

405 SW 5th Street, Suite C | Des Moines, IA 50309-4609 O:844.521.9948 | F: 877.645.7837 IowaCareCoordinati@amr.net

<u>Iowa Medicaid Meals and Lodging Reimbursement Policy</u>

Access2Care ("A2C") serves eligible Iowa Medicaid Members by brokering non-emergency transportation services. Effective October 1, 2010, Iowa Medicaid Members will be required to coordinate all non-emergency transportation trips through A2C. If out of county travel coordinated by A2C is required, an Iowa Medicaid Member may be reimbursed for meals and lodging during scheduled transportation. A2C processes reimbursements for meals and lodging during the time period of the out of county travel. The purpose of the Iowa Medicaid Meals and Lodging Reimbursement Policy is to provide guidance for reimbursement to Medicaid Members for meals and lodging based on per diem rates. **Detail Receipts to include dates, times and address are required for all meals and lodging reimbursements.** EBT, Alcohol, Gift Card payments are not eligible for reimbursements. Receipts must show proof of payment.

Reimbursement Rates:

Meals – Meals expenses are reimbursed for Medicaid Members when their medical appointment(s) and related travel require them to **travel out of county and more than 50 miles one-way** and be absent from their current place of residence or pick up location for an extended period of time. Meals are not reimbursed for time periods when a Medicaid Member is staying in a location for reasons unrelated to scheduled travel for medical appointments. Meals are reimbursed in accordance with IAC 441-78.13(3) d. The Medicaid Member must submit receipts to be reimbursed for each meal up to the maximum amount which includes tax and tip, up to 15%.

In State of Iowa - Per Diem Meal Rates

Meal	Requirement	Meal Maximum		
Breakfast	A Member who departs before 6:00 am and returns prior			
	to lunch may be reimbursed actual expenses up to the \$8			
	allowable maximum for breakfast.			
	A Member who departs after 6:00 am and returns before			
Lunch	7:00 pm may be reimbursed actual expenses up to the	\$10		
	allowable maximum for lunch.			
Breakfast	A Member who departs before 6:00 am and returns after			
and	lunch, but prior to 7:00 pm may be reimbursed actual	\$8 + \$10 = \$18		
Lunch	expenses up to the maximum for breakfast and lunch.			
Dinner	A Member who departs after lunch and returns after 7:00			
	pm may be reimbursed actual expenses up to the	\$19		
	allowable maximum for dinner.			
Lunch	A Member who departs after lunch and returns after 7:00			
and	pm may be reimbursed actual expenses up to the	\$10 + \$19 = \$29		
Dinner	allowable maximum for dinner.			
All Meals	A Member who departs prior to 6:00 am and returns			
	after 7:00 pm may be reimbursed actual expenses up to	\$8 + \$10 + \$19 = \$37		
	the allowable maximum for all three meals.			



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Out of State - Per Diem Meal Rates

Medicaid Members who travel out of the state of Iowa for approved medical appointments may have meals expenses reimbursed.

The Medicaid Member must submit receipts to be reimbursed for each meal up to the maximum amount which includes tax and tips up to 15%. The maximum amounts are determined by the following Out of State City Levels.

	Level 1	Level 2	Level 3	Level 4
Breakfast	\$8.00	\$8.00	\$10.00	\$12.00
Lunch	\$10.00	\$11.00	\$12.00	\$15.00
Dinner	\$19.00	\$25.00	\$29.00	\$38.00
TOTAL	\$37.00	\$44.00	\$51.00	\$65.00

To determine which Level applies to the Members out of state travel, click on the following link https://das.iowa.gov/state-accounting/travel-relocation/out-state-travel/out-state-city-levels.

On the map click on the state for the out of state appointment and review the list of cities to determine the appropriate Level for the maximum amounts.

Some cities will show as 50 instead of one of the four Levels. Individuals who travel within a 50-mile distance beyond the Iowa border shall be subject to instate meal and lodging expense limitations.

Lodging - Lodging expenses are reimbursed for Medicaid Members when their medical appointment(s) and related travel require them to **travel out of county and more than 50 miles one-way** when the round trip and the needed medical service cannot be completed in the same day and overnight travel is required. Lodging expenses must be approved at the time the trip is scheduled with A2C.

Reimbursement rates are based on the primary destination city (the city where the medical services are received). The reimbursement amount is the maximum amount that will be reimbursed based on a receipt for lodging expenses. If the destination city is not specified in the tables below, the standard rate of \$77 will be used for all other destinations in surrounding states. Lodging reimbursement will not be paid when the stay is in the home of a relative or acquaintance or if a stay is for reasons unrelated to scheduled travel for medical appointments. Lodging is reimbursed in accordance with IAC 441-78.13(3) e.



