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Medi-Cal's Non-Medical Transportation Benefit Under a New State Law

What is it? “Non-medical transportation” is transportation to and from a doctor’s visit, a pharmacy, or medical supplier to pick up prescriptions or medical equipment or devices, to attend to a sick baby in the NICU, or to receive any other Medi-Cal-covered service, including mental health and dental.

Medi-Cal now covers this transportation for beneficiaries who do not have and cannot get transportation on their own. See Welf. & Inst. C. § 14132(ad). Transportation includes, at a minimum, round trip rides for a beneficiary to obtain covered Medi-Cal services by passenger car, taxicab, or any other form of public or private conveyance, and mileage reimbursement. Bus tokens or passes, taxi vouchers, train tickets and similar can also be used.

This “non-medical” transportation differs from and is in addition to “medical transportation”, like a litter van for people unable to use private or other public transportation. It is also in addition to ambulance service and other emergency transportation.

Who qualifies for Non-Medical Transportation? All Medi-Cal beneficiaries, regardless of whether the person is in a health plan or “regular” (fee-for-service) Medi-Cal, who lack other transportation to reach a Medi-Cal-covered service, and who do not require medical assistance with transport. This includes women in all categories of pregnancy-related aid codes.

Transportation is also covered for one person to go with the Medi-Cal beneficiary when necessary, such as an attendant to accompany an elderly person or a parent to take her child to the doctor. Parents can authorize teens to receive Medi-Cal transportation assistance on their own. But when parental consent is not required for the Medi-Cal service, such as for Minor Consent program services, transportation must be provided without a parent’s consent.

For Medi-Cal health plan members

For Medi-Cal beneficiaries enrolled in managed care, the state has instructed the health plans to provide non-medical transportation to plan services as of July 2017, and as of October, 2017, to include “carved out” services, such as dental and specialty mental health. See [All Plan Letter No. 17-010 \(July 17, 2017\)](#).

How do plan members get non-medical transportation?

Plan members should be able to get non-medical transportation by calling or e-mailing Member Services. Here are phone numbers for Los Angeles County health plans:

- Anthem Blue Cross: (888) 285-7801
- Care First: (800) 605-2556
- Health Net: (800) 675-6110
- Kaiser: (800) 464-4000
- LA Care: (888) 452-2273
- Molina: (800) 526-8196

For plan members residing outside of Los Angeles County, please visit

<http://www.dhcs.ca.gov/individuals/Pages/MMCDHealthPlanDir.aspx> and click on the plan member's county to find the health plan's contact number.

But, at present, some of the plans seem to require a plan provider to make the request, using a form to certify that the transportation is needed. MCHA is working to make sure that no form is required and no provider has to certify the need for non-medical transportation (see state contacts, below).

Distance? Time? How many rides? There shouldn't be any limitation on the distance or time for the travel or how many times non-medical transportation may be used so long as the person continues to be eligible for Medi-Cal and they lack other transportation to a medically necessary service covered by Medi-Cal.

MCH Access and other advocates have asked the state to make it clear to all of the plans that limitations are not permitted, as some plans have been imposed in the past, such as "no rides over 25 miles" or no more than three rides a month" and similar.

If your clients experience transportation access barriers from a Medi-Cal managed care plan, you can contact the state for assistance by e-mailing Rene.Mollow@dhcs.ca.gov, Deputy Director for Benefits and Eligibility, with a cc: to Laurie.Weaver@dhcs.ca.gov, Assistant Deputy Director. If you use a client's name or information, send the email through a secure/encrypted system.

For Medi-Cal fee-for-service (FFS) beneficiaries

The implementation of non-medical transportation services for "regular" or fee-for-service (FFS) beneficiaries presents a different picture and will generally require an advocate or provider's assistance. The groups of beneficiaries who are most likely to be in FFS Medi-Cal are pregnant women, foster children, and some seniors and people with disabilities.

The proposed state budget would create a new statewide program for FFS beneficiaries to access their non-medical transportation benefits, but it would not go into effect until July 1, 2018.

In the meantime, State DHCS says providers and others should email the state if they are unable to secure non-medical transportation for their clients from the county. The complete list of county contacts is [here](#) (click on list).

If your client is not able to access Medi-Cal's non-medical transportation services through the county, send an email (securely, if client's name is used) to Cynthia.Smiley@dhcs.ca.gov. She is the Benefits Division Chief. If you use a client's name or information, send the email through a secure/encrypted system.

For beneficiaries in Los Angeles County, or other counties that have already confirmed they do not provide non-medical transportation, it is no longer necessary to contact the county first – go directly to Cynthia Smiley.

Please let us know of any issues you are having with accessing transportation for Medi-Cal beneficiaries by contacting MCHA at (213) 749-4261 or Lynn Kersey or Lucy Quacinella at: lynnk@mchaccess.org or lucyqmas@gmail.com.