

**NEMT Rates**  
**Effective 7/01/2020**

Procedure Code	Service Description	Pickup Rate
T2003	Non-emergency transportation; encounter/trip	\$9.50* + \$1.10/mile <sup>^</sup>
A0130	Non-emergency transportation: wheelchair van	\$17.50* + \$1.30/mile <sup>^</sup>
A0090	Non-emergency transportation, per mile - vehicle provided by individual (family member, self, neighbor) with vested interest <sup>□</sup>	\$0.36/mile <sup>^</sup>

\* Base rate is applicable to each leg of the trip.

<sup>^</sup> Mileage calculations begin at 0 miles.

<sup>□</sup> Medicaid policy prohibits the payment of claims for an enrollee's self-transport.