



Non-Emergency Medical Transportation (NEMT) Bus Passes / Public Transportation Coverage

October 2021

Public Transportation Coverage

Effective 10/1/2021, providers with a Category of Service (COS) 31 may offer Public Transportation options to FFS members (such as a bus pass) when they travel to and from an AHCCCS approved service, in accordance with AMPM 310-BB.

The following shall be considered when offering public transportation to a member:

1. Location of the member to a transportation stop.
2. Location of the provider of services to a transportation stop.
3. The public transportation schedule in coordination with the member's appointment.
4. The ability of the member to travel alone on public transportation.
5. Member preference

Provider types that are eligible to claim reimbursement for public transportation passes include 02, 05, 13, 14, 25, 27, 29, 41, 77, 81, 85, 86, 87, A3, A4, A6, B7, BC, C2, and C5.

Public Transportation Requirements

- Transportation passes may be up to 1 month in duration
- Replacement or duplicate transportation passes are not eligible for Medicaid reimbursement
- There shall be a continuous need for transportation to Medicaid reimbursable services consistent with the length of the purchased transportation pass
- Providers shall determine the appropriate type/duration of public transportation pass to issue to members in accordance with the member's treatment plan and existing future appointment dates.

Claim Submission

- Bill using code A0110 for the net cost of the [transportation pass](#), not to exceed the cost of a 30-day pass.
- Submitted Claims must include the following documentation.
 - Copy of public transportation pass,
 - Itemized receipt specifying cost of public transportation pass,
 - Pricing that corresponds with the price of the pass in the geographic areas of issuance, and
 - Completed [Public Transportation Pass form](#) to include the following:
 - o Provider's name and ID#,
 - o Public Transportation pass type (daily, weekly, or monthly),
 - o Price of the Public Transportation pass,
 - o Date of issuance,
 - o Name, title, signature, and signature date of person issuing Public Transportation pass to the member,
 - o Member name, AHCCCS ID#, signature and signature date.
- Public Transportation Pass Form:
 - https://www.azahcccs.gov/PlansProviders/Downloads/FFSProviderManual/FFSChap_14TransportationExhibit4.pdf

Thank You.