



## Certification Page Regular and Emergency Rules

Revised September 2016

**Emergency Rules** (After completing all of Sections 1 through 3, proceed to Section 5 below)

**Regular Rules**

### 1. General Information

a. Agency/Board Name <b>Wyoming Department of Health</b>			
b. Agency/Board Address <b>6101 Yellowstone Road, Suite 210</b>		c. City <b>Cheyenne</b>	d. Zip Code <b>82002</b>
e. Name of Agency Liaison <b>Amy Buxton</b>		f. Agency Liaison Telephone Number <b>307-777-5081</b>	
g. Agency Liaison Email Address <b>amy.buxton@wyo.gov</b>			h. Adoption Date <b>May 11, 2017</b>
i. Program <b>Medicaid</b>			

**2. Legislative Enactment** For purposes of this Section 2, "new" only applies to regular rules promulgated in response to a Wyoming legislative enactment not previously addressed in whole or in part by prior rulemaking and does not include rules adopted in response to a federal mandate.

a. Are these rules new as per the above description and the definition of "new" in Chapter 1 of the Rules on Rules?

**No.**    **Yes.** Please provide the Enrolled Act Numbers and Years Enacted:

### 3. Rule Type and Information

a. Provide the Chapter Number, Title, and Proposed Action for Each Chapter.  
(Please use the Additional Rule Information form for more than 10 chapters and attach it to this certification)

Chapter Number: <b>36</b>	Chapter Name: <b>Administrative Transportation</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
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Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed

**3. State Government Notice of Intended Rulemaking**

a. Date on which the Proposed Rule Packet (consisting of the Notice of Intent as per W.S. 16-3-103(a), Statement of Principal Reasons, strike and underscore format and a clean copy of each chapter of rules were: **February 21, 2017**

- approved as to form by the **Registrar of Rules**; and
- provided to the **Legislative Service Office** and **Attorney General**:

**4. Public Notice of Intended Rulemaking**

a. Notice was mailed 45 days in advance to all persons who made a timely request for advance notice.  No.  Yes.  N/A

b. A public hearing was held on the proposed rules.  No.  Yes. Please complete the boxes below.

Date:	Time:	City:	Location:

c. If applicable, describe the **emergency** which requires promulgation of these rules without providing notice or an opportunity for a public hearing:

**5. Final Filing of Rules**

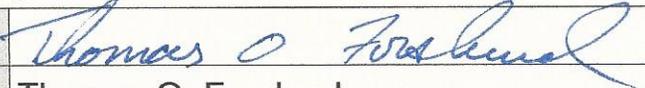
a. Date on which the Certification Page with original signatures and final rules were sent to the **Attorney General's Office for the Governor's signature**: **May 11, 2017**

b. Date on which final rules were approved as to form by the **Secretary of State** and sent to the **Legislative Service Office**: **May 11, 2017**

c.  The Statement of Reasons is attached to this certification.

**6. Agency/Board Certification**

The undersigned certifies that the foregoing information is correct.

Signature of Authorized Individual	
Printed Name of Signatory	Thomas O. Forslund
Signatory Title	Director
Date of Signature	May 11, 2017

**7. Governor's Certification**

I have reviewed these rules and determined that they:

1. Are within the scope of the statutory authority delegated to the adopting agency;
2. Appear to be within the scope of the legislative purpose of the statutory authority; and, if emergency rules,
3. Are necessary and that I concur in the finding that they are an emergency.

Therefore, I approve the same.

Governor's Signature	
Date of Signature	

## CHAPTER 36

### Administrative Transportation

#### Intent to Adopt Rules

#### Statement of Reasons

The Wyoming Department of Health proposes to adopt the following Amended Rule to comply with the provisions of Wyo. Stat. Ann. § 42-4-101 through -306 and the Wyoming Administrative Procedure Act at Wyo. Stat. Ann. § 16-3-101 through -115.

Chapter 36 has been adopted to describe the policies related to Administrative Transportation under Wyoming Medicaid.

Medicaid has simplified and streamlined this Chapter, reducing both the number and length of rules, to comply with Governor Mead's directive. For example, many definitions have been moved to Chapter 1 of Medicaid's rules and stricken from this Chapter. In addition, the rules have been updated to match the updated State Plan Amendment approved by CMS to allow for direct billing of claims to the MMIS by transportation and lodging providers.

Wyoming Department of Health  
Division of Healthcare Financing

Response to Public Comment

Chapter 36, Administrative Transportation

No public comments were received during the public commenting period.

