

# Medical Transportation Services Provider Guide

Use this guide as a supplement to the Medical Transportation Oregon Administrative Rules ([Chapter 410 Division 136](#)). See the current Medical Transportation rules for official policies regarding billing.

## Contents (last updated Dec. 22, 2025)

<b>Client eligibility and enrollment.....</b>	<b>2</b>
Benefit plan coverage.....	2
<b>Service authorization - See OAR 410-136-3020 and OAR 410-136-3120.....</b>	<b>3</b>
Authorization of non-emergent ambulance services .....	3
Retroactive authorization for services provided after hours .....	3
<b>Billing for medical transportation services .....</b>	<b>3</b>
For payment for all non-emergent ambulance services, bill as follows:.....	4
Medicare-Medicaid billing for ambulance services - See OAR 410-120-1280.....	4
If Medicare has not made a final payment determination on your claim: .....	4
If Medicare has made a final payment determination on your claim: .....	4
If Medicare denied payment for services covered by OHA: .....	4
Billing for each additional client .....	4
Place of Service (POS) coding.....	4
Modifiers/Destination coding .....	5

Units of service .....	6
Claim status and adjustments .....	6
<b>Emergency medical transportation procedure codes .....</b>	<b>6</b>
Basic Life Support (BLS) .....	6
Advanced Life Support (ALS) .....	6
Neonatal Intensive Care .....	6
Air Ambulance .....	7
Aid Call .....	7
<b>Non-emergency medical transportation procedure codes .....</b>	<b>7</b>
Ambulance services .....	7
Basic Life Support (BLS) .....	7
Advanced Life Support (ALS) .....	7
Air Ambulance .....	8
Other non-emergent medical transportation services .....	8

## Client eligibility and enrollment

Refer to [General Rules](#) and [OHP Rules](#) for information about the service coverage according to OHP benefit plans and the Prioritized List of Health Services.

- The [OHP eligibility verification page](#) explains how to verify eligibility using the MMIS Provider Portal, Automated Voice Response or electronic data interchange (EDI) 270/271 transaction.

## Benefit plan coverage

OHA covers non-emergent medical transportation services for the following benefit packages:

- OHP Bridge (“BRG”)

- OHP Plus (“BMH”)
- OHP Plus with Limited Drug (“BMD”)
- QMB with OHP with Limited Drug (“BMM”)
- CAWEM Plus (“CWX”)
- Administrative Exam (“ADM”) – only if the client requires transportation to a service that is part of the administrative examination.

## **Service authorization - See [OAR 410-136-3020](#) and [OAR 410-136-3120](#)**

Prior authorization is required for all non-emergency medical transportation services. Providers must contact the [local transportation brokerage](#) before providing services.

- If non-emergent ambulance transportation is the most appropriate mode of transportation, the provider will contact the brokerage. The brokerage will use the [OHP 405T](#) (Medical Transportation Order) for authorization.

### **Authorization of non-emergent ambulance services**

In all counties, providers may contact [the local brokerage](#).

### **Retroactive authorization for services provided after hours**

If any non-emergent transportation is needed for urgent, medically appropriate transport outside of the brokerage's regular business hours, providers must contact the brokerage within 30 days of the after-hours transport to request retroactive authorization.

## **Billing for medical transportation services**

Use the MMIS Provider Portal professional claim, 837P or CMS-1500 for the following services:

- **Billing instructions** are available on the [OHP provider billing tips page](#).
- **For information about electronic billing**, go to the [Electronic Business Practices Web page](#).

## For payment for all non-emergent ambulance services, bill as follows:

For coordinated care organization (CCO) members, bill the CCO. For all other OHP members, bill OHA.

## Medicare-Medicaid billing for ambulance services - See [OAR 410-120-1280](#)

Bill Medicare first, using the professional claim format. Medicare will process your claim for ambulance services and automatically forward it to OHA.

### If Medicare has not made a final payment determination on your claim:

- OHA will automatically deny payment and instruct you by Explanation of Benefit (EOB) to resubmit your claim to Medicare.
- If Medicare resubmits the claim, it will again be transmitted to OHA.

### If Medicare has made a final payment determination on your claim:

OHA will make payment for covered services using the lesser of Medicare's allowed or OHA's maximum allowable amount.

### If Medicare denied payment for services covered by OHA:

Resubmit your claim on the Provider Web Portal professional claim or on the paper [OHP 505](#). See the [Professional Billing Instructions](#) for how to submit claims.

## Billing for each additional client

Billing for each additional client must be submitted to the Authority on a separate claim.

All required billing information must be included on the claim for the additional client.

## Place of Service (POS) coding

All professional claims for transportation services must include a HIPAA-compliant, CMS-defined 2-digit POS code to indicate the type of transportation service used:

- **41 - Ambulance Land:** A land vehicle specifically designed, equipped and staffed for lifesaving and transporting the sick or injured.

