

Medica[®] Provide-A-RideSM & Special Transportation 30/60-Mile Rule Exception Request Policy

Purpose:

The purpose of this document is to describe the policy for making exception requests for Provide-A-Ride and special transportation to health care services beyond the described benefit; refer to Elderly Waiver transportation policy for information on waived transportation.

Introduction:

Medica has established the following policy to accommodate necessary exceptions to the 30/60-mile rule for covered appointments with network providers. Please read through this policy completely before submitting any exception requests to Medica for review.

The 30/60-mile rule:

Medica Provide-A-Ride and special transportation provides transportation in accordance with the Contract between Medica and the Department of Human Services (DHS) for eligible members without access to transportation to network primary care providers within 30 miles of, and network specialty providers within 60 miles of the member's pick-up location.

Please note: Medica has an open access network allowing members to see any provider within the Medica network; however, transportation is only available following the 30/60-mile rule.

Rides that are not within the 30/60-mile requirement, and not due to network access limitations, must have evidence of the member's physiological, physical, or mental health condition to support a transportation exception through a review process.

Members with other insurance as a primary payer:

Some members have other insurance as a primary payer. These members may see health care providers that accept their primary insurance even if they are not a part of the Medica network. However, Medica will only provide transportation to providers if they are in the Medica network following Medica transportation policy.

The following situations do not require authorization:

- Lack of provider availability in the member's geographic area based on Medica network data
- Continuity of Care requests which have a separate authorization process
- Transition Services requests which have a separate authorization process
- For up to 60 days from the day a member moves, Medica may provide transportation beyond the 30/60-mile rule while a member transitions to closer network providers

All other transportation situations will require review for an exception to the 30/60-mile rule.

Transportation Table:

The table below outlines transportation situations and whether or not members are eligible for transportation

Is the provider in the Medica network?	Is the provider within the 30/60 rule?	Is the transportation eligible for coverage?
Y	Y	Y
Y	N	Y (an auth is required)
N	Y or N	N

In the above table if the member's situation is ineligible for transportation check the Medica exception criteria listed below. If the situation meets the criteria, complete the form; if not advise the member that transportation is not covered by their health plan.

Criteria:

The following criteria need to be considered prior to submitting a request for an exception.

- The request is based on a documented medical or behavioral care need
- Care was sought with closer network providers prior to requesting transportation over the 30/60-mile rule.
- If a requested provider has a subspecialty that is relevant to the member's care

Process:

- Complete the [Medica Provide-A-Ride & Special Transportation Exception Request Form](#)
- Email it to ProviderOversight@medica.com at least 10 business days prior to the need of the first ride
 - Requests needing review in fewer than 10 business days due to medical reasons need to be marked as urgent in the subject line and they will be reviewed as soon as possible, typically within 72 hours.

Once submitted Medica will review the information and respond back to the sender with a determination.

- The sender must provide communication to the member of the outcome
- If approved the member or member representative may make transportation arrangements
- If the denied the member will receive a denial letter with their appeal rights but may start an appeal by phone with Medica prior to it arriving by mail by calling Customer Service