## **Chapter 36**

### **Administrative Transportation**

#### **Section 1. Authority.**

This Chapter is promulgated by the Department of Health pursuant to the Medical Assistance and Services Act at Wyoming Statutes § 42-4-101 through -306.

#### **Section 2. Purpose and Applicability.**

This Chapter establishes the scope of administrative transportation covered by Medicaid and the methods and standards of reimbursing for such services. Any person, facility, or agency that furnishes transportation and seeks Medicaid reimbursement for doing so shall be subject to these rules. This Chapter shall apply to all administrative transportation provided on or after its effective date.

#### **Section 3. General Provisions.**

(a) The Department may issue manuals or bulletins to providers or other affected parties to interpret the provisions of this Chapter. Such manuals and bulletins shall be consistent with and reflect the policies contained in this Chapter. The provisions contained in manuals or bulletins shall be subordinate to the provisions of the Wyoming Medicaid Rules.

#### **Section 4. Definitions.**

Except as otherwise specified in Chapter 1 or this Chapter, the terminology used is the standard terminology and has the standard meaning used in healthcare, Medicaid, and Medicare.

(a) “Ambulance.” An ambulance as defined by Chapter 15.

(b) “Department of Transportation (DOT).” The Wyoming Department of Transportation, its agent, designee or successor.

(c) “Excess payments.” Medicaid funds received by a provider, to which the provider is not entitled for any reason, including payments which exceed the Medicaid allowable payment. “Excess payments” includes, but is not limited to:

- (i) Overpayments;
- (ii) Payments made as a result of system errors;
- (iii) Payments for services furnished to an individual that is not a client;

- (iv) Payments for non-covered services furnished to a client;
  - (v) Payments for services which are not documented or supported by medical records or financial records;
  - (vi) Payments for services for which admission certification has been denied or withdrawn;
  - (vii) Payments which exceed a provider's usual and customary charge, unless otherwise permitted by the Department's rules.
- (d) "Local trade area." The geographic area surrounding the client's residence, excluding portions of states other than Wyoming, that is commonly used by other persons in the same area to obtain similar services.
- (e) "Medical appointment." A scheduled appointment with a provider.
- (f) "Reimbursement request and certification." Documentation, in the form specified by the Department, that contains:
- (i) An itemized statement of the administrative transportation for which a client is requesting reimbursement; and
  - (ii) The original signature of the client or other payee that receives the reimbursement.
- (g) "Subsidized public transportation." Public transportation carriers that receive a subsidy from the Department of Transportation.
- (h) "Wyoming Rural Transit Program." The transportation program operated by the Wyoming Department of Transportation.

**Section 5. Provider participation.**

An individual or entity that wishes to receive Medicaid reimbursement for furnishing covered services to clients shall meet the provider participation requirements of Chapter 3.

**Section 6. Reimbursable transportation expenses.**

(a) Ambulance transportation. Transportation in an ambulance is a covered service as specified in Chapter 15.

(b) Administrative transportation to and from a medical appointment is reimbursable if:

(i) The covered services furnished to the client at the medical appointment are medically necessary;

(ii) Transportation has been approved by the Department at least three working days in advance of the necessary transportation; and

(iii) The transportation is the least costly mode of transportation selected and approved by the Department pursuant to subsection (c).

(c) Selection and approval of administrative transportation.

(i) The Department shall be responsible for selecting and approving the mode of administrative transportation.

(ii) In selecting and approving transportation, the Department:

(A) May consider the following modes of transportation:

(I) Public transportation, including subsidized public transportation and the Wyoming Rural Transit Program;

(II) Private automobile;

(III) Taxi;

(IV) Bus;

(V) Shuttle services; and

(VI) Airline; and

(B) Shall select the least expensive and most appropriate mode of transportation reasonably available.

(iii) Per diem expenses. Per diem expenses are reimbursable to a client or a client's legal guardian if:

(A) The client receiving services is a client under age twenty-one; and

(B) The services to be received are covered services.

(d) Transportation to medical appointments outside Wyoming and within the Wyoming Medicaid Service Area (WMSA) is reimbursable if:

(i) The covered service is not available in the local trade area; and

(ii) The specified city within the WMSA is closer (in highway miles) than the nearest location within Wyoming where the service is available.

(e) Transportation to medical appointments outside the WMSA is not reimbursable unless:

(i) A person licensed to practice medicine, dentistry, psychiatry, osteopathy, or optometry has referred the client to a specified provider for covered services that are not available in the service area; and

(ii) The referral is in writing and the medical necessity of the referral is documented in the client's medical records.

