

- How is MassHealth communicating training events to all relevant staff in hospitals and ambulatory care settings? Is there a dedicated webpage staff can access to learn about new training events and related materials?

MassHealth is hosting webinars to provide information to hospitals and nursing facilities about the enhancements to the PT1 portal that will be available on 4/1/22. The next one is available March 22. The recorded versions are available through the link in the bulletin below as well.

- March 22nd- <https://zoom.us/s/99145207368> (10AM - 11AM) register to join

<https://www.mass.gov/doc/all-provider-bulletin-339-upcoming-changes-to-masshealth-nonemergency-wheelchair-van-transportation-services-0/download>

- Case Management Directors report that they have never done a PT-1 on discharge from an acute care hospital or that the PT-1 form is not typically done by the hospital. They report that case managers don't book the transportation in the hospital for all wheelchair van patients. It's the nurse, the unit clerk, a social worker or an administrative assistant in many cases who provide these services. Most case managers were concerned that this information regarding the new portal is just coming to their attention. This needs to be shared with other departments within hospitals and ambulatory services besides case management.

Agreed, each organization will have its own internal operations and processes to delegate the task accordingly. Any authorized individual can submit a PT-1, it does not have to be the case manager. The PT1 is an existing tool that allows MH providers access to the portal, to request transportation services for their patients. The enhancements being added on 4/1/22 will allow facilities to request the level of care needed, with an exclusive feature for hospitals to select a 'discharge PT1' for instant adjudication for all eligible MassHealth beneficiaries. Scheduling will be coordinated through the brokerage to ensure access for all eligible MassHealth members, and existing relationships will be honored, as well as providing additional support through the brokers contracted vendors when needed.

- Does this process also apply to surgical areas, emergency departments, and ambulatory practices as well? Many hospitals report that the PT-1 for patients is done in primary care not inpatient settings.

Yes. A PT1 for appointments will continue to be requested by the members provider. Discharge PT1s are utilized if a patient needs to access their benefit to be transported from an inpatient, outpatient, or rehab setting, back to their residence, NF, or other

destination when the patient will no longer be receiving care by said facility upon discharge.

- What hours is this brokerage service available? What happens after-hours when hospitals have late discharges for patients?

The discharge PT1 process is 24/7 via the portal and can be coordinated after hours by contacting the Broker to provide the approved PT1 number that is generated for eligible beneficiaries on the CWP. If broker is unavailable, which should be extremely rare, the vendor can be contacted to ensure transportation is completed.

- Will MART and GATRA have the availability to do the transport on the same day? We hear from patients that PT-1 outpatient services need advanced notice for appointment transports.

There are two categories of PT1, of which the Hospital D/C request is instantly adjudicated for an approved or denied status. The existing vendor that your facility works with can be assigned the trip for same day or urgent needs, and the PT1 can be submitted to indicate that the transport has already been serviced. If there is time to schedule in advance you will contact the broker to have them schedule the trip with your preferred vendor or to have the Broker schedule the trip with a vendor from their pool.

- Does MassHealth have a list (and can you share this list with MHA and hospitals) of the transportation providers that have now contracted with MART and GATRA to participate in the wheelchair car brokerage service?

You can contact the broker to schedule and identify providers in your service area.

And if a transportation provider does not choose to participate in the brokerage program through MART and GATRA, will they be paid for MassHealth trips?

No, they cannot be paid for wheelchair van trips for MassHealth members once access to billing through fee-for-service is ended effective May 31, 2022.

MassHealth is interested in discussing this with the vendors you mentioned if you have an awareness, or if this is just word of mouth, please connect Tomaso Calicchio (tomaso.calicchio@mass.gov) with the individual that brought this to your attention.

The brokerage will include a higher reimbursement for door-to-door and door-through-door wheelchair van service, so transportation providers will benefit. This was designed as an incentive, not a barrier.

