

**CARS #: 131**

**PROFILE ID TITLE:** MA TRANSP CONT/CONVEYANCE

**FULL TITLE:** Medicaid Transportation Contract Allocation and Conveyance Costs

**REPORTING INSTRUCTIONS:** Enter only the common carrier/conveyance costs of providing transportation to and from Medicaid covered services. See the Medicaid Eligibility Handbook, Section 7.1.4 for additional details.

Do NOT report MA Transportation Administrative expenses on this profile. See CARS Profile 132 for information on reporting the administrative expenses for MA Transportation.

**PROFILE TYPE:** Sum-Sufficient (E)

**EXPENSES ROLL TO THIS PROFILE FROM:** N/A

**EXPENSES ROLL FROM THIS PROFILE TO:** N/A

**EXPENSES ALLOCATE TO THIS PROFILE FROM:** N/A

**EXPENSES ALLOCATE FROM THIS PROFILE TO:** N/A

**REIMBURSEMENT %:** 100

**PREPAYMENTS:** 3

**LIMITATIONS:** N/A

**FEDERAL CATALOG (CFDA) NUMBER:** 93.778

**DIVISION RESPONSIBLE:** Division of Health Care Access and Accountability