

## Early Intervention Transportation Guidance Document

**To:** Early Intervention Officials  
Interested Parties

**From:** Bureau of Early Intervention

**Issue Date:** December 29, 2020

**Subject:** Transportation under the Early Intervention Program

### Background and Purpose

Early Intervention Program (EIP) services are defined to include transportation and other related costs that are necessary to enable an eligible child and the child's family to receive early intervention services.<sup>1</sup> If the parent has demonstrated an inability to provide or access transportation, the municipality in which an eligible child resides shall arrange and provide payment for suitable transportation services necessary for the child's and parent's participation in early intervention services contained within the Individualized Family Service Plan (IFSP). The municipality shall ensure that transportation is available beginning the first day of service as agreed upon in the IFSP when transportation is necessary to enable the child and the child's family to receive early intervention services.<sup>2</sup>

Transportation has historically been reimbursed as an administrative cost through the EIP, as outlined in the Local Commissioners Memorandum from 1994. Due to a change in the Medicaid State Plan Amendment (SPA) 18-39 (approved June 13, 2019), transportation will no longer be considered an administrative cost and will be reimbursed for each one-way trip, as non-emergency medical transportation (NEMT) at the Medicaid rate.

SPA 18-39 defines transportation as available to Medicaid eligible beneficiaries who are eligible for Early and Periodic Screening Diagnostic and Treatment (EPSDT) services and for whom services are medically necessary. Transportation for family members who are not Medicaid eligible is not considered NEMT but may be part of the cost of the service. The SPA further provides that transportation is limited to those situations where the child and an accompanying parent or guardian receive transportation to obtain a

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<sup>1</sup> 10 NYCRR 69-4.1(m)(2)(xix)

<sup>2</sup> 10 NYCRR 69-4.19

Medicaid covered early intervention service other than transportation and both the Medicaid covered service and the need for transportation are included in the child's IFSP.<sup>3</sup>

This guidance document incorporates changes in the process for obtaining and claiming transportation under the Early Intervention Program.

## **I. Current Process for Obtaining Transportation**

Once a referral is made to the EIP in the county of residence, the Early Intervention Official/Designee (EIO/D) will designate an initial service coordinator (ISC). The ISC will obtain, and the parents must provide, information about the status of the family's third-party insurance coverage and Medicaid status. The ISC will also assist the family in the arrangement of a multidisciplinary evaluation (MDE) and/or screening.<sup>4</sup>

The MDE must be conducted by qualified personnel. The MDE will determine eligibility and identify the child's needs, including the need for transportation. Transportation is reimbursable under the EIP when it is necessary to enable the child and the child's family to receive early intervention services.<sup>5</sup>

Once transportation services are agreed upon by the IFSP team, the mode and frequency of transportation, as well as the details about dates, times, and location, must be documented in the IFSP. In developing the IFSP, the IFSP team should first consider whether a parent or guardian can provide transportation for the child to early intervention services.<sup>6</sup> Transportation services may be provided directly, by contract, or through reimbursement of the parent for mileage at a reimbursement rate authorized by the municipality, which should not exceed the federal reimbursement rate, for the use of his/her private vehicle, or other reasonable transportation costs (such as public transportation, tolls, and parking fees).<sup>7</sup> Federal reimbursement rates are available at: <https://www.irs.gov/newsroom/irs-issues-standard-mileage-rates-for-2020>. Such rates are updated annually on October 1.

The transportation must be authorized by the EIO/D in the EI information system (NYEIS).

If the parent/guardian is providing transportation utilizing their own vehicle, mileage must be documented, and the parent must submit for reimbursement through the

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<sup>3</sup> SPA 18-39, Attachment 3.1-A Supplement, New York 2(xii)(Q.16) and Attachment 3.1-B Supplement, New York 2(xii)(Q.16), available at [https://www.health.ny.gov/regulations/state\\_plans/status/non-inst/approved/docs/app\\_2019-06-13\\_spa\\_18-39.pdf](https://www.health.ny.gov/regulations/state_plans/status/non-inst/approved/docs/app_2019-06-13_spa_18-39.pdf).