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Per Diem Lodging Rates for Out of State

Primary Destination	County	Lodging Maximum
Omaha, NE	Douglas	\$93
Rochester, MN	Olmsted	\$95
All other trips	All Counties	\$77

Attendants/Medically necessary escorts: Reimbursements may also be made to an attendant or medically necessary escort accompanying the Medicaid Member during the trip. Lodging is not reimbursed for attendant while the member is admitted. The Member's physician/medical provider must sign on the Iowa Medicaid Meals and Lodging Reimbursement Form to indicate that the attendant/escort is necessary for additional meals and/or overnight lodging expenses due to medical or safety reasons. Both the Medicaid Member and the escort must submit their request on the same reimbursement form.

Scheduling: If an Iowa Medicaid Member wants to seek reimbursement for Meals and Lodging, the Medicaid Member **must also have their trip scheduled through A2C**. The Member must call **1-866-572-7662** to make trip reservations. The trip is to be scheduled **in advance of an appointment.**

When contacting A2C, the Medicaid Member will need to provide the following information: Medicaid Member full name, home address, date of birth, telephone number, and Medicaid ID number. An A2C Operator may also request additional information to verify the trip such as physician name, physician address, etc. Each time a trip is scheduled, the A2C Operator provides a unique Trip Confirmation ID Number(s). The Trip Confirmation ID number(s) is required to be written on the Meals and Lodging Reimbursement Form.

Reimbursement Processing: A2C will mail the Iowa Medicaid Meals and Lodging Reimbursement Policy and Iowa Medicaid Meals and Lodging Claim Form prior to Member's first medical appointment. The Policy and Form can also be obtained on the Iowa Medicaid website at https://dhs.iowa.gov/ime/members/medicaid-a-to-z/NEMT.

A2C processes claims for reimbursement of meals and/or lodging with the receipt of a completed and signed reimbursement form.

Instructions:

- 1. Fill in all of the blanks on the Iowa Medicaid Meals and Lodging Claim Form completely and legibly except for areas requiring a physician/medical provider signature. That will be completed by your physician or a representative from their office.
- 2. Ensure that the Dates of Transport and Trip Confirmation ID Number(s) indicated on the form are accurate. A2C will verify that your reimbursement request corresponds to a scheduled trip entered in the system.



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- 3. Put data relating to one round trip on the reimbursement form. Each time you request reimbursement for meals or lodging, a fully completed form must be returned to A2C.
- 4. Attach all detailed receipts to include dates, times and address for meals and/or lodging to the reimbursement form.
- 5. Mail the <u>original signed form and receipts to: Access2Care 405 SW 5th Street, Ste. C, Des Moines, IA 50309-4609</u>. Processed and paid reimbursement forms are not returned. Please retain a copy if you would like to keep the information for your records.

Additional Reimbursement Processing Requirements:

- 1. Iowa Medicaid Meal and Lodging Claim Forms received more than 120 days past the Member's appointment will be denied. Reimbursement forms that have been returned for additional or incomplete information must be resubmitted within 30 days. Any requests for review regarding meals and lodging reimbursement or denied reimbursements must be submitted within 30 days of the date on the Notice of Decision letter.
- 2. A2C will process payments within 10-20 business days of A2C's receipt of a fully completed, signed, and valid Iowa Medicaid Meals and Lodging Claim Form.
- 3. For Meals and Lodging claims submitted with Mileage Reimbursement Mileage Logs, one check will be processed payable to the driver listed on the Mileage Reimbursement Log and sent via U.S. Mail to the driver's address. For Meals and Lodging claims submitted independently, payment will be issued by check in the Medicaid Member's name and sent via U.S. Mail to the Medicaid Member's address.
- 4. A2C may deny a claim for Iowa Medicaid Meals or Lodging Reimbursement if the trip is not scheduled through A2C or if the destination is not a facility that delivers Iowa Medicaid compensable services as determined by Iowa Medicaid Enterprise. Reimbursement forms submitted with incomplete information will not be processed until all requested information is received.

Make copies of the reimbursement form if there is a need to submit more than one reimbursement claim. The Member's physician/medical provider must sign each reimbursement form in order to be paid for each reimbursement. Unsigned forms will not be processed and will be returned via US Mail. Please call the A2C Operations at **844.521.9948** if you have any questions.