

February 2025 Transportation FAQ

General Information

Terms:

Q: Please define primary vs secondary transportation:

A: Primary transportation is transportation that is provided from an individual's home (including family or group homes) to a Medicaid covered service and back home (each way is considered one trip). Secondary transportation is provided to individuals who are already at a vocational program setting and are going into the community or to a supported employment site as part of their IPOS requirements. Secondary transportation includes the return trip to the vocational site prior to home transport.

Medicaid Guidelines and Services:

Q: What transportation services are the PIHPs responsible for providing?

A: According to the Michigan Medicaid Provider Manual, 3.29: TRANSPORTATION. PIHPs are responsible for transportation to and from the beneficiary's place of residence when provided so a beneficiary may participate in a state plan, Habilitation Support Waiver (HSW) or additional/1915(i) SPA service at an approved day program site or in a clubhouse psychosocial rehabilitation program. Medicaid Health Plans (MPH) are responsible for assuring their enrollees' transportation to the primary health care services provided by the MHPs, and to (non-mental health) specialists and out-of-state medical providers. The Michigan Department of Health and Human Services (MDHHS) is responsible for assuring transportation to medical appointments for Medicaid beneficiaries not enrolled in MHPs; and to Healthy Kids Dental, substance abuse, and mental health services (except those noted above and in the HSW program described in the HSW for Persons with Developmental Disabilities Section of this chapter) for all Medicaid beneficiaries. (Refer to the local MDHHS office or MHP for additional information, and to the Ambulance Chapter of the manual for information on medical emergency transportation.)

Medicaid allows transportation to be billed on a per trip basis for Skill Building, Supported Employment Services, and Job Coaching activities and by mileage for Community Living Support, defined in the Individual Plan of Service (IPOS). PIHP's payment for transportation should be authorized only after it is determined that it is not otherwise available (e.g., MDHHS, MHP, volunteer, family member), and for the least expensive available means suitable to the beneficiary's need.

Service Description	HCPCS Code
Skill-Building	H2014
Supported Employment Services	H2023
Job Coaching	H2025
Community Living Support *Mileage Reimbursement	H2015

Q: Who will be responsible for transporting individuals to their vocational program?

A: Utilizing the standard rates, vocational providers, the person served, and the CPA will work together to determine how the person will be transported to/from their vocational program. This can include utilizing a transportation company or the vocational provider transporting to/from program. Since Medicaid is the payer of last resort, natural supports and the use of community resources such as SMART must be explored.

When exploring Medicaid covered providers, note that if a third-party provider or Specialized Residential Home is unable to provide transportation, the Vocational/CLS program is the default provider, as they are the service provider.

Q: Will providers be able to bill for Medical Transportation?

A: MDHHS does not allow reimbursements for transportation to doctor’s appointments. The State has a dedicated contract with Modivcare to provide medical transportation.

Reporting and Training:

Q: How will OCHN ensure safety of new drivers for individuals served, especially if a new company is utilized?

A: New transportation providers are required to have their staff undergo background checks and submit driver’s licenses, which is reviewed by OCHN as part of providers’ yearly audit for verification purposes. New providers are also required to go through OCHN’s credentialing process and complete required trainings.

Q: What trainings are required for transportation providers?

A: OCHN is in the process of creating a comprehensive list of trainings. This list will be shared once completed.

Q: What are the OCHN reporting expectations for the transportation providers?

A: Reporting requirements are part of Attachment D in provider contracts. If you seek further clarity on reporting requirements, please email transportation@oaklandchn.org.

Changes to Transportation:

Q: What changes has OCHN made to transportation to present?

