



2023

# Carve Out Benefits

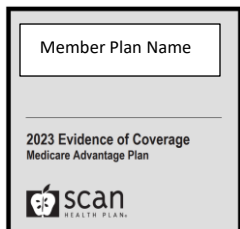
## Talking Points

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**This document is to service as a guide. Providers/vendors are responsible to check member eligibility as well as reference the member specific Evidence of Coverage and Benefit Grid for coverage:**

- **The Member’s Evidence of Coverage (EOC) - Chapter 4 Medical Benefits Chart**



- **Benefit Grid by Year under Member’s Specific Plan (i.e., Balance, Classic, Connections, Embrace)**

## 1. Transportation

### Guidance on Next Steps for Provider to Take

1. Providers must check the member specific Evidence of Coverage (EOC) and Benefit Grid for transportation coverage.
2. SCAN is responsible for routine transportation benefits through SafeRide. Gurney level transportation **may not be covered** under certain SCAN plans. If member's benefits (e.g., Classic Riverside) do not reflect gurney level transportation embedded in their routine transportation benefit, please note the following:
  - a. Gurney level transportation is not considered routine transportation; therefore, these services are not carved out to SCAN.
  - b. The member's EOC states under Chapter 4 Medical Benefits Chart in Ambulance section "non-emergency transportation by ambulance is appropriate if it is documented that the member's condition is such that other means of transportation could endanger the person's health and that transportation by ambulance is medically required".
3. Medicare covers non-emergency transportation only when the member's condition is such that other means of transportation would be contraindicated or would endanger the member's health. No reimbursement should be made if a different means of transportation, other than an ambulance, could be used without endangering the individual's health, whether or not such other transportation is actually available.

Therefore, the delegated Medical Group (MG) **must make this assessment** to determine if the member's condition meets the above qualifications.

- a. If member's condition qualifies then MG will need to provide an authorization to their contracted ambulance vendor
  - b. MG would be financially responsible for these charges.
  - c. Member could potentially have an ambulance copay for each way (refer to member specific EOC).
4. MG should also assess if visit could be rendered through their Telehealth instead an in person visit; therefore, gurney level transportation is not needed.