



Transportation Guide

As of August 3rd, 2018 MAS will require all Medicaid recipients to provide a 2015-Form for transportation request. Members who have used MAS were mailed notification by MAS informing them of the upcoming change.

What is a 2015 form and why do I need one?

The 2015-Form is used by your provider to inform MAS why you need a certain type of transportation other than mass transit. MAS is the company Medicaid has chosen to handle all non –public transportation requests for Medicaid members.

A 2015 –Form has always been required by Medicaid to justify the use of non-public transportation. When Medicaid stopped using LogistiCare for the transportation benefit and moved the benefit to be handled by MAS the policy was placed on hold to make sure everyone was provided time to submit the 2015-Form.

How do I start my request transportation from MAS services?

You should speak to your primary care provider or case manager and discuss the need for non-public transportation. Your provider will then need to submit the completed 2015-Form to MAS. The form has to clearly describe your diagnosis/medical condition and why it prevents you from taking public transportation.

Where can my provider find the 2015-Form?

- 1) Visiting MAS website at www.medanswering.com
- 2) Calling MAS (844)-666-6270



Where can the form be submitted?

The form can be faxed to (315)299-2786. More information can be found in the MAS website or by calling (866) 371-3881. Forms can now be completed online by providers via a secure portal found on the MAS website. A 2015 –Form completed through the portal can receive instant approval.

Can Amida Care submit the Form-2015 for me?

Because the 2015-Form needs to be signed by licensed medical professional Amida Care will not be able to sign or submit a 2015-Form for you. We encourage you to speak to your primary care provider if you feel you need different means of transportation to get to your appointments.

Will I need a new form every time I need to schedule transportation?

That depends on what the submitting provider requested for you.

The 2015-Form can be submitted for a onetime transportation request or for ongoing transportation needs. You should discuss your needs with your primary care doctor to ensure the information submitted in the 2015-Form fits your needs.

After my PCP submits the 2015-Form how long will I need to wait to know if I was approved?

For faxed forms, the typical timeframe for receipt, review and approval/denial is approximately 5-7 business days after all necessary information is received.

You will receive a call from MAS informing you if you were approved or denied for transportation services.

A 2015-Form completed via the website portal can receive instant approval.

I have not submitted a 2015-Form but I have a scheduled and confirmed transportation appointment with MAS, will I still be picked up for my appointment?



If a 2015-Form has not been submitted and approved by MAS before 8/3/2018 any of your appointment on or after of 8/3/2018, will be canceled and you will be asked to take public transportation.

To ensure your appointments are not canceled please reach out to your primary care doctor to ensure they submit the 2015-form.

I am not sure if a 2015- form has been submitted for me, how can I find out?

You can always check the status of your 2015-Form by calling MAS at [844-666-6270](tel:844-666-6270).

What is a NYS 2020 form?

The NYS 2020 form is used for approving transportation outside of the “Common Medical Marketing Area,” The “Common Medical Marketing Area” is defined as the area in which a community usually receives medical care and services.. If you need care outside of your local area, your medical provider will complete a NYS 2020 (Outside Common Medical Area) Form and submit it directly to MAS. In short, if your healthcare provider determines you need specialty care that is only available outside of your local area, MAS will coordinate transportation services to ensure your needs are met.

In most cases, the NYS 2020 form won't be necessary for specialty services, such as surgery. If you are receiving primary care at a facility which specializes in HIV care or LGBTQ+ health care that is outside of the borough in which you live, you might need your primary care provider to complete a NYS 2020 form.

What if I need transportation for surgery?

See transportation benefits grid.

Transportation Benefits Grid

Medicaid transportation is provided by the Medicaid Answering Service (MAS). Medicaid Fee for Services (“FFS”) will pay for your transportation under the following conditions:



Appointment	Coverage	Forms Needed	Procedure
Before Surgery (Pre-op) Appointments	Not covered*	N/A	N/A
Day of Surgery	Not covered*	N/A	N/A
Discharge Home	Covered	None	A staff member from the surgeon's office must call MAS at 844-666-6270 when you have been discharged home
After Surgery (post-op) Appointments	See Procedure	<ul style="list-style-type: none"> • Form 2015 • Form 2020 is also needed if doctor is more than 20 miles from your home or outside the 5 boroughs 	Transportation may be covered so that you can visit your doctor after surgery. The doctor would need to complete Form 2015. If approved, the doctor will call MAS at least 3 days before your medical appointment.

***Exception:** Members who are currently receiving transportation for all of their medical appointments will be covered by FFS for pre-op and day of surgery transportation.

Attachments:

[Form 2015 – Medical Justification for Transportation](#)

[Form 2020 – Request for Transportation Outside the Common Medical Marketing Area](#)



Different Transportation Methods Handled by MAS

<p>Taxi: The enrollee can get to the curb, board and exit the vehicle unassisted, or is a collapsible wheelchair user who can approach the vehicle and transfer without assistance, but cannot utilize public transportation.</p>
<p>Ambulette Ambulatory: The enrollee can walk, but requires door through door assistance.</p>
<p>Ambulette Wheelchair: The enrollee uses a wheelchair that requires a lift-equipped or a roll-up wheelchair vehicle and requires door through door assistance.</p>
<p>Stretcher Van: The enrollee is confined to a bed, cannot sit in a wheelchair, but does not require medical attention/monitoring during transport.</p>
<p>BLS Ambulance: The enrollee is confined to a bed, cannot sit in a wheelchair, and requires medical attention/monitoring during transport for reasons such as isolation precautions, oxygen not self-administered by patient, sedated patient.</p>
<p>ALS Ambulance: The enrollee is confined to a bed, cannot sit in a wheelchair, and requires medical attention/monitoring during transport for reasons such as IV requiring monitoring, cardiac monitoring and tracheotomy.</p>