<sup>4</sup> 10 NYCRR 69-4.7

<sup>5</sup> 10 NYCRR 69-4.8(f)(4); 69-4.19(a)

<sup>6</sup> 10 NYCRR 69-4.19(b)

<sup>7</sup> 10 NYCRR 69-4.19(a)(1)

municipality. The municipality will enter the transportation claim(s) into the current EI Information System at least monthly or at a more frequent interval, reimburse the parent/vendor outside of the EI information system at a rate authorized by the municipality and submit a voucher for reimbursement from the Department of Health (DOH) at 49 percent.

When using a vendor, the municipality shall assign one of their contracted transportation vendors to the family, based on capacity. Transportation utilized must be documented, and the vendor must submit an invoice for reimbursement through the municipality. The municipality shall then enter the vendor invoice and claims into the EI Information System, reimburse the vendor at the county-negotiated rate and submit a voucher for reimbursement from the DOH at 49 percent.

If the child was Medicaid eligible on the date of service, the municipality will submit a claim to the Local Department of Social Services (LDSS) as a Medicaid Administrative expense. If Medicaid pays the claim in full, no reimbursement from the municipality is needed. If Medicaid denies or pays partial payment, the municipality can then seek reimbursement from the DOH at 49 percent of the unreimbursed amount.

Currently, all vouchers for transportation reimbursement must be submitted to DOH within two (2) years of the date of service.

This process will remain in effect until the implementation dates specified in sections II and III of this document.

## **II. Changes in the Transportation Process beginning on January 1, 2021**

Effective January 1, 2021, counties may add in the use of a Medicaid Transportation Manager (MTM) for Medicaid eligible children. The transportation would be documented in the child's IFSP and authorized by the EIO/D in the current EI Information System, and the method would be documented as service outside of EI, through the MTM. The ongoing service coordinator (OSC) or provider will contact the MTM to coordinate transportation. The MTM is responsible for scheduling and issuing a prior approval for each trip.

When using the MTM, Medicaid requirements apply. The family must have an attestation form signed by their physician and claiming will be done outside of EI for each one-way trip, as NEMT.

## **III. Changes to Transportation Services pursuant to SPA 18-39 beginning in the Spring of 2021 (upon launch of the successor EI Information System, the EI-Hub)**

Effective upon implementation of the successor EI Information System, the EI-Hub, all claiming for transportation will be on a fee-for-service basis for each one-way trip. All claims will be subject to the 90-day claiming rule, and all vouchers submitted to DOH for reimbursement at 49 percent must be received no later than 12 months after the date of service.

### **Required Documentation to Support Billing/Claiming**

Documentation requirements for transportation services in the EIP will be consistent regardless of payer. Whether transportation is being provided by a Medicaid vendor, a parent, or by a vendor contracted by the municipality, each one-way trip must be documented in accordance with Medicaid and EIP recordkeeping requirements, as follows:

- The family must have an attestation form signed by the Physician;
- The NEMT must be documented in the child's IFSP;
- The NEMT must be authorized by the EIO/D in the EI information system;
- Bus/Transportation logs must be kept and must include at least the following:
  - The child's name;
  - Date of Service;
  - Both the origination of the trip and time of pickup;
  - Both the destination of the trip and time of drop off;
  - Bus number or the vehicle license plate number; and,
  - The full printed name of the driver providing the transportation.

Providers are urged to maintain a record with all information listed above to support claims for Medicaid and non-Medicaid transportation services.

In addition, transportation departments must be made aware of the necessary documentation and record retention requirements for the claiming of transportation for children receiving early intervention services in accordance with their IFSP.

The following items are considered unacceptable documentation of a trip: a driver or vehicle manifest or dispatch sheet; an issuance of prior authorization by the authorizing agent with subsequent checkmarks on a prior authorization roster; or an attendance log from the school or program.

