EMERGENT TRANSPORTS

OUT-OF-STATE TRANSPORT
- PA from HCA Required
- HCA #13-835 Form
- HCA # 13-787 Form

TRANSPORT OF A MINOR UNDER PARENT INITIATED TREATMENT (PIT)
- PCS Form signed by a physician or psychiatric nurse (not a discharge planner)

TRANSPORT OF AN INCARCERATED PERSON
- Inmates facility financially responsible for services

EMERGENCY MEDICAL GROUND TRANSPORT
- No required documentation for claim submittal
- Provider must produce documentation upon request

TRANSPORTS WITH MILEAGE IN EXCESS OF 250 MILES ONE WAY
- Trip report/run sheet
- Detailed narrative (explanation)

ROUND/MULTIPLE TRIPS, SAME DAY SAME PATIENT
- Trip report/run sheet
- Claim note indicating "multiple trips, same day"

WASHINGTON STATE HEALTH CARE AUTHORITY
NON-EMERGENT TRANSPORTS

TRANSPORT TO A FACILITY OF A EQUIVALENT OR LOWER LEVEL OF CARE
- HCA # 13-950 FORM
- TRIP REPORT/ RUN SHEET

TRANSPORT OF AN INCARCERATED PERSON
- TRIP REPORT/ RUN SHEET
- INMATES FACILITY IS FINANCIALLY RESPONSIBLE FOR SERVICES

ALTERNATIVE DESTINATION TRANSPORT
- HCA # 13-680 FORM
- EPA #87001398 (MH) OR 87001399 (SUD)

TRANSPORT TO A FACILITY OF HIGHER LEVEL OF CARE
- TRIP REPORT/ RUN SHEET
- PCS FORM

TRANSPORT OF A MINOR UNDER PARENT INITIATED TREATMENT (PIT)
- PCS FORM SIGNED BY A PHYSICIAN OR PSYCHIATRIC NURSE (NOT A DISCHARGE PLANNER)

TRANSPORT OF AN ITA DETAINEE TO/FROM A COURT COMPETENCY HEARING
- PCS FORM
- COURT ORDER SIGNED BY A DCR

TRANSPORTS WITH MILEAGE IN EXCESS OF 250 MILES ONE WAY
- TRIP REPORT/ RUN SHEET
- DETAILED NARRATIVE (EXPLANATION)

ITA TRANSPORTS (MH & SUD)
- HCA # 42-0003 FORM COMPLETED & SIGNED BY A DCR
- TRIP REPORT/ RUN SHEET

ROUND/MULTIPLE TRIPS, SAME DAY SAME PATIENT
- CLAIM NOTE INDICATING “MULTIPLE TRIPS, SAME DAY”

VOLUNTARY BEHAVIORAL TRANSPORTS (MH & SUD)
- PCS FORM
- EPA # 87001404