

June 23, 2017

Non-Emergency Medical Transportation (NEMT) and Non-Medical Transportation (NMT) Services

Dear Provider:

Kern Health Systems (KHS) strives to provide periodic updates to our contracted network regarding benefit and coverage changes for Kern Family Health Care members as directed by our regulatory body, Department of Health Care Services (DHCS).

Effective July 1, 2017, KHS will provide and coordinate non-emergency medical transportation (NEMT) and non-medical transportation (NMT) services for our members.

It is our goal to improve access to care and to reduce no shows and late arrivals to medical appointments. In an effort to streamline this process for our members and providers, KHS has contracted with American Logistics Company (ALC), a national passenger transportation management company, who will manage the scheduling component of NEMT and NMT services for KHS members. Transportation provided via ambulance and air will still require prior authorization through the current KHS prior authorization process.

NEMT (Non-Emergency Medical Transportation)

For members requiring NEMT via litter van or wheelchair transport, prior authorization will no longer be required. For medically necessary services, in lieu of prior authorization, KHS providers will be required to complete a Physician Certification Statement (PCS) form prior to the member receiving NEMT services. Included is the PCS form available on our website under the "For Providers" section at www.kernfamilyhealthcare.com.

NMT (Non-Medical Transportation)

NMT services, public and private transportation via bus or passenger car, will be coordinated through ALC. Members can reach our Transportation Department to schedule a ride by calling KFHC:

Phone: 1-800-391-2000

Option 3

Hours of Operation: Monday – Friday, 7:00 a.m. – 6:00 p.m.

(Transportation Department is available 24 hours a day/7 days a week for urgent and after-hours service)

If you have any questions, please feel free to contact your Provider Relations representative.

Thank you,

Melissa Lopez
Provider Relations Manager





PHYSICIAN CERTIFICATION STATEMENT (PCS) NON-EMERGENCY MEDICAL TRANSPORT

Fax completed form to: 661-473-7631

Transport/Start Date:	This PCS form is for non-emergency medical transportation services and is effective for 12 months from the start/approval date for repetitive transports or for a single prescheduled or unscheduled transportation to medical services and/or a medical facility.	Today's Date:
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Patient Information:

First Name:	Middle Initial:	Last Name:	Date of Birth:
CIN:		Member ID:	Preferred Language:
Diagnosis:		Functional Limitation (must support prescribed modality):	

Approved NEMT Transportation that do not require Referral Authorization

The following modalities are authorized with the completion of this form and DO NOT require KFHC review. Select ONE appropriate modality according to the patient's transportation need.

<p>Litter Van</p> <p>Recommended for members that:</p> <ul style="list-style-type: none"> - Require prone or supine position - Require specialized safety equipment not standard in public or private transportation <p><input type="checkbox"/></p>	<p>Wheelchair Van</p> <p>Recommended for members that:</p> <ul style="list-style-type: none"> - Require transport in a wheelchair - Are incapable of sitting in public or private transportation <p><input type="checkbox"/></p>
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Other NEMT Transportation that require Referral Authorization

Ambulance and Air Transportation modalities DO require KFHC referral submission to Utilization Management for review. Follow the KHS Prior Authorization review process.

CERTIFICATION:

I certify that the above information is true and correct based on my evaluation of this patient. I represent that I have personal knowledge of the patient's condition at the time of completion of this certificate. I understand that non-emergency medical transportation is available to obtain Medi-Cal covered services when the patient's medical/ physical condition does not allow them to travel by bus, passenger car, taxicab or other forms of public or private conveyance.

NOTE: Lack of alternative transportation services DOES NOT create a medical necessity for NEMT services.

This certificate can be completed and signed by an MD, LVN, RN, PA, NP or discharge planner who is employed or supervised by the hospital, facility, or physician's office where the patient is being treated and who has knowledge of the patient's condition at the time of completion of this certificate.

Staff/Physician Name: (PRINT)	Date:
Staff/Physician Signature:	NPI:
Phone Number:	Fax Number: