

# **CHANGE NOTICE FOR MANUAL NO. 04-22, MA-3550 NON-EMERGENCY MEDICAL TRANSPORTATION (NEMT)**

**DATE: May 6, 2022**

**Manual:** Family and Children's Medicaid  
**Change No:** 04-22  
**To:** County Directors of Social Services

## **I. BACKGROUND AND CONTENT OF CHANGE**

The Division of Health Benefits (DHB) has updated Medicaid policy MA-3550, Non-Emergency Medical Transportation (NEMT). This policy provides regulations and procedures for NEMT drivers and local agency reporting requirements.

## **II. POLICY UPDATE**

### **A. MA-3550.VIII, Determining Need for Transportation Services**

1. This section has been reorganized and language has been updated.
2. Additional subsections have been added to aid in locating specific topics.
3. Information regarding failure to complete the assessment has been moved from subsection A. to subsection E., Failure to complete the assessment.

### **B. MA-3550.XI.A.13.D., Driving Records**

Drivers with more than two chargeable accidents or moving violations in the last three years or who have had one or more driver's license suspensions or revocations within the past five years cannot transport Medicaid beneficiaries.

### **C. MA-2910.XI.C., Reporting Requirements**

The local agency is required to:

1. Report to DHB the results of the agency's annual review of its contractors' compliance with contract requirements.
2. Submit the results of the agency's annual review via (annual NEMT review/questionnaire for NC counties) to DHB.
3. Provide the results of its annual review to DHB on an annual basis and at the request of

DHB.

Local agencies will be notified by DHB when the annual submission is due to DHB.

**D. FORMS**

The following forms have been updated to change language from DMA to DHB.

1. DHB-2055
2. DHB-2056
3. DHB-5024
4. DHB-5046

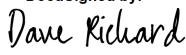
The DHB-5046 has also been updated to include Managed Care language.

5. DHB-5047
6. DHB-5048
7. DHB-5078
8. DHB-5118A, DHB-5118B
9. DHB-5119
10. DHB-5125, DHB-5125A, DHB-5125B

**III. EFFECTIVE DATE AND IMPLEMENTATION**

This policy is effective upon receipt.

If you have any questions regarding information in this letter, please contact your Medicaid Operational Support Team Representative.

DocuSigned by:  
  
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Dave Richard  
Deputy Secretary, NC Medicaid