**Section 7. Excluded transportation expenses.** The following transportation expenses are not reimbursable:

(a) Transportation to receive services which are not covered services;

(b) Transportation of a family member or friend to visit a client or consult with the client's physician or other provider of medical services, unless the transportation is to visit a client under age twenty-one and the visit is medically necessary;

(c) Transportation to pick up pharmaceuticals;

(d) Transportation of a resident of a nursing facility to receive services that are available at the nursing facility;

(e) Transportation of a client in response to detention ordered by a court or law enforcement agency;

(f) Transportation to receive covered services from a provider because another provider has denied services to the client due to the client's refusal to follow medical advice or the client's unacceptable conduct;

(g) Missed appointments. If a client misses or cancels a medical appointment for which Medicaid reimbursement has been paid pursuant to this rule, the client shall refund the cost of the appointment to the Department within fifteen days of the missed appointment (unless the medical appointment has been rescheduled). Medicaid funds that are not refunded shall be considered excess payments and may be recovered pursuant to Section 12.

**Section 8. Procedures for obtaining reimbursement.**

(a) Request for reimbursement. A client wishing to receive reimbursement for administrative travel shall contact the Department and request reimbursement. The request may be oral or written. The client shall furnish information as requested by the Department and complete the Department's required documentation.

(b) Payment. Payment shall be by warrant issued to the client or other payee.

(c) Reimbursement request and certification. After the client or other payee submits a request for administrative transportation, the client or payee shall sign the reimbursement request and certification and return it to the Department. Reimbursement requests and certifications shall become part of the client's file and be retained by the Department.

(d) Reimbursement to enrolled providers. Providers of lodging, taxi or non-taxi transportation services may enroll with the Wyoming Medicaid Program to be reimbursed for covered transportation services directly by Wyoming Medicaid.

(e) Provider Payment. Providers shall submit all claims to Wyoming Medicaid and reimbursement will be according to Wyoming Medicaid reimbursement rates for the covered procedure codes billed on the submitted claim as published in the Wyoming Medicaid Fee Schedule.

**Section 9. Prior authorization.**

(a) Prior authorization of administrative transportation shall be governed by the prior authorization requirements of Chapter 3.

(b) All administrative transportation requires prior authorization.

(i) In deciding whether to authorize administrative transportation, the Department shall consider the:

- (A) Cost of the transportation;
- (B) Potential for over-utilization of the transportation;
- (C) Availability of lower cost alternatives; and
- (D) Excess payments owed by the client.

(ii) The failure to obtain prior authorization shall result in denial of Medicaid reimbursement.

**Section 10. Allowable Medicaid reimbursement.**

(a) Medicaid reimbursement for administrative transportation shall be as follows:

(i) Reimbursement to a client shall be by one of the following methods:

(A) Prospective reimbursement. The client may be reimbursed for projected administrative transportation expenses.

(B) Retroactive reimbursement. The client may be reimbursed for actual administrative transportation expenses.

(ii) Reimbursement to a provider shall be the lesser of the provider's billed charge and Wyoming Medicaid's allowed amount per the published Wyoming Medicaid Fee Schedule.

(b) Private automobile. Medicaid reimbursement for administrative transportation furnished in a private automobile shall:

(i) Be based on mileage as determined by the Wyoming State Auditor, or if not so determined, on map mileage using major highways as determined by the Department;

(ii) Be limited to the maximum amount recommended by the State Auditor in order to avoid any requirement for reporting mileage income to the Internal Revenue Service; and

(iii) Not be paid for fractions of a mile.

(c) Per diem expenses. Medicaid reimbursement for per diem expenses is limited to \$25.00 per person, per day, to be used for meals and commercial lodging. Lesser amounts will be reimbursed for additional clients transported together.

(d) Retroactive reimbursement. Reimbursement for administrative transportation that is already completed is reimbursable to clients or providers if:

(i) Requested within thirty days after the date the travel was completed; and

(ii) The request contains the information and documentation required by the Department, including a valid receipt for travel expenses.

**Section 11. Payment of claims.** Payment of claims shall be pursuant to the payment of claims provisions of Chapter 3.

**Section 12. Recovery of excess payments or overpayments.**

(a) The Department may recover excess payments and overpayments pursuant to Chapter 16.

**Section 13. Reconsideration.**

(a) A provider or client may request that the Department reconsider a decision to recover excess payments or overpayments. The request for reconsideration, the reconsideration, and any administrative hearing shall be pursuant to the reconsideration provisions of Chapter 3.

