

# Transportation Quick Reference Sheet for Providers

Transportation should be authorized only after it is determined that it is not otherwise available (e.g., MDHHS, MHP, volunteer, family member, local resources), and for the least expensive available means suitable to the beneficiary's need. **\*\*Transportation guidelines state that individuals cannot be in a vehicle for longer than one hour. This may be a reason for an enhanced rate.**

Please see linked document for codes and modifiers: [Transportation Codes and Units Reference Guide](#)

## **XX402 – Transportation for Community Living Supports:**

- Provider Notes section in authorization must include: clinical rationale and a breakdown of how the mileage is utilized.
- The miles requested in the authorization must match the miles identified in the Individual Plan of Service (IPOS) goals/objectives. This should include what the person is anticipated to achieve during community integration as well as where they are going and how often in order to acquire or maintain these skills.
- XX402 cannot be used for transportation to medical appointments.

## **XX402 - WC (Enhanced Transportation for Community Living Supports):**

**Definition: This can be for non-ambulatory individuals where there is a wheelchair or multiple wheelchairs that limit how many people can be in the van or significant safety issues that limit how many people can be in the van, which require an enhanced rate.**

- Provider Notes section in authorization must include: clinical rationale for the enhanced rate service and supportive documentation for the enhanced service must be attached.
- Any enhanced service must be identified within the IPOS goals/objectives.
- If enhanced transportation is being requested due to safety/behavioral issues, then supportive documentation including BTPRC approval and the supportive assessment for the enhanced staffing should be attached to the request if it's a restriction based on behavior.

## **XX400/XX401 – Transportation for Vocational Supports:**

- Provider Notes section in authorization must include: clinical rationale and supportive documentation must be attached.
- XX400 is used for **ambulatory** individuals.
- XX401 is used for **non-ambulatory** individuals.

## **E1, E2, Enhanced Transportation**

- Providers must clearly specify what service is being requested (i.e. 2:1- 1 driver/1 staff, wheelchair use, etc.) and include clinical rationale for the modifier in the Provider Notes section of the authorization.
- Supportive documentation for the enhanced service should be attached to the request.
- Any enhanced service should be identified within the IPOS SMART goals and objectives.
- If enhanced transportation is being requested due to safety/behavioral issues, then supportive documentation including BTPRC approval and the supportive assessment for the enhanced staffing should be attached to the request if it's a restriction based on behavior.

### **Modifier Clarification**

- E1 – staff need to have additional/specific training to meet the safety or behavioral needs of the person. See above for rationale required.
- E2 – 2:1 staff per person. A driver and a second staff are required in the vehicle to meet the person's needs. They would need to have **BTPRC involvement** (there are safety issues, behavioral concerns, need support).
  - BTPRC involvement may not apply if the person needs 2:1 staff per person for medical needs.

**Rates are pre-established and UM is not approving the rate.**

### **REFERENCE:**

[Transportation Fee Schedule-9.24.24.xlsx](#)