### **Non-Medicaid Eligible Children**

If a child is receiving Early Intervention services but is not eligible for Medicaid, claiming will be done through the EI Information System, the EI-Hub, for each one-way trip, using the rates established in approved Medicaid SPA 18-39, which are currently the same rates utilized under the Preschool Supportive Health Services Program (PSHSP). The current rates can be found at:

[http://www.oms.nysed.gov/medicaid/resources/transportation\\_rates/sshsp\\_special\\_transportation\\_rates\\_august\\_5\\_2013.pdf](http://www.oms.nysed.gov/medicaid/resources/transportation_rates/sshsp_special_transportation_rates_august_5_2013.pdf)

If the parent/guardian is providing transportation utilizing their own vehicle, mileage must be documented, and the parent must submit the appropriate mileage reimbursement form for reimbursement through the municipality. The municipality will enter each one-way trip as a claim into the EI-Hub monthly. The municipality will then reimburse the parent/vendor, outside of the EI-Hub, at a rate not to exceed the federal reimbursement rate for in-household drivers and submit a voucher for reimbursement from the DOH at 49 percent.

When using a vendor, the municipality shall assign one of their contracted transportation vendors to the family, based on capacity. Transportation utilized must be documented, and the vendor must submit an invoice and claims for reimbursement through the municipality. The municipality shall then enter the vendor invoice into the EI-Hub, reimburse the vendor outside the system and submit a voucher for reimbursement from the DOH at 49 percent.

Counties may continue to use existing vendors and pay at the agreed upon contractual rate, however, the county will receive DOH reimbursement at the EIP established rate which is the current PSHSP rate for each one-way trip.

Please be advised: The Support for the Management of the New York State's Early Intervention System (SOM) contract requires that a cost study be completed to determine whether the current transportation rates established under the PSHSP are appropriate for transportation provided under the EIP. Updated rates may be proposed by the Commissioner of Health based on the results of this cost study.<sup>8</sup>

### **Medicaid Eligible Children**

If a child is Medicaid eligible, claiming should be done through the regional Medicaid Transportation Manager (MTM) to the maximum extent possible.

The ongoing service coordinator (OSC) or provider will contact the MTM to coordinate transportation. The MTM is responsible for scheduling and issuing a prior approval for each trip.

Medicaid requires use of the most medically appropriate and cost effective alternative when considering transportation options. This would include reimbursement for use of public transportation or reimbursement of parents, where appropriate, and included in the Individualized Family Service Plan (IFSP). Some children may require a higher level of transportation due to complex medical needs. This type of transportation requires medical justification and a "2015 form" must be completed.

<https://www.templateroller.com/template/1729190/form-2015-verification-medicaid-transportation-abilities-new-york.html>

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<sup>8</sup> See 10 NYCRR 69-4.30(a)

If a Medicaid transportation provider is being used, the provider will be reimbursed at the Medicaid rate and reimbursement will be captured in eMedNY.

If the parent is providing transportation utilizing their own vehicle, mileage must be documented, and the parent must submit the appropriate mileage request form to the MTM for reimbursement from Medicaid at the federal reimbursement rate. The standard mileage rates are available at:

<https://www.irs.gov/newsroom/irs-issues-standard-mileage-rates-for-2020>

When a cab is used to transport a child to an EI service that is included in the child's IFSP, the child's parent/guardian must accompany the child.

Transportation can only be billed when it occurs on the same day that an authorized Medicaid reimbursable early intervention service included in the child's IFSP was delivered and may only be billed at the EIP established rate (currently the PSHSP rate) for each one-way trip. In the case of early intervention services, all authorized services are Medicaid reimbursable.

Under circumstances where the MTM cannot be utilized for a Medicaid eligible child, the municipalities may coordinate transportation using one of their contracted vendors (e.g., bus companies) to provide transportation. The municipality, as the biller of record for early intervention transportation services, would then submit their invoices through the EI information system, the EI-Hub, to be submitted to Medicaid for reimbursement at the Medicaid reimbursement rate for early intervention transportation.

Transportation forms referred to in this document can be found at:

<https://www.medanswering.com/medical-practitioners/medical-practitioners-forms-resources/>

Questions regarding this guidance may be addressed to [eip.fiscal@health.ny.gov](mailto:eip.fiscal@health.ny.gov) or (518) 473-7016.