(b) Reconsideration shall be limited to whether the Department has complied with the provisions of this Chapter.

**Section 14. Disposition of recovered funds.** The Department shall dispose of recovered funds pursuant to the provisions of Chapter 16.

**Section 15. Administrative hearing.**

(a) Clients. A client may request an administrative hearing pursuant to Chapter 4 regarding the termination, reduction or denial of covered services.

(b) Procedures. A request for an administrative hearing shall be made in conformance with Chapter 4, and the hearing shall be held pursuant to Chapter 4.

**Section 16. Superseding effect.** This Chapter supersedes all prior rules or policy statements issued by the Department, including manuals and bulletins, which are inconsistent with this Chapter.

**Section 17. Severability.** If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**Section 18. Incorporation by Reference.**

(a) For any code, standard, rule, or regulation incorporated by reference in these rules:

(i) The Department of Health has determined that incorporation of the full text in these rules would be cumbersome or inefficient given the length or nature of these rules;

(ii) The incorporation by reference does not include any later amendments or editions of the incorporated matter beyond the applicable date identified in subsection (b) of the section; and

(iii) The incorporated code, standard, rule, or regulation is maintained at the Department of Health and is available for public inspection and copying at cost at the same location.

(b) Each rule incorporated by reference is further identified as follows:

(i) Referenced in Section 4 is Chapter 1 – Rules and Regulations for Medicaid – Definitions, adopted by the Department of Health and effective on November 7, 2011, found at <http://soswy.state.wy.us/Rules/RULES/8384.pdf>.

(ii) Referenced in Sections 5, 9, 11, and 13 is Chapter 3 – Provider Participation, adopted by the Department of Health and effective on December 16, 1998, found at <http://soswy.state.wy.us/Rules/RULES/3349.pdf>.

(iii) Referenced in Section 15 is Chapter 4 – Medicaid Administrative Hearings, adopted by the Department of Health and effective on November 7, 2011, found at <http://soswy.state.wy.us/Rules/RULES/8385.pdf>.

(iv) Referenced in Sections 4 and 6 is Chapter 15 – Ambulance Services, adopted by the Department of Health and effective on September 8, 1995, found at <http://soswy.state.wy.us/Rules/RULES/1529.pdf>.

(v) Referenced in Sections 12 and 14 is Chapter 16 – Program Integrity, adopted by the Department of Health and effective on November 7, 2011, found at <http://soswy.state.wy.us/Rules/RULES/8386.pdf>.

~~WYOMING~~

~~MEDICAID RULES~~

~~CHAPTER 36~~

~~ADMINISTRATIVE TRANSPORTATION~~

**Section 1. Authority**

This Chapter is promulgated by the Department of Health pursuant to the Medical Assistance and Services Act at W.S. § 42-4-101 through -306. ~~et seq. and the Wyoming Administrative Procedures Act at W.S. 16-3-101 et seq.~~

**Section 2. Purpose and Applicability**

This Chapter establishes the scope of administrative transportation covered by Medicaid and the methods and standards of reimbursing for such services. Any person, facility, or agency that furnishes transportation and seeks Medicaid reimbursement for doing so shall be subject to these rules. ~~These rules~~ This Chapter shall apply to all administrative transportation provided on or after its effective date.

**Section 3. General Provisions**

~~(a) This rule shall apply to and govern the provision of administrative transportation and reimbursement for those services.~~

~~(b)~~ (a) The Department may issue manuals or bulletins to providers and/or other affected parties to interpret the provisions of this ~~rule~~Chapter. Such manuals and bulletins shall be consistent with and reflect the policies contained in this ~~Chapter rule~~Chapter. The provisions contained in manuals or bulletins shall be subordinate to the provisions of the ~~rules and regulations~~Wyoming Medicaid Rules.

~~(c) The incorporation by reference of any external standard is intended to be the incorporation of that standard as it is in effect on the effective date of these rules and regulations.~~

**Section 4. Definitions**

~~The following definitions shall apply in the interpretation and enforcement of these rules. Where the context in which words are used in these rules indicates that such is the~~

~~intent, words in the singular number shall include the plural and vice versa. Throughout these rules gender pronouns are used interchangeably. The drafters have attempted to utilize each gender pronoun in equal numbers, in random distribution. Words in each gender include individuals of the other gender.~~

For the purpose of these rules, the following shall apply:

Except as otherwise specified in Chapter 1 or this Chapter, the terminology used is the standard terminology and has the standard meaning used in healthcare, Medicaid, and Medicare.

