

QUARTERLY REPORT
HFS 2270 Physician Certification Statement for Non-Emergency Transports

1st Quarter: January 1, 2020 through March 31, 2020

PLAN	CATEGORY OF SERVICE	APPROVED	DENIED	APPEALED
Fee-for-Service	51 - Non Emergency Ambulance	1,997	476	556
	52 - Medica	3,427	1,940	0
	54 - Service Car	557	367	0
	TOTALS	5,981	2,783	556
Molina	51 - Non Emergency Ambulance	1,150	383	0
	52 - Medica	511	18	0
	54 - Service Car	27	0	0
	TOTALS	1,688	401	0
IlliniCare	51 - Non Emergency Ambulance	3	0	0
	52 - Medica	5	0	0
	54 - Service Car	9	0	0
	TOTALS	17	0	0
Next Level	51 - Non Emergency Ambulance	0	0	0
	52 - Medica	534	28	0
	54 - Service Car	0	0	0
	TOTALS	534	28	0
Meridian	51 - Non Emergency Ambulance	8,794	0	0
	52 - Medica	4,096	0	0
	54 - Service Car	773	0	0
	TOTALS	13,663	0	0
Blue Cross Blue Shield	51 - Non Emergency Ambulance	0	0	0
	52 - Medica	49	0	0
	54 - Service Car	29	0	0
	TOTALS	78	0	0
CountyCare	51 - Non Emergency Ambulance	530	0	0
	52 - Medica	1,282	0	0
	54 - Service Car	1,239	0	0
	TOTALS	3,051	0	0

TOTAL FOR 1st QUARTER

25,012

3,212

556