



Ohio Administrative Code

Rule 5160-15-22 Transportation: services from an eligible provider: wheelchair van services.

Effective: July 1, 2021

(A) Payment may be made for the following wheelchair van services:

- (1) Transport by wheelchair van;
- (2) Mileage, wheelchair van; and
- (3) Attendant services, wheelchair van.

(B) Payment may be made only if all the conditions in this paragraph are met.

(1) The necessity of the wheelchair van service is established. A necessary wheelchair van service is presumed to satisfy the criteria for medical necessity set forth in rule 5160-1-01 of the Administrative Code.

(a) The transfer by wheelchair van of a medicaid-eligible individual from one hospital to a second hospital is deemed to be necessary if two conditions apply:

- (i) Both of the criteria listed in paragraph (B)(1)(b) of this rule are met; and
- (ii) The services provided at the second hospital are coverable by medicaid.

(b) The necessity of all other wheelchair van services is determined by two criteria:

(i) The medicaid-eligible individual needs to be accompanied by a mobility-related assistive device from the point of pick-up to the point of drop-off. This need is demonstrated by the following indicators:

(A) The mobility device is dropped off or picked up along with the medicaid-eligible individual at



the location where the medicaid-coverable service is obtained; and

(B) The medicaid-eligible individual rides in or on the mobility device when moving between the wheelchair van and the location where the medicaid-coverable service is obtained.

(ii) Transportation of the medicaid-eligible individual by standard passenger vehicle or common carrier is precluded or contraindicated. (Note: The use of a portable device such as a cane, crutch, or walker does not in and of itself preclude or contraindicate transportation by standard passenger vehicle or common carrier.)

(2) The transport vehicle is one of two types:

(a) A wheelchair van; or

(b) A ground ambulance used only under the following conditions:

(i) The transportation provider is an eligible provider of both wheelchair van services and ground ambulance services;

(ii) No wheelchair van is available for one of three reasons:

(A) A wheelchair van was originally scheduled for the transport but has been rendered inoperative or unavoidably delayed, and the transportation provider cannot substitute another wheelchair van within a reasonable time;

(B) The wheelchair vans operated by the transportation provider cannot accommodate the medicaid-eligible individual's mobility device; or

(C) The medicaid-eligible individual (or the medicaid-eligible individual's representative) requested a ground ambulance, and the ambulance crew discovered on arrival that wheelchair van service was needed;

(iii) The medicaid-eligible individual's mobility device can be safely transported with the medicaid-



eligible individual in the ground ambulance;

(iv) The medicaid-eligible individual does not refuse the transport; and

(v) On the claim submitted for payment of wheelchair van service, the transportation provider indicates the use of a ground ambulance.

(3) The medicaid-eligible individual is transported either to or from a medicaid-coverable service.

(4) The medicaid-eligible individual is transported both to and from a recognized or approved point of transport.

(5) The services of an attendant are used only when such services are necessary for the safe transport of a medicaid-eligible individual, and the transportation provider maintains documentation of such necessity.