Medical Assistance Transportation Program (MATP)

A basic overview of the MATP

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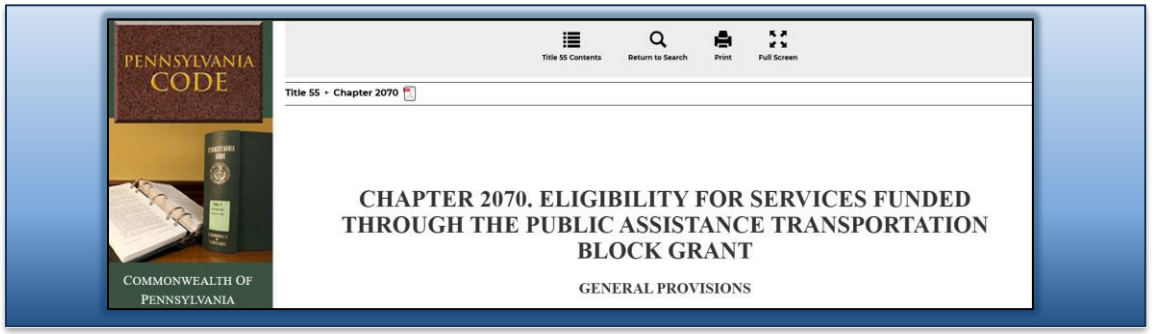
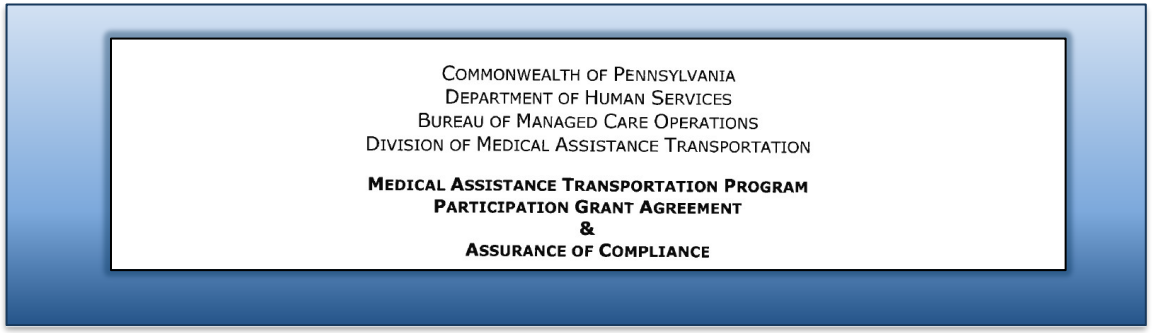
The MATP in Pennsylvania is governed by:

State Plan under Title XIX
of the Social Security Act



55 Pa. Code § 2070, Eligibility for Services Funded
Through the Public Assistance Transportation Block Grant



MATP Grant Agreement

MATP Standards and Guidelines (2016 S&G)

What is MATP?

Pennsylvania
Department of Human Services

MATP is designed to provide:

- Access to MA compensable **medical and pharmacy services**
- Access to **ongoing treatment** of chronic diseases and care management
- Access to care with individual **medical practices**
- Access to **preventative care** (equates to fewer and shorter hospital stays)

Types of Transportation Providers

- County Government
- Sub-Contracted Entities of County Government
- Transportation Brokerage Agencies
- Local Transit Agencies

- Mass transit (buses, trains, subways, etc.)
- Mileage Reimbursement
- Paratransit (includes multi-modal and taxi)
- Volunteers (only available in select counties)

Accessing MATP Services

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To begin the registration process, the consumer should contact the MATP agency in their county to determine and complete the following:

