

Effective 4/1/2007



IDAHO DEPARTMENT OF  
**HEALTH & WELFARE**

**Non-Emergent Transportation Codes – Idaho Medicaid**

<b>Procedure Code</b>	<b>Modifier</b>	<b>Description</b>	<b>Allowed Amt.</b>
<b>A0100</b>		Taxi Service Intra-City (1 unit = 1 mile)	\$4.20 (1 <sup>st</sup> mile) \$1.17 (each additional mile)
<b>A0110</b>		Bus or Van Travel (1 unit = 1 mile)	\$4.20 (1 <sup>st</sup> mile) \$1.17 (each additional mile)
<b>S0215</b>		Agency Transportation (less than 21 miles)	\$0.44 per mile
<b>S0215</b>	<b>TF</b>	Agency Transportation (21 miles or over)	\$0.44 per mile
<b>S0215</b>		Individual Transportation (less than 400 miles)	\$0.10 per mile
<b>S0215</b>	<b>TF</b>	Individual Transportation (400 miles or over)	\$0.10 per mile

If you have any questions regarding these rates please contact Lourie Neal, Idaho Medicaid Office of Reimbursement Policy, at (208) 287-1162

**\*\*Terminated 8/31/2010 These codes are no longer billable.\*\***

Providers please contact AMR (877) 503-1267 with transportation questions effective 09/1/2010.

Updated 9/23/2010