~~(a) "Administrative transportation." Transportation, other than transportation in an ambulance, to and/or from a provider of covered services.~~

~~(a) (b) "Ambulance." An ambulance as defined by Chapter 15, which definition is incorporated by this reference.~~

~~(c) "Appropriate provider." A provider that offers services sufficient to meet the medical needs of a patient.~~

~~(d) "Chapter 1." Chapter 1, Rules for Medicaid Administrative Hearings, of the Wyoming Medicaid Rules.~~

~~(e) "Chapter 3." Chapter 3, Provider Participation, of the Wyoming Medicaid Rules.~~

~~(f) "Chapter 6." Chapter 6, HEALTH CHECK (EPSDT) SERVICES, of the Wyoming Medicaid Rules.~~

~~(g) "Chapter 15." Chapter 15, Ambulance Services, of the Wyoming Medicaid Rules.~~

~~(h) "Chapter 16." Chapter 16, Medicaid Program Integrity, of the Wyoming Medicaid Rules.~~

~~(i) "Chapter 26." Chapter 26, Covered Services, of the Wyoming Medicaid Rules.~~

~~(j) "Chapter 39." Chapter 39, Recovery of Excess Payments, of the Wyoming Medicaid Rules.~~

~~(k) "Claim." A request by a recipient for reimbursement for administrative transportation.~~

~~(l) "Covered services." Services which are Medicaid reimbursable pursuant to the rules of the Department.~~

~~(m) "Department." The Wyoming Department of Health, its agent, designee or successor.~~

~~(b)~~ ~~(n)~~ "Department of Transportation (DOT)." The Wyoming Department of Transportation, its agent, designee or successor.

~~(e)~~ ~~"Emergency." The sudden onset of a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that the absence of immediate medical attention could reasonably be expected to result in:~~

- ~~(i)~~ ~~Placing the patient's health in serious jeopardy;~~
- ~~(ii)~~ ~~Serious impairment to bodily functions; or~~
- ~~(iii)~~ ~~Serious dysfunction of any bodily organ or part.~~

~~(p)~~ ~~(c) "Excess payments." Medicaid funds received by a provider, to which the provider is not entitled for any reason, including payments which exceed the Medicaid allowable payment. "Excess payments" includes, but is not limited to:~~

- ~~(i)~~ ~~Overpayments;~~
- ~~(ii)~~ ~~Payments made as a result of system errors;~~
- ~~(iii)~~ ~~Payments for services furnished to an individual that is not a client non-recipient;~~
- ~~(iv)~~ ~~Payments for non-covered services furnished to a client recipient;~~
- ~~(v)~~ ~~Payments for services which are not documented and/or supported by medical records and/or financial records;~~
- ~~(vi)~~ ~~Payments for services for which admission certification has been denied or withdrawn;~~
- ~~(vii)~~ ~~Payments which exceed a provider's usual and customary charge, unless otherwise permitted by the Department's rules.~~

~~(q)~~ ~~"Expanded services." "Expanded services" as defined by Chapter 6, which definition is incorporated by this reference.~~

~~(r)~~ ~~"In town." Within the city limits of an incorporated city or town.~~

~~(d)~~ ~~(s) "Local trade area." The geographic area surrounding the client's recipient's residence, excluding portions of states other than Wyoming, that is commonly used by other persons in the same area to obtain similar services.~~

~~(t)~~ ~~"Medicaid." Medical assistance and services provided pursuant to Title XIX of the Social Security Act and the Wyoming Medical Assistance and Services Act. "Medicaid"~~

~~includes any successor or replacement program enacted by Congress and/or the Wyoming Legislature.~~

~~(u) "Medicaid reimbursement." The maximum Medicaid reimbursement for administrative transportation as specified by this Chapter.~~

~~(e) (v) "Medical appointment." A scheduled appointment with a provider.~~

~~(w) "Medical necessity" or "medically necessary." A service that is required to diagnose, treat, cure or prevent an illness, injury or disease which has been diagnosed or is reasonably suspected, to relieve pain, or to improve and preserve health and be essential to life. The service must be:~~

~~(i) Consistent with the recipient's diagnosis and treatment of the recipient's condition;~~

~~(ii) In accordance with the standards of good medical practice among the provider's peer group;~~

~~(iii) Required to meet the medical needs of the recipient and undertaken for reasons other than the convenience of the recipient and the provider; and~~

