

PROVIDER BULLETIN

PROVIDER INFORMATION



January 2, 2019

LogistiCare Transportation Claims Processing Delayed to January 1, 2019

As previously communicated in Provider Bulletin P77-18, claims for dates of service that occur on or after January 1, 2019 will be processed by LogistiCare for eligible members with Minnesota Health Care Programs (MHCP), including Blue Advantage Families and Children (formerly Prepaid Medical assistance Program), MinnesotaCare (MNCare), SecureBlue (MSHO) and Minnesota Senior Care Plus (MSC+). **Claims for dates of service beginning January 1, 2019 must be submitted with the new payer ID Code A5143. Claims submitted under the wrong Payer ID Code will reject and the claims will need to be resubmitted under the correct payer ID code.**

Billing of Mileage and Base Rate

Effective January 1, 2019, reimbursement for mileage will be calculated based on the mileage sent to the transportation provider via the trip confirmation. Any mileage discrepancies should be reconciled with LogistiCare before submitting the claim.

Base and mileage rates for round-trip and multi-leg rides must be billed on separate lines for each leg of the ride (A/B/C).

Example:

Correct billing for round-trip ride from home to provider's office, 10 miles each leg.

Base (Per Leg)

A0100 - RP - 1 UOS - \$11.00

A0100 - PR - 1 UOS - \$11.00

Mileage (Per Leg)

A0080 - 10 UOS - \$13.00

A0080 - 10 UOS - \$13.00

Incorrect billing for round-trip ride, 10 miles each leg.

Base Rate

A0100 - PR 1 UOS - \$11.00

A0100 - RP 1 UOS - \$11.00

Mileage Rate

A0080 - 20 UOS - \$26.00

Deadhead, Wait Time, Extra Attendant and Parking Fee Payments

Deadhead, wait time, extra attendant and parking fees must be billed on a separate line when approved by LogistiCare. Reimbursement for approved services listed above will be bundled in to the claim line for the initial base leg of the trip when reimbursed on the remittance advice.

Continued

Example of deadhead billing and payment:

Provider Billing Including Deadhead

Base (Per Leg)

A0100 - RP – 1 unit of service - \$11.00

A0100 - PR – 1 unit of service - \$11.00

Mileage (Per Leg)

A0080 – 10 unit of service - \$13.00

A0080 – 10 unit of service - \$13.00

Deadhead

A0080 Modifier TP – 10 UOS - \$5.40

LogistiCare Processing and Reimbursement on 835 Remit

Base (Per Leg)

A0100 - RP – 1 UOS - \$16.40 (\$11.00 base reimbursement + \$5.40 deadhead reimbursement)

A0100 - PR – 1 UOS - \$11.00

Mileage (Per Leg)

A0080 – 10 UOS - \$13.00

A0080 – 10 UOS - \$13.00

Deadhead

A0080 - TP – 10 UOS - \$0.00 (reimbursement was bundled with A leg base rate. See above.)

Contact Information

Providers may use the following numbers and emails to contact LogistiCare:

- **Dedicated phone and fax numbers for transportation providers**
 - 855-933-6989 MN Transportation Provider phone number
 - 855-933-6990 MN Transportation Provider Fax

Additional Information

The online Blue Plus Manual will be updated to include the information in this Bulletin. To view the manual, go to providers.bluecrossmn.com and select “forms and publications” then manuals.