A: Currently, OCHN has not implemented any transportation changes to its service provider network. OCHN is/has:

- Transportation Workgroup convened in Fall 2023 for service provider input
- Completed a comprehensive analysis of current system; transportation rates vary significantly by provider
- Developed an initial base per trip rate for Primary transportation and revised rate with provider input
- Decided to wait on Secondary transportation changes
- Notified Easterseals MORC (ES/MORC) of transition 5/7/24
- Notified provider network 6/6/24; provided FAQ document
- Participated in MDHHS Transit Action Team
- Shared fee schedule with ES/MORC to enter authorizations
- Sent survey to provider network to determine who will continue services under the new rates
- Provided authorization guidelines to ES/MORC
- Sent applications to third-party providers to begin contracting process
- Held claims training webinar and posted a link to the webinar on OCHN's provider resource page
- Credentialed new providers and sent contracts for signature
- Hired Transportation Administrator, Anna Nasser
- Held Transportation Forum on 1/29/25
- Adjusted mileage reimbursement to the Federal Mileage rate of \$0.70 effective 1/1/25

Information for Providers:

Rates:

Q: What are the new rates for primary transportation?

A: Providers will be paid to provide transportation to and from vocational, supported employment, skill building locations and community living support activities that are defined in the IPOS. Supported employment transportation is provided on a per person, per trip basis, meaning that providers will be paid to provide transportation for individuals each way.

The new standardized base rate for ambulatory transportation is \$17.28. The revised base rate of \$17.28 is an increase of 16% over the rate that OCHN initially proposed (\$14.93) for feedback during the transportation workgroup. The base rates can be augmented by modifiers for a higher level of medical necessity, as identified in a person's IPOS. The ambulatory modifier rates are \$33.00 (enhanced/ 1:1 staff to person ratio) and \$36.00 (2:1 staff to person ratio).

The standardized base rate for non-ambulatory (wheelchair) transportation is \$20.28. The non-ambulatory (wheelchair) modifier rates are \$25.00 (2 people with wheelchairs), \$33.00 (enhanced/ 1:1 staff to person ratio), and \$36.00 (2:1 staff to person ratio).

Mileage for CLS services will be provided on a per person basis for designated activities in the IPOS. Mileage will be paid on a per person basis, including groups of individuals who are traveling to and from the same locations. An enhanced mileage rate is available for individuals who require wheelchairs. Starting January 1, 2025, the base mileage rate has been increased to the Federal Mileage Reimbursement standard of \$0.70/mile, up \$0.03 from 2024 rates. The enhanced mileage rate is double the federal rate (\$1.40/mile).

Q: Will there be changes to secondary transportation rates?

A: At this time OCHN will not be making changes to secondary transportation rates, and it will continue to be included in the rate methodology for community services.

Q: Specialized residential Providers - How will transportation for services be billed?

A: Transportation for H2016 services cannot be paid through mileage or on a per trip basis, per Medicaid requirements. H2016 related transportation services are reimbursable only through the per diem H2016 rate. However, SRS Providers can submit claims for reimbursement for H2014, H2023 transportation services on a per trip basis if authorized.

Q: What are your policies, according to Medicaid, to allow someone a higher rate so they can get transportation when companies will not transport under the lower rate offered?

A: As stewards of public Medicaid funding for approximately 29,000 beneficiaries in Oakland County, OCHN is required per the Michigan Medicaid Provider Manual to authorize transportation “only after it is determined that it is not otherwise available (e.g., MDHHS, MHP, volunteer, family member), and for the least expensive available means suitable to the beneficiary’s need.” As of October 1, 2024, OCHN now oversees the transportation contracts directly with the provider network. The rates have been standardized and equitable for all providers.

Billing/Claims:

Q: Will OCHN be meeting with individual providers to review rates and billing process for the new system?

A: OCHN held a webinar on 9/16/24 to train providers on the claims process. The webinar was recorded and posted on OCHN’s website: [Provider Resources | Oakland CHN, MI](#).

Q: What is the estimated time frame for billing and payment?

A: Payment will be issued within two weeks of claims adjudication.

Q: Can we combine billing into one month for each client?

A: Yes, claims for a client can be combined for the month and billed at once.

Q: If we submit a claim and realize we need to make a correction, how do we request to have the claim returned to us so we can edit?

A: Email the claims team at claims@oaklandchn.org. This will create a ticket in our ticketing system that will be routed to the claims team.

Q: If I have 5 residents going to an activity, can I bill each resident mileage?