Eligibility

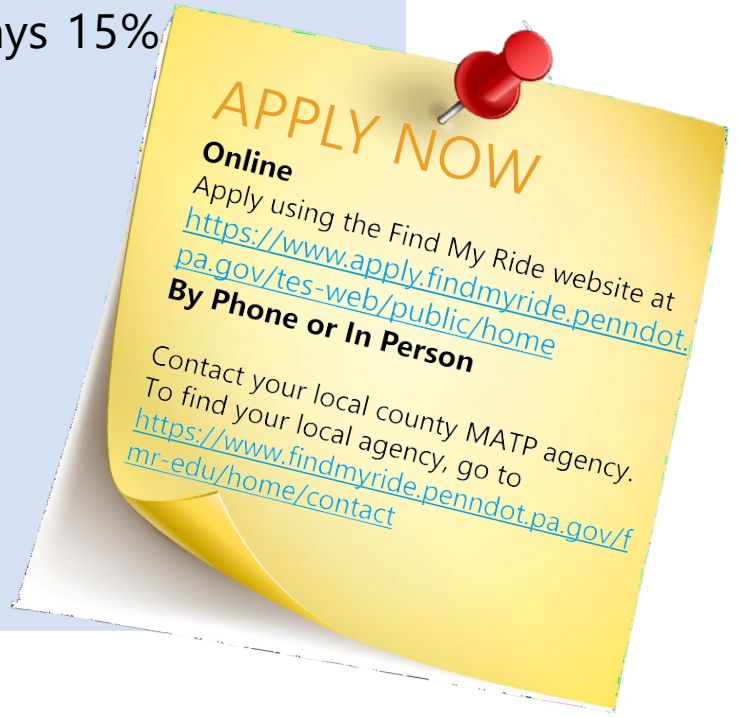
- Most Category/Code combinations are eligible for the MATP
- Consumers 65 years of age or older are referred to the Senior Shared Ride Program (Senior Shared Ride pays 85% of the fare and MATP pays 15% of the fare)

Application

- 30-day courtesy ride period

Needs Assessment

Determination of Mode



PennDOT's Find My Ride Apply

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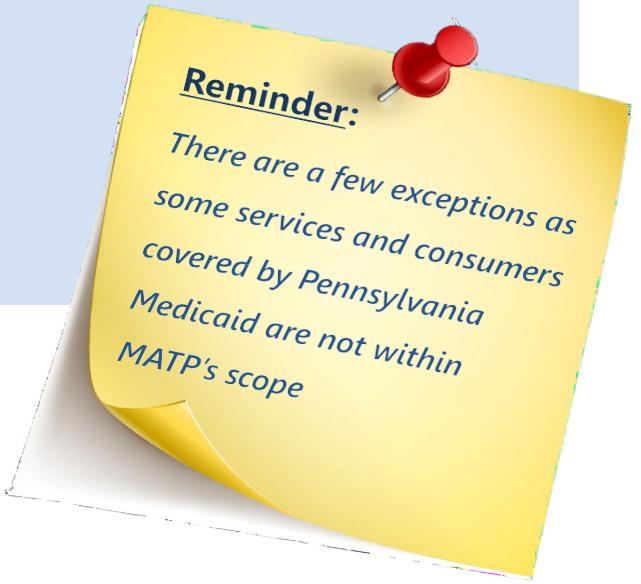
The Find My Ride Apply App allows consumers or someone acting on their behalf to apply for **free and affordable** transportation services for seniors, persons with disabilities, and people who need assistance to get to medical appointments including the **MATP, Senior Shared Ride, Americans with Disabilities Act (ADA)** and **Persons With Disabilities (PWD)** programs.

The applications can be accessed at:
www.apply.findmyride.penndot.pa.gov

Covered Services

- **MATP** provides transportation to **all** MA compensable services
- **MATP must** ensure transportation is **only** to and from qualified MA-enrolled providers of the consumer's choice that are typically available within their home community
- Consumers can also access Medicare covered services if consumer is dual-eligible for MA and Medicare



Covered Services Cont.

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Hospitals & Outpatient Care: General hospital outpatient (incl. psychiatric), Hospital discharges, Private psychiatric hospital admissions/discharges

Substance Use and Mental Health: Inpatient/non-hospital detox & rehab, halfway houses, methadone, Crisis intervention, peer support, targeted case management, Intensive behavioral health

Licensed Practitioners & Clinics: Physicians, dentists, podiatrists, chiropractors, nurse practitioners, psychologists, therapists, social workers, counselors, midwives, optometrists, Medical suppliers, labs, pharmacies, Family planning, birth centers, hospice, dialysis, ambulatory surgical centers, Rural/FQHC/primary care/drug & alcohol/rehab/psychiatric clinics

Facility Admissions/Discharges: Community residential, therapeutic rehab, nursing facilities, personal care homes (if routine transport not provided), VA hospitals (for MA-covered services only), urgent care transportation (same-day, after-hours, and weekend medical needs)

Special Populations: EPSDT providers, PPEC, School-age children (if IEP doesn't cover transport)

Visitation/Patient Education: Transport for parents/guardians to visit minor inpatients (under child's eligibility)

Waiver-Funded Services: Only if waiver does not include transportation funding

Non-Covered Services

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Emergency & Ambulance Transport: Emergency ambulance transportation, Non-emergency medically necessary ambulance transportation

Non-Medical & Day Programs: Transportation to sheltered workshops, Transportation to day care programs (including adult day care), Transportation to nonmedical services

Services Not Covered by MA: Transportation to any service not covered by Medical Assistance (e.g., medical marijuana dispensaries, WIC appointments)

Facility Responsibility: Transportation as part of inpatient treatment (facility's responsibility)

Exceptional & Out-of-Scope Services: Exceptional transportation service (per 55 Pa. Code 2070.4), Air travel, lodging, meals

Escort & Special Services: Non-medically necessary escorts for adults, Stretcher service, door-through-door service

Visitation: Transportation for visitation purposes for adult consumer's who are inpatient of a hospital or inpatient facility

Unsafe Weather: Transportation during severe inclement weather (per local policy)

Urgent Transportation Services

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- MATP provides urgent care medical services (same-day, after normal business hours, and weekend transportation).
- Urgent care medical services are defined as any illness or severe condition, which is verified by a medical professional as necessary to diagnose and treat within a 24-hour period and if left untreated, could rapidly become a crisis or emergency.
- A hospital discharge can be considered urgent care.

Provision of Services

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Escort Requirements

- If necessary, an escort may accompany a consumer due to consumer's age, communication ability, physical, mental, cognitive and/or developmental capacity.

Attendant Requirements

- Depending on the circumstances and known factors, the MATP may provide an attendant on the trip (this generally is provided for grouped children's transportation).

Waiver Requirements

- In order to ensure that services are cost efficient, appropriate, and meet the needs of the consumer, the MATP may request a waiver of a MATP requirement.

Written Notice and Appeals

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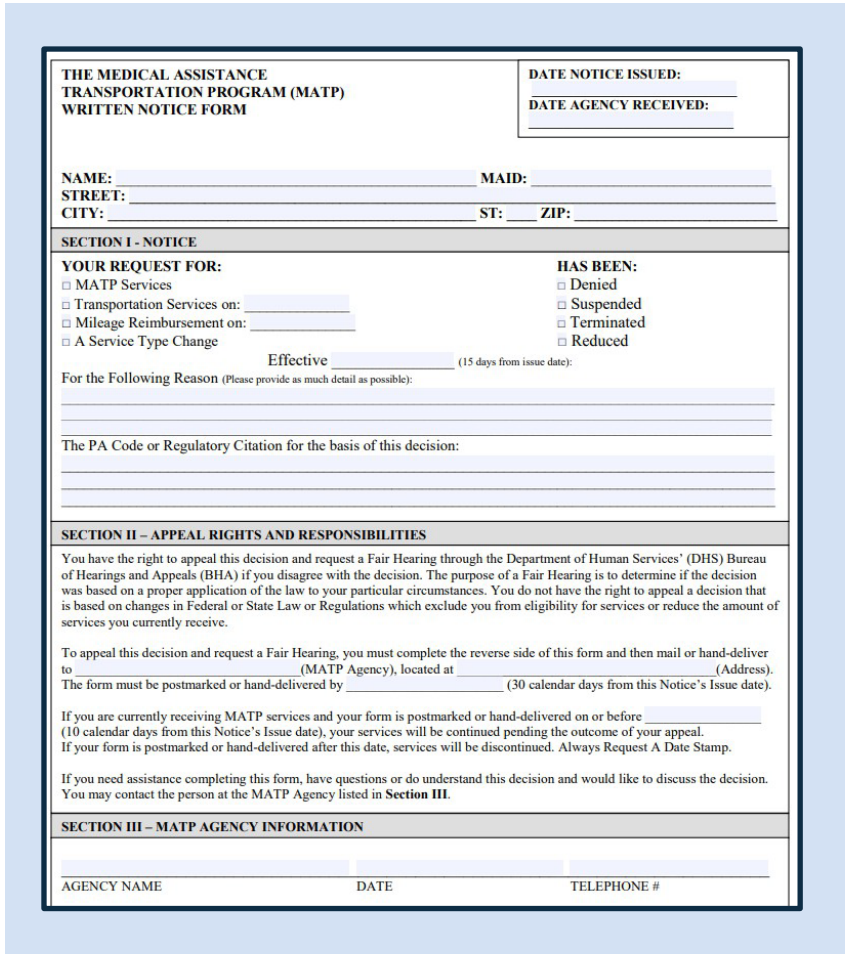
- There are times when the MATP program may deny, reduce or terminate a consumer's request for transportation.
- This is provided via a **Written Notice** that details the reason for the denial, reduction or termination of the transportation request.
- The Written Notice also describes the consumer's rights for an **appeal** of the denial, reduction or termination of the transportation request.



THE MEDICAL ASSISTANCE TRANSPORTATION PROGRAM (MATP) WRITTEN NOTICE FORM

DATE NOTICE ISSUED: _____
DATE AGENCY RECEIVED: _____

NAME: _____ MAID: _____
STREET: _____
CITY: _____ ST: ____ ZIP: _____

SECTION I - NOTICE

YOUR REQUEST FOR:
- ☐ MATP Services
- ☐ Transportation Services on: _____
- ☐ Mileage Reimbursement on: _____
- ☐ A Service Type Change

HAS BEEN:
- ☐ Denied
- ☐ Suspended
- ☐ Terminated
- ☐ Reduced

Effective _____ (15 days from issue date):

For the Following Reason (Please provide as much detail as possible):

The PA Code or Regulatory Citation for the basis of this decision:

SECTION II – APPEAL RIGHTS AND RESPONSIBILITIES

You have the right to appeal this decision and request a Fair Hearing through the Department of Human Services' (DHS) Bureau of Hearings and Appeals (BHA) if you disagree with the decision. The purpose of a Fair Hearing is to determine if the decision was based on a proper application of the law to your particular circumstances. You do not have the right to appeal a decision that is based on changes in Federal or State Law or Regulations which exclude you from eligibility for services or reduce the amount of services you currently receive.

To appeal this decision and request a Fair Hearing, you must complete the reverse side of this form and then mail or hand-deliver to _____(MATP Agency), located at _____(Address). The form must be postmarked or hand-delivered by _____ (30 calendar days from this Notice's Issue date).

If you are currently receiving MATP services and your form is postmarked or hand-delivered on or before _____ (10 calendar days from this Notice's Issue date), your services will be continued pending the outcome of your appeal. If your form is postmarked or hand-delivered after this date, services will be discontinued. Always Request A Date Stamp.

If you need assistance completing this form, have questions or do understand this decision and would like to discuss the decision. You may contact the person at the MATP Agency listed in **Section III**.

SECTION III – MATP AGENCY INFORMATION

AGENCY NAME | DATE | TELEPHONE #

NEMT Referrals

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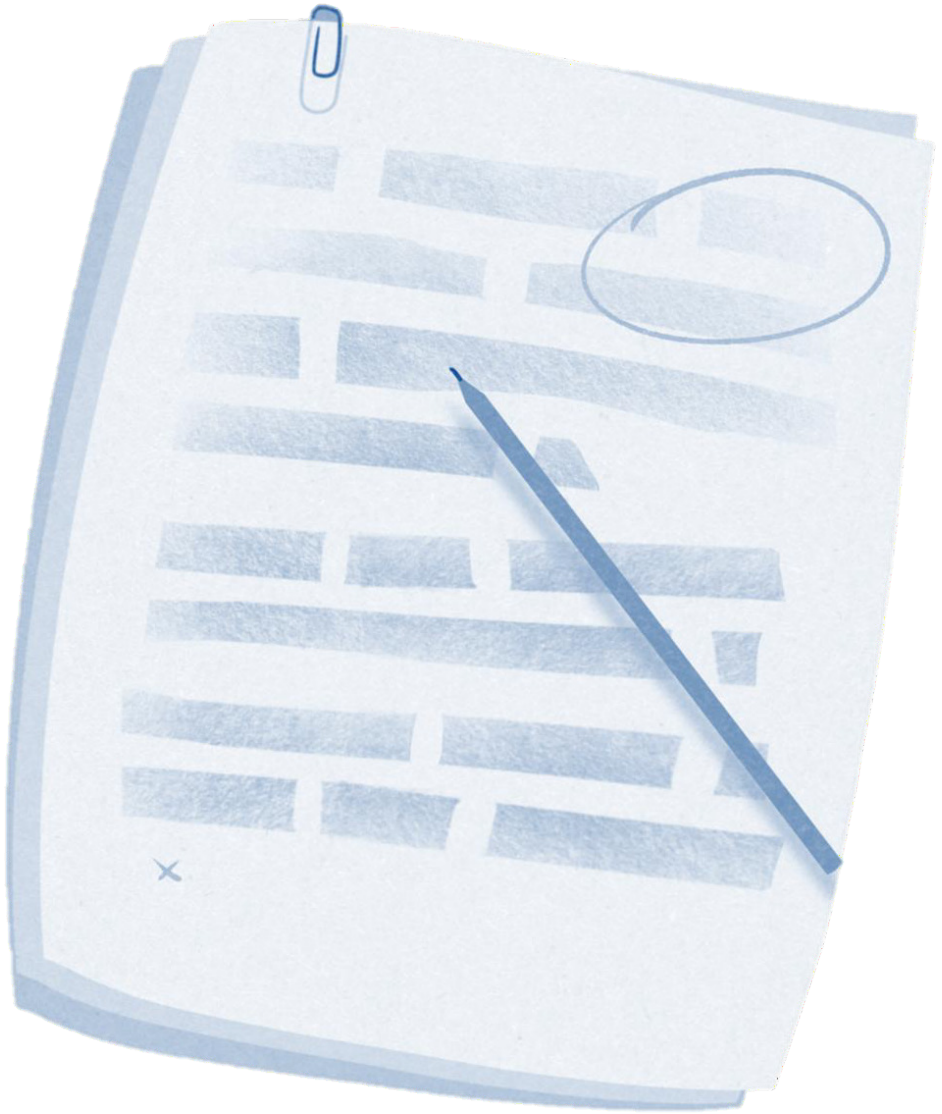
- If a transportation request is outside the scope of MATP, the request is referred to the HealthChoices Managed Care Organization (MCO), Community HealthChoices MCO, or County Assistance Office (CAO) for consideration.
- If a consumer is enrolled in the Fee For Service (FFS) program, they would be directly referred to the CAO
- Medical Assistance Transportation Program Operations Memorandum #11/2022-001 outlines this process.



Limited English Proficiency (LEP)

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Upon request or once a need is identified, MATP administrators and agencies will make additional considerations for individuals with Limited English Proficiency:

All the below is available at no cost to the individual. Instructions for accessing these services shall be provided on MATP materials and/or the county MATP websites:

- Oral interpretation services
- Sign language interpreters
- Vital documents may be made available in alternate languages
- Alternate methods of communication for individuals who are visually or hearing impaired

Questions

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Department of Human Services

Do you have any additional questions *or* comments about today's session?

Thank you!

For more information about MATP, please visit http://matp.pa.gov

For additional questions about MATP in your area, please contact your local MATP administrator by visiting http://matp.pa.gov/CountyContact.aspx

To view and/or download the most up to date DHS MATP contact list, please visit http://matp.pa.gov/PDF/MATPStaffDirectory.pdf