- **42 - Ambulance Air or Water:** An air or water vehicle specifically designed, equipped and staffed for lifesaving and transporting the sick or injured.
- **99 - Other Place of Service:** For non-ambulance transportation providers

## Modifiers/Destination coding

The combination of modifier and procedure code is very important. This combination of codes will tell where a client was picked up and dropped off on a billed trip.

- **Use the appropriate pair of 1-digit HCPCS modifiers to indicate the client's pick-up point and destination.** The first digit for the service indicates the pick-up point; the second digit indicates the drop-off point.
- **Enter the pickup point and destination as a single 2-digit modifier.** Do not enter the pickup point and destination as two separate 1-digit modifiers.

Position	Modifier	Description
1st or 2nd digit	D	Diagnostic or therapeutic site other than hospital or physician's office
	E	Residential, domiciliary, custodial facility (nursing home, not skilled nursing facility)
	G	Hospital-based dialysis facility (hospital or hospital-related)
	H	Hospital
	I	Site of transfer (e.g., airport or helicopter pad) between types of ambulance
	J	Non-hospital-based dialysis facility
	N	Skilled nursing facility
	P	Physician's office (includes non-hospital facility, clinic, etc.)
	R	Residence
	S	Scene of accident or acute event
2nd digit only	X	Intermediate stop at physician's office en route to the hospital (includes non-hospital facility, clinic, etc.)

Rural air ambulance services can use modifier TN with procedure codes for rural pickups based on rural regions of Oregon defined by the Oregon Office of Rural Health. To verify rural pickups, refer to the "Spreadsheet of Oregon ZIP Codes, Towns,

Cities and Service Areas” in the Rural/Urban Designations section of the office’s [Rural and Frontier Data web page](#).

## Units of service

Enter the number of services, units or miles billed. If billing for a partial mile, round up to the next mile.

## Claim status and adjustments

For information about the paper remittance advice and other ways to get claim status information via the Provider Web Portal, AVR or EDI 835 (Electronic Remittance Advice), go to the [OHP remittance advice page](#).

For information about how to adjust a claim, refer to the [Claim Adjustment Handbook](#).

## Emergency medical transportation procedure codes

These codes are for ambulance services only.

### Basic Life Support (BLS)

A0429 Ambulance service, BLS, emergency transport (BLS emergency);

A0425 Ground mileage, per statute mile;

A0424 Extra ambulance attendant, ALS or BLS (requires medical review).

### Advanced Life Support (ALS)

A0427 Ambulance service, ALS, emergency transport, level 1 (ALS1-emergency);

A0433 Ambulance service, ALS, emergency transport, level 2 (ALS2-emergency);

A0425 Ground mileage, per statute mile;

A0424 Extra ambulance attendant, ALS or BLS (requires medical review).

### Neonatal Intensive Care

A0225 Ambulance service, neonatal transport, base rate, emergency transport, one-way;

A0425 Ground mileage, per statute mile.

## **Air Ambulance**

A0430 Ambulance service, conventional air services, transport, one-way (fixed wing);

A0431 Ambulance service, conventional air services, transport, one-way (rotary wing);

A0435 Fixed wing air mileage, per mile

A0436 Rotary wing air mileage, per mile

## **Aid Call**

(Ambulance Response and Treatment, No Transport) -- Bill procedure code A0998 for aid call.

## **Non-emergency medical transportation procedure codes**

Note: All non-emergency medical transportation requires [prior authorization](#).

## **Ambulance services**

### **Basic Life Support (BLS)**

A0428 Ambulance service, BLS, non-emergency transport (BLS);

S0215 Ground mileage, per statute mile;

A0424 Extra ambulance attendant, ALS or BLS (requires medical review).

### **Advanced Life Support (ALS)**

A0426 Ambulance Service, ALS, non-emergency transport, level 1 (ALS1);

A0433 Ambulance Service, ALS, non-emergency transport, level 2 (ALS2);

S0215 Ground mileage, per statute mile;

A0424 Extra ambulance attendant, ALS or BLS (requires medical review).

## Air Ambulance

A0430 Ambulance service, conventional air services, transport, one-way (fixed wing);

A0431 Ambulance service, conventional air services, transport, one-way (rotary wing).

## Other non-emergent medical transportation services

Volunteer – A0080

Sedan/Taxi – A0100

Bus – Commercial - A0110

City Bus Transit, Bus Tickets or Passes – A0120

Wheelchair Car/Van - A0130

Airline Tickets – A0140

Secured Transport and Specialty Care Transports – A0434

Train – T2004

Stretcher Car/Van – T2005

Transportation broker – A0999

---

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact [Medicaid.Programs@odhsoha.oregon.gov](mailto:Medicaid.Programs@odhsoha.oregon.gov).

**Medicaid Division**  
500 Summer St NE, E44  
Salem, OR 97301  
[OHP.Oregon.gov/Providers](http://OHP.Oregon.gov/Providers)

