the service, the nature and time of the emergency, the facility to which the patient was transported, relevant clinical information about the patient's condition, why the emergency services rendered were considered to be immediately necessary and the name of the physician accepting responsibility for the patient at the facility.

All nonemergency medical transportation, necessary to obtain program covered services, requires a physician's, dentist's or podiatrist's prescription and prior authorization except as provided in (C). (A) When the service needed is of such an urgent nature that written authorization could not have reasonably been submitted beforehand, the medical transportation provider may request prior authorization by telephone. Such telephone authorization shall be valid only if confirmed by a written request for authorization. (B) Transportation shall be authorized only to the nearest facility capable of meeting the patient's medical needs. (C) Nonemergency transportation services are exempt from prior authorization when provided to a patient being transferred from an acute care hospital immediately following a stay as an inpatient at the acute level of care to a skilled nursing facility or an intermediate care facility licensed pursuant to Section 1250 of the Health and Safety Code.

#### (A)

When the service needed is of such an urgent nature that written authorization could not have reasonably been submitted beforehand, the medical transportation provider may request prior authorization by telephone. Such telephone authorization shall be valid only if confirmed by a written request for authorization.

#### (B)

Transportation shall be authorized only to the nearest facility capable of meeting the patient's medical needs.

#### (C)

Nonemergency transportation services are exempt from prior authorization when provided to a patient being transferred from an acute care hospital immediately following a stay as an inpatient at the acute level of care to a skilled nursing facility or an intermediate care facility licensed pursuant to Section 1250 of the Health and Safety Code.

Medical transportation by air is covered under the following conditions:(1) For emergencies, only when such transportation is medically necessary as demonstrated by compliance with paragraph (b) (1) and either of the following apply:(A) The medical condition of the patient precludes other means of medical transportation as indicated in the statement submitted in accordance with paragraph (b) (1). (B) The patient or the nearest hospital capable of meeting the medical needs of the patient is inaccessible to ground medical transportation, as indicated in the statement submitted in accordance with paragraph (b) (1). (2) For nonemergencies, only when transportation by air is necessary because of the medical condition of the patient or practical considerations render ground transportation not feasible. The necessity for transportation by air shall be substantiated by content of a written order of a physician, podiatrist or dentist.

**(1)** 

For emergencies, only when such transportation is medically necessary as demonstrated by compliance with paragraph (b) (1) and either of the following apply:(A) The medical condition of the patient precludes other means of medical transportation as indicated in the statement submitted in accordance with paragraph (b) (1). (B) The patient or the nearest hospital capable of meeting the medical needs of the patient is inaccessible to ground medical transportation, as indicated in the statement submitted in accordance with paragraph (b) (1).

(A)

The medical condition of the patient precludes other means of medical transportation as indicated in the statement submitted in accordance with paragraph (b) (1).

(B)

The patient or the nearest hospital capable of meeting the medical needs of the patient is inaccessible to ground medical transportation, as indicated in the statement submitted in

(2)

For nonemergencies, only when transportation by air is necessary because of the medical condition of the patient or practical considerations render ground transportation not feasible. The necessity for transportation by air shall be substantiated by content of a written order of a physician, podiatrist or dentist.