A: Mileage will be paid per individual so the authorization will not have to be divided among the group. Transportation is only billable for activities in each individual's IPOS.

Q: If we transport a resident once in the morning, and again in the afternoon, can we submit one claim for the whole day, with the total miles for all trips?

A: Yes, you can combine the trips and bill on one claim.

Q: How will providers be paid for transportation services?

A: If the provider is a direct service provider, they will bill under H2014, H2023, H2025, or H2015 for the direct service. For transportation to the service, direct service providers will bill using XX400, XX401, or XX402 codes with modifiers indicating service/rate.

If the provider is a third-party transportation provider, they will bill only under XX400, XX401, or XX402 codes with modifiers indicating service/rate.

A guide to understanding OCHN transportation codes in relation to the Medicaid HCPCS codes and the XX400, XX401, and XX402 modifiers is on the following page.

Understanding OCHN Transportation Codes

Medicaid Service Codes Meaning		
HCPCS Code	Associated Service	Type of Trip
H2014	Skill Building/Vocational	Per Trip
H2023	Supported Employment	Per Trip
H2025	Job Coaching	Per Trip
H2015	Community Living Skills	Mileage

OCHN Transportation Codes and Modifiers			
Code	Description	Modifiers (Using last two digits of the HCPCS Code)	Modifier Associated with Rate
XX400	Ambulatory	-14, -23, -25	-E0, -E1, -E2
XX401	Non-Ambulatory	-14, -23, -25	-E0, -E1, -E2, -EW
XX402	Community Living Skills	-15	None or -WC

Transportation Rate Modifiers for XX400 and XX401			
Modifier	Explanation	XX400 Rate (All Rates are per person, per one-way trip)	XX401 Rate (All Rates are per person, per one-way trip)
E0	Primary/Base Rate	\$17.28	\$20.28
E1	Enhanced	\$33.00	\$33.00
E2	2:1 Staff per person	\$36.00	\$36.00
EW	2 People Wheelchair	n/a	\$25.00

Rate Modifiers for XX402			
Modifier	Explanation	XX402 Rate (Mileage per person)	
None	Primary/Base Rate	\$0.70	
WC	Enhanced	\$1.40	

Examples of Completed Codes

Codes / Modifiers	Authorization Medicaid Code	Description
XX400-14-E0	H2014	Ambulatory primary transportation
XX400-23-E0	H2023	
XX400-25-E0	H2025	
XX400-14-E1	H2014	Ambulatory Enhanced/1:1 staff to person
XX400-23-E1	H2023	
XX400-25-E1	H2025	
XX400-14-E2	H2014	Ambulatory 2:1 staff to person
XX400-23-E2	H2023	
XX400-25-E2	H2025	
XX401-14-E0	H2014	Non-ambulatory (wheelchair) primary transportation
XX401-23-E0	H2023	
XX401-25-E0	H2025	
XX401-14-EW	H2014	Non-ambulatory 2 people wheelchair
XX401-23-EW	H2023	
XX401-25-EW	H2025	
XX401-14-E1	H2014	Non-ambulatory Enhanced/1:1 staff to person
XX401-23-E1	H2023	
XX401-25-E1	H2025	
XX401-14-E2	H2014	Non-ambulatory 2:1 staff to person
XX401-23-E2	H2023	
XX401-25-E2	H2025	
XX402	H2015	Community Living Supports
XX402-WC	H2015	Enhanced Rate for Community Living Supports

Understanding OCHN Transportation Units

Units Explained by Trip Type		
Trip Type	Units Meaning	Example
Per One Way Trip	1 Unit = 1 Way Trip	Taking one individual to and from vocational One trip there = 1 unit One trip back = 1 unit Total: 2 units *If drove 3 individuals to same vocational, the total units for that day would be 6 units
Per Mileage	1 Unit = 1 Mile	Outing is 5 miles away Taking one individual there and back. Trip There = 5 miles = 5 Units Trip Back = 5 miles = 5 Units Total: 10 Units *If drove 3 individuals to same outing for that day, the total units for that day would be 30 units