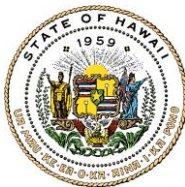


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September 11, 2026

MEMORANDUM

MEMO NO.
QI-2611A [Update to QI-2611]

TO: QUEST Integration (QI) Health Plans
All Medicaid Section 1115 Demonstration
Home and Community-Based (HCBS)
Transportation Brokers and Providers

FROM: Meredith Nichols *mn*
Med-Quest Division Administrator

SUBJECT: TRANSPORTATION GUIDANCE: SECTION 1115 DEMONSTRATION HOME AND
COMMUNITY-BASED SERVICES (HCBS) NON-MEDICAL TRANSPORTATION (NMT)
UPDATE

UPDATED GUIDANCE

This memorandum modifies Memo QI-2611 and the text of this memo is incorporated into this revision identified as Memo QI-2611A. Updated guidance is inserted in shaded text. Voided text from Memo QI-2611 is stricken.

Introduction

The Med-QUEST Division (MQD) is updating the Healthcare Common Procedure Coding System (HCPCS) code modifiers to be used for Non-Medical Transportation (NMT) authorized and coordinated by Quest Integration (QI) Health Plans under the Section 1115 Demonstration Home and Community Based Services (HCBS) programs.¹ These HCBS NMT services are intended to support individuals in accessing community services, activities, and resources that are specified in a member's HCBS care plan. In accordance with the Center for Medicare and Medicaid Services (CMS) expenditure reporting requirements, the updated modifiers will allow Section 1115 HCBS NMT to be tracked separately from other transportation benefits, such as non-emergency medical transportation (NEMT), ~~which are currently billed using the same HCPCS codes.~~

The scope of this guidance is only to update billing practices for NMT within the Section 1115 Demonstration HCBS program. There are no changes to Section 1115 HCBS NMT operational standards, service requirements, or reimbursement methodologies. This guidance does not apply to the following:

- Any other transportation services for members, including for NMT provided in relation to HCBS benefits authorized under Section 1915(c) Waiver authority for individuals with Intellectual and Developmental Disabilities (I/DD).
- Services where NMT is included in the rate (e.g., Adult Day Health, ~~Discovery and Career Planning (DCP), and Community Learning Services (CLS)~~). Health Plans must have mechanisms in place to prevent duplicate billing for the NMT service. Providers cannot be paid separately for a specific NMT ride if transportation is already included in the provider rate.
- Transportation for members living in a residential care setting or a Community Care Foster Family Home (CCFFH). These members are not eligible for this service.

Section 1115 Demonstration HCBS NMT Billing Guidance

Table 1 describes the HCPCS codes to be used for Section 1115 HCBS NMT. These HCPCS codes are specific to Section 1115 HCBS NMT and denote whether transportation is being provided to a destination, *from* a destination ~~described in the member's care plan, or between two destinations described in the member's care plan.~~ For ground transportation, A0100 should be used as the base code and S0215 should be used as a mileage code to track the number of miles of transportation provided (1 unit = 1 mile). If a stretcher van or a wheelchair van is required, the appropriate code (A0120 or A0130) should also be used in addition to the base

¹ <https://www.medicaid.gov/medicaid/section-1115-demonstrations/downloads/hi-quest-int-dmnstn-aprvl-01082025.pdf>

and mileage codes for the trip.

For example, a member's care plan may require transportation from their residence to a caregiver respite facility, then to a second facility, and then back to their residence. This trip would be billed using the “to” modifier (U7) for the residence-to-facility segment, the “between” modifier (U9) for the facility-to-facility segment, and the “from” modifier (U8) for the facility-to-residence segment. Applicable modifiers are applied to the base code (A0100), mileage code (S0215), and additional codes (A0120 or A0130), as applicable, for each trip segment.

A trip consisting of a single outbound and return, with no intermediate destination, uses only “to” (U7) and “from” (U8) modifiers. The “between” (U9) modifier only applies when a trip segment connects two destinations described in the member's care plan; it must not be used for a segment involving a destination that is not identified in the care plan.

Table 1: Section 1115 HCBS NMT Billing Codes and Modifiers

Service Category	HCPCS Code	NMT “To” Modifier	NMT “From” Modifier	NMT “Between” Modifier
<i>Taxi; Non-Emergency Transportation</i>	A0100	U7	U8	U9
<i>Stretcher Van; Non-Emergency Transportation</i>	A0120	U7	U8	U9
<i>Wheelchair Van; Non-Emergency Transportation</i>	A0130	U7	U8	U9
<i>Mileage, per mile; Non-Emergency Transportation</i>	S0215	U7	U8	U9

Please contact MQD at HCSBInquiries@dhs.hawaii.gov should you have any questions.