LODGING AND FOOD REIMBURSEMENTS

Lodging and food costs may be reimbursed if:

• You have to travel more than 100 miles one way to receive medical treatment and would not arrive home before 8:00 p.m. due to the drive time
• You have to leave before 6:30 a.m. to arrive at an appointment on time
• The medical treatment requires you to stay overnight (you must stay at a motel, hotel or other facility that provides overnight shelter such as the Ronald McDonald house)

Contact your eligibility worker if you think you qualify for a reimbursement. They can usually approve reimbursements for one to two nights of lodging and food costs but additional nights may be approved, if needed.

Costs for a companion can only be reimbursed if the person stays with you and you do not stay in a treatment facility. This includes cost reimbursements for one parent or guardian accompanying a child.

You must provide receipts to receive reimbursements. Additional verification may be required.

For more information or questions on how to apply for Medicaid:

Medicaid.utah.gov

Medicaid Hotline: 1-800-662-9651

Department of Workforce Services:
Salt Lake County: 801-526-0950
Toll-free: 1-866-435-7414

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Non-Emergency Medical Transportation
NON-EMERGENCY MEDICAL TRANSPORTATION

Medicaid may provide non-emergency transportation in an effort to help you get medical care if you are currently eligible for traditional Medicaid services and do not have transportation to receive medical treatment.

Non-Traditional, CHIP, UPP, QMB, SLMB, QI and Emergency Medicaid recipients are NOT eligible for non-emergency medical transportation or reimbursements. Transportation is not available for services from non-Medicaid providers or for non-Medicaid covered services. Transportation is not available to pick up prescriptions unless you are on the way to or from a medical appointment with a qualifying Medicaid provider. For information on exceptions, contact your Medicaid eligibility worker.

Your eligibility worker may ask you to verify medical appointments. Medicaid may not reimburse you for all services.

NURSING HOME RESIDENT TRANSPORTATION

Nursing homes are required to provide transportation to medical appointments for their residents. Residents cannot receive bus passes. Any other non-emergency transportation needed that the nursing home does not provide requires prior authorization.

UTA BUS PASSES

You may receive a bus pass if you have Traditional Medicaid and live in an area served by UTA or Cedar Area Transportation Services (CATS). A bus pass has 12 one-way trips and also works on light-rail. More trips may be approved when the household has two or more recipients or when someone needs a companion. Only Medicaid recipients may use the bus pass and it may not be used for travel for work, school, shopping, etc.

PARA-TRANSIT BUS SERVICES

Para-Transit Bus Services are available in some areas. If you live in an area served by FlexTrans, contact Medicaid to find out if you qualify to receive FlexTrans vouchers.

FLEXTRANS
Salt Lake and Davis Counties: 801-287-7433
Davis, Weber and Box Elder Counties: 877-882-7272
Dial-A-Ride
CATS: 435-865-4510

LOGISTICARE

If you do not live in an area served by bus, para-transit services, or you need door-to-door service, you may be eligible for LogistiCare services. To find out if you are eligible contact LogistiCare at 1-855-563-4403 and provide the doctor’s name and fax number who will be completing the required mobility evaluation form for you. Verify that the doctor is willing to complete the form before contacting LogistiCare. You may be transported by LogistiCare for up to four weeks while your eligibility is being determined.

You must schedule LogistiCare appointments three business days in advance by calling 1-855-563-4403.

They may provide some urgent care services for recipients that need to be seen within 24 hours. You must specify that the appointment is for urgent care. Verification may be required.

PERSONAL MILEAGE REIMBURSEMENT

Local Travel — When public transportation is not available or does not meet your needs, you may be reimbursed for personal mileage at 18 cents per mile up to $300 a month. You must keep a mileage log showing the dates and miles traveled.

Outside Your Local Area — When treatment is not available in your local area, you must receive treatment from the nearest Medicaid provider who is able to provide the services or you cannot be reimbursed for mileage. Verification may be required.