



## **HealthPartners Care Coordination** **RideCare and Special Transportation Exception Request Policy**

### **Purpose:**

The purpose of this document is to describe the policy for requesting exceptions to transportation benefit for RideCare and special transportation to health care services beyond the described MSHO, MSC+, and SNBC program benefit.

### **Introduction:**

HealthPartners has established the following policy to review requests for exceptions to the 30/60-mile rule for covered appointments with in-network providers. Please review this policy completely before submitting any exception requests to HealthPartners for review. Incomplete forms may delay processing of request.

### **The 30/60-mile rule:**

HealthPartners RideCare and special transportation provides transportation in accordance with the Department of Human Services (DHS) guidelines for eligible MSHO, MSC+, and SNBC members without access to transportation to in-network primary care providers within 30 miles of, and in-network specialty providers within 60 miles of the member's pick-up location.

**Please note:** HealthPartners has an open access network allowing members to see any provider within the HealthPartners network; however, transportation is only available following the 30/60-mile rule.

Rides that are not within the 30/60-mile requirement, and not due to network access limitations, must have evidence of the member's physiological, physical, or mental health condition to support a transportation exception through a review process.

### **Members with other insurance as a primary payer:**

Some members have other insurance as a primary payer. These members may see health care providers that accept their primary insurance even if they are not a part of the HealthPartners network. However, HealthPartners will only provide transportation to providers within the HealthPartners network following HealthPartners RideCare transportation policies.

### **The following situations do not require authorization:**

- Lack of provider availability in the member's geographic area based on HealthPartners network data
- Transition of Care requests which have a separate authorization process

**All other transportation situations will require review for an exception to the 30/60-mile rule.**



**Transportation Guide:**

*The table below outlines transportation situations and whether or not members are eligible for transportation*

Is the provider in the HealthPartners network?	Is the provider within the 30/60 rule?	Is the transportation eligible for coverage?
Y	Y	<b>Yes</b>
Y	N	<b>No</b>
N	Y or N	<b>No</b>

Based on the guide above, if the member’s situation is ineligible for transportation, review the HealthPartners exception criteria listed below. If the situation meets the criteria, complete the form and submit to HealthPartners RideCare for review.

If criteria are not met, advise the member that transportation is not covered by their health plan and refer them to HealthPartners RideCare for further assistance and options.

**Criteria for requesting exception to transportation benefit:**

The following criteria need to be considered prior to submitting a request for an exception.

- The request is based on a documented medical or behavioral health care needs and established plan(s) of care
- Care was sought with closer network providers prior to requesting transportation over the 30/60-mile rule.
- If a requested provider has a subspecialty that is relevant to the member’s care

**Process:**

- Complete the HealthPartners Care Coordination RideCare and Special Transportation Exception Request Form
- Fax completed forms to fax to RideCare at 952 967-5980 at least 10 business days prior to the need of the first ride.
  - \*\*\* Requests needing review in fewer than 10 business days due to medical reasons need to be marked as URGENT in the subject line and they will be reviewed as soon as possible, typically within 72 hours.

Once received, HealthPartners RideCare will review the information and respond back to the sender with a determination.

- The sender must provide communication to the member of the outcome
- If approved, the member or member representative may make transportation arrangements by calling **HealthPartners RideCare at 952 883-7400 or 888-288-1439**
- If the request is denied, the member will receive a denial letter with their appeal rights. The member may start an appeal by phone with HealthPartners prior to receiving denial letter by calling HealthPartners Member Services. For MSHO, call 952-967-7029 or 888-820-4285. For MSC+ and SNBC, call 952 967-7998 or toll free at 866-885-8880.