~~(iv) Provided in the most appropriate and cost-effective setting required by the recipient's condition.~~

~~(x) "Nursing facility." "Nursing facility" as defined by 42 U.S.C. § 1396r(a), which is incorporated by this reference.~~

~~(y) "Overpayment." Overpayment as defined in Chapter 39, which definition is incorporated by this reference.~~

~~(z) "Physician." A person licensed to practice medicine or osteopathy by the Wyoming State Board of Medical Examiners or a similar agency in another state.~~

~~(aa) "Prior authorized." Approval by the Department pursuant to the prior authorization provisions of Chapter 3, which are incorporated by this reference.~~

~~(bb) "Provider." A provider as defined by Chapter 3, which definition is incorporated by this reference.~~

~~(cc) "Recipient." An individual that has been determined eligible for Medicaid.~~

~~(dd) "Recipient under age twenty one." An individual under age twenty one that has been determined eligible for Medicaid. A recipient is under age twenty one before or~~

~~during the month in which he or she turns twenty-one years of age.~~

(f) ~~(e-e)~~ "Reimbursement request and certification." Documentation, in the form specified by the Department, that contains:

- (i) An itemized statement of the ~~particulars of the~~ administrative transportation for which a ~~recipient~~ client is requesting reimbursement; and
- (ii) The original signature of the ~~recipient~~ client or other payee that receives the reimbursement

~~(ff) "Service area." The State of Wyoming and the following cities or towns: Craig, Colorado; Idaho Falls, Montpelier and Pocatello, Idaho; Billings and Bozeman, Montana; Kimball and Scottsbluff, Nebraska; Belle Fourche, Custer, Deadwood, Rapid City and Spearfish, South Dakota; and Ogden and Salt Lake City, Utah.~~

~~(gg) "Services." Health services.~~

(g) ~~(h-h)~~ "Subsidized public transportation." Public transportation carriers that receive a subsidy from the Department of Transportation.

~~(ii) "Urgent case." A situation, other than an emergency, where a recipient requires the immediate care of a provider.~~

~~(jj) "Usual and customary charges." The charges for comparable transportation or other services provided to non-recipients.~~

~~(kk) "Working day." 8:00 a.m. to 5:00 p.m., Mountain Time, Monday through Friday, excluding State holidays.~~

(h) ~~(jj)~~ "Wyoming Rural Transit Program." The transportation program operated by the Wyoming Department of Transportation.

## **Section 5. Provider participation.**

~~Compliance with Chapter 3.~~ An individual or entity that wishes to receive Medicaid reimbursement for furnishing covered services to ~~recipients~~ clients ~~must~~ shall meet the provider participation requirements of Chapter 3., ~~which requirements are incorporated by this reference.~~

## **Section 6. Reimbursable transportation expenses.**

(a) Ambulance transportation. Transportation in an ambulance is a covered service as specified in Chapter 15.

(b) ~~General rule.~~ Administrative transportation to and/or from a medical appointment is reimbursable if:

(i) The covered services furnished to the ~~recipient~~ client at the medical appointment are medically necessary;

(ii) Transportation has been approved by the Department at least three working days in advance of the necessary transportation; and

(iii) The transportation is ~~via~~ the least costly mode of transportation selected and approved by the Department pursuant to subsection (c).

(c) Selection and approval of administrative transportation.

(i) The Department shall be responsible for selecting and approving the mode of administrative transportation.

(ii) In selecting and approving transportation, the Department:

(A) May consider the following modes of transportation:

(I) Public transportation, including subsidized public transportation and the Wyoming Rural Transit Program;

(II) Private automobile;

(III) Taxi;

(IV) Bus;

(V) Shuttle services; and

(VI) Airline; and

(B) Shall select the least expensive and most appropriate mode of transportation ~~that is~~ reasonably available.

(iii) Per diem expenses. Per diem expenses are reimbursable to a ~~recipient~~ client or a ~~recipient's~~ client's legal guardian if:

(A) The ~~individual who is to receive services~~ client receiving services is a ~~recipient~~ client under age twenty-one; and

(B) The services to be received are ~~expanded~~ covered services.

(d) Transportation to medical appointments outside Wyoming and within the Wyoming Medicaid sService aArea (WMSA) is reimbursable if:

- (i) The covered service is not available in the local trade area; and
  - (ii) The specified city within the ~~service area~~ WMSA is closer (in highway miles) than the nearest location within Wyoming where the service is available.
- (e) Transportation to medical appointments outside the ~~service area~~ WMSA is not reimbursable unless:
- (i) A person licensed to practice medicine, dentistry, psychiatry, osteopathy, or optometry has referred the ~~recipient~~ client to a specified provider for covered services that are not available in the service area; and
  - (ii) The referral is in writing and the medical necessity of the referral is documented in the ~~recipient's~~ client's medical records.