- Some hospitals are reporting that their preferred providers will not be participating in this program, and this will lead to access problems for patients in areas where there are not a significant number of transportation providers.

Vendors that do not participate in this program cannot be reimbursed for wheelchair van services for MassHealth members after May 31st 2022. The broker can assign these trips to alternate vendors, but the response above also applies to this question.

MassHealth is happy to discuss this directly with the transportation provider to clear up any confusion.

- If a hospital is contracted with a transport vendor, can the vendor complete the PT-1 process?

No. The discharging provider is responsible for submitting the PT1 via the 'hospital discharge PT1' feature as a part of discharge planning. Transportation providers cannot "self refer" authorization requests through the portal.

- How does one find their PIDSL (Provider ID and Service Location) number that is on the form for the new transportation service?

Your hospital's Provider ID is the unique MassHealth ID for your facility. This information can be found on any remittance, or on your POSC, where claims are submitted to MMIS.

- Any nurse or unit clerk in a hospital that may book a chair car would need to be added in the portal as a user?

Yes, we would recommend they create a CWP profile. The facility will identify the individual/administrator that is responsible for registering for the CWP. Once an account is created, additional users can be assigned by the administrator for access to submitting PT1s across the organization.

- Will the PT-1 form need to be signed off by the provider only – the MD/NP or PA treating the patient?

No, the portal replaces the need for signatures and the MNF for wheelchair van transportation.

- Is it possible for the hospital to have access to the portal through one email and not have individual nurses or unit clerks have access to the portal? Or would it be possible for each facility to have one shared log-in? This would allow any current and future access without having to create literally dozens of log-ins for each facility. Many facilities have multiple staff covering patients and one master log-in would be preferable.

MassHealth encourages individual UN/PW be assigned for each representative requesting services for the member. The facility is responsible for identifying an administrator to register for portal access, and individuals can be added to that profile by the administrator/supervisor as best suits the needs of your operations.

- Can the PT-1 process and approval be done ahead of the discharge? How far in advance of a discharge can a hospital start the process? And does it need to be filled out by a physician?

Yes, the PT1 will be valid for up to 14 days if done in advance.

No, not only the physician, any authorized submitter can request a PT1 on the portal. i.e. access granted by the administrator who registered for the initial portal access.

- If we have a high utilizing patient who frequently is seen in the hospital emergency department, do we need to get a new PT-1 for every discharge?

If asking about 'rehospitalizations' yes, a new 'hospital discharge PT1' needs to be submitted for each 1 time trip. These are instantly adjudicated.

If you are asking about rehab hospitals sending members out to appointments and back again, use the standard PT1 form that indicates duration and frequency. These are uploaded nightly to the Broker and can remain valid for up to 12 months.

- When discharging patients needing dialysis transport from skilled nursing facilities, is the hospital or SNF expected to set this up in the MassHealth program?

Either the SNF or the hospital has the ability to submit the PT-1 for routine appointments, however, the hospital is expected to submit the discharge PT1 request. The SNF will be responsible for routine appointments for their residents.

- What education has been done about this new process with ambulance and transportation companies that provide chair care services?

Ambulance providers have been directly involved in the planning of this rollout to account for any unknowns from their perspective, and the facility's.

- However how long does it take for a PT-1 request to be authorized from time of submission? Hospitals are booking rides for these services in real-time.

Hospital Discharge PT1 requests were designed to approve or deny instantly depending on the member's eligibility. You will know as soon as you click submit if the member is approved for MH transportation.

- What is the communication process by the responding vendor to ensure that they connect with the beneficiary when the PT-1 is approved and the transportation is scheduled?

PT1 submission is important to properly coordinate the trip. The broker must be notified if your facility is working with an existing vendor, or if your facility needs help from their pool of vendors to schedule the trip, secondary to receiving an approved PT1 number on the portal, The transportation vendor or the Broker will contact the member to confirm the pick up time and to provide the vendor's name and contact number once the transportation is scheduled.