**Section 7. Excluded transportation expenses.** The following transportation expenses are not reimbursable:

- (a) Transportation to receive services which are not covered services;
- (b) Transportation of a family ~~member~~ or friend to visit a ~~recipient~~ client or consult with the ~~recipient's~~ client's physician or other provider of medical services, unless the transportation is to visit a ~~recipient~~ client under age twenty-one and the visit is medically necessary;
- (c) Transportation to pick up pharmaceuticals;
- (d) Transportation of a resident of a nursing facility to receive services that are available at the nursing facility;
- (e) Transportation of a ~~recipient~~ client in response to detention ordered by a court or law enforcement agency;
- (f) Transportation to receive covered services from a provider because another provider has denied services to the ~~recipient~~ client due to the ~~recipient's~~ client's refusal to follow medical advice or the ~~recipient's~~ client's unacceptable conduct;
- (g) Missed appointments. If a ~~recipient~~ client misses or cancels a medical appointment for which Medicaid reimbursement has been paid pursuant to this rule, the ~~recipient~~ client ~~must~~ shall refund ~~the funds~~ the cost of the appointment to the Department within fifteen days of the missed appointment (unless the medical appointment has been rescheduled). Medicaid funds that are not ~~timely~~ refunded shall be considered excess payments and may be recovered pursuant to Section 12.

**Section 8. Procedures for obtaining reimbursement.**

(a) Request for reimbursement. A ~~recipient client that wishes wishing~~ to receive reimbursement for administrative travel ~~must shall~~ contact the Department and ~~make a request reimbursement~~. The request may be oral or written, ~~and the recipient~~ The client shall furnish information as requested by the Department and complete whatever documentation is required by the Department's required documentation.

(b) Payment. Payment shall be by warrant issued to the ~~recipient client~~ or other payee.

(c) Reimbursement request and certification. After the ~~recipient client~~ or other payee submits a request for administrative transportation, the ~~recipient client~~ or payee ~~must shall~~ sign the reimbursement request and certification and return it to the Department. Reimbursement requests and certifications shall become part of the ~~recipient's client's~~ file and be retained by the Department.

(d) Reimbursement to enrolled providers. Providers of lodging, taxi or non-taxi transportation services may enroll with the Wyoming Medicaid Program to be reimbursed for covered transportation services directly by Wyoming Medicaid.

(e) Provider Payment. Providers shall ~~bill~~ submit all claims to Wyoming Medicaid and will be reimbursementd will be according to Wyoming Medicaid reimbursement rates for the covered procedure codes billed on the submitted claim as published in the Wyoming Medicaid Fee Schedule.

## **Section 9. Prior authorization.**

(a) ~~Incorporation of Chapter 3.~~ Prior authorization of administrative transportation shall be governed by the prior authorization requirements of Chapter 3, ~~which are incorporated by this reference.~~

(b) ~~Services that require prior authorization.~~ All administrative transportation requires prior authorization.

(i) In deciding whether to authorize administrative transportation, the Department shall consider the:

- (A) Cost of the transportation;
- (B) Potential for over-utilization of the transportation;
- (C) Availability of lower cost alternatives; and
- (D) Excess payments owed by the ~~Recipient client~~.

(ii) ~~(iii)~~ The failure to obtain prior authorization shall result in denial of Medicaid reimbursement.

**Section 10. Allowable Medicaid reimbursement.**

(a) ~~Generally.~~ Medicaid reimbursement for administrative transportation shall be as follows:

(i) Reimbursement to a ~~recipient~~ client shall be by one of the following methods:

(A) Prospective reimbursement. The recipient's client may be reimbursed for projected administrative transportation expenses's projected expenses.

(B) Retroactive reimbursement. The recipient's client may be reimbursed for actual administrative transportation expenses's actual expenses.

(ii) Reimbursement to a provider: ~~The~~ shall be the lesser of the provider's billed charge to the recipient and the usual and Wyoming Medicaid's allowed amount per the published Wyoming Medicaid fee schedule. customary charge for the transportation.

(b) Private automobile. Medicaid reimbursement for administrative transportation furnished in a private automobile shall be:

(i) Be based on mileage as determined by the Wyoming State Auditor, or if not so determined, on map mileage using major highways as determined by the Department;

(ii) Be limited to the maximum amount recommended by the State Auditor in order to avoid any requirement for reporting mileage income to the Internal Revenue Service; and

(iii) ~~Shall n~~ Not be paid for fractions of a mile.

(c) Per diem expenses. Medicaid reimbursement for per diem expenses is limited to \$25.00 per person, per day, to be used for meals and commercial lodging. Lesser amounts will be reimbursed for additional clients transported together.

(d) ~~Retrospective~~ Retroactive reimbursement. Reimbursement for administrative transportation that is already completed is reimbursable to clients or providers if:

(i) Requested within thirty days after the date the travel was completed;  
and

(ii) The request contains the information and documentation

required by the Department, including a valid receipt for the travel expenses ~~of the travel~~.

**Section 11. Payment of claims.** Payment of claims shall be pursuant to the payment of claims provisions of Chapter 3, ~~which are incorporated by this reference.~~

**Section 12. Recovery of excess payments or overpayments.**

(a) The Department may recover excess payments and overpayments pursuant to Chapter 16 ~~or Chapter 39~~.

(b) ~~The Department may recover overpayments pursuant to Chapter 16 or Chapter 39.~~

**Section 13. Reconsideration.**

(a) A provider or client may request that the Department reconsider a decision to recover excess payments or overpayments. The request for reconsideration, the reconsideration, and any administrative hearing shall be pursuant to the reconsideration provisions of Chapter 3, ~~which are incorporated by this reference.~~

(b) Reconsideration shall be limited to whether the Department has complied with the provisions of this Chapter.

**Section 14. Disposition of recovered funds.** The Department shall dispose of recovered funds pursuant to the provisions of Chapter 16, ~~which provisions are incorporated by this reference.~~

**Section 15. Administrative hearing.**

(a) ~~Recipients.~~ Clients. A ~~recipient~~ client may request an administrative hearing pursuant to Chapter ~~44~~ regarding the termination, reduction or denial of covered services.

(b) Procedures. A request for an administrative hearing ~~must~~ shall be made in conformance with Chapter ~~44~~, and the hearing shall be held pursuant to Chapter ~~44~~.

~~Section 16. — Interpretation of Chapter.~~

~~(a) The order in which the provisions of this Chapter appear is not to be construed to mean that any one provision is more or less important than any other provision.~~

~~(b) The text of this Chapter shall control the titles of various provisions.~~

**Section 167. Superseding effect.** ~~When promulgated,~~ This Chapter supersedes all prior rules or policy statements issued by the Department, including ~~provider~~ manuals and ~~provider~~ bulletins, which are inconsistent with this Chapter.

**Section 178. Severability.** If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in full force and effect.

**Section 18. Incorporation by Reference.**

(a) For any code, standard, rule, or regulation incorporated by reference in these rules:

(i) The Department of Health has determined that incorporation of the full text in these rules would be cumbersome or inefficient given the length or nature of these rules;

(ii) The incorporation by reference does not include any later amendments or editions of the incorporated matter beyond the applicable date identified in subsection (b) of this section; and

(iii) The incorporated code, standard, rule, or regulation is maintained at the Department of Health and is available for public inspection and copying at cost at the same location

(b) Each rule incorporated by reference is further identified as follows:

(i) Referenced in Section 4 is Chapter 1 – Rules and Regulations for Medicaid – Definitions, adopted by the Department of Health and effective on November 7, 2011, found at <http://soswy.state.wy.us/Rules/RULES/8384.pdf>.

(ii) Referenced in Sections 5, 9, 11, and 13 is Chapter 3 – Provider Participation, adopted by the Department of Health and effective on December 16, 1998, found at <http://soswy.state.wy.us/Rules/RULES/3349.pdf>.

(iii) Referenced in Section 15 is Chapter 4 – Medicaid Administrative Hearings, adopted by the Department of Health and effective on November 7, 2011, found at <http://soswy.state.wy.us/Rules/RULES/8385.pdf>.

(iv) Referenced in Sections 4 and 6 is Chapter 15 – Ambulance Services, adopted by the Department of Health and effective on September 8, 1995, found at <http://soswy.state.wy.us/Rules/RULES/1529.pdf>.

(v) Referenced in Sections 12 and 14 is Chapter 16 – Program Integrity, adopted by the Department of Health and effective on November 7, 2011, found at <http://soswy.state.wy.us/Rules/RULES/8386.pdf>.