

PUBLIC NOTICE

June 29, 2018

Pursuant to 42 C.F.R. Section 447.205, public notice is hereby given to the submission of a Medicaid State Plan Amendment (SPA) 18-0010 Transportation. The Division of Medicaid, in the Office of the Governor, will submit this proposed SPA to the Centers for Medicare and Medicaid Services (CMS) effective August 1, 2018, contingent upon approval from CMS, our Transmittal #18-0010.

1. Mississippi Medicaid SPA 18-0010 Transportation updates the reimbursement methodology for medically necessary transportation services, places information regarding coverage and payment of transportation services on the appropriate pages and removes long-term care residents from the State Plan Non-Emergency Transportation (NET) Broker Program.
2. Long-term care beneficiaries will be removed from the NET Broker contract resulting in a reduction of services by the vendor. This reduction will trigger a new contract rate adjustment. The cost of these services will be shifted to the long-term care facility cost report. The annual economic impact is estimated to be between a savings of \$548,981 and a cost of \$1,340,709 depending upon multiple rate negotiations between multiple parties.
3. The Division of Medicaid is submitting this proposed SPA to remove long-term care facility residents from the population served by the NET Broker, remove out-of-date language from the State Plan and place transportation coverage and reimbursement on the appropriate State Plan pages.
4. A copy of the proposed SPA will be available in each county health department office and in the Department of Human Services office in Issaquena County for review. A hard copy can be downloaded and printed from www.medicaid.ms.gov, or requested at 601-359-2081 or by emailing at Margaret.Wilson@medicaid.ms.gov.
5. Written comments will be received by the Division of Medicaid, Office of the Governor, Office of Policy, Walter Sillers Building, Suite 1000, 550 High Street, Jackson, Mississippi 39201, or Margaret.Wilson@medicaid.ms.gov for thirty (30) days from the date of publication of this notice. Comments will be available for public review at the above address and on the Division of Medicaid's website at www.medicaid.ms.gov.
6. A public hearing on this SPA will not be held.

State of Mississippi

**DESCRIPTIONS OF LIMITATIONS AS TO AMOUNT, DURATION AND SCOPE OF
MEDICAL CARE AND SERVICES PROVIDED**

24a. Transportation - The Division of Medicaid covers transportation through the following methods:

- 1) Emergency Ground Ambulance services which meet the following criteria:
 - The transport requires a basic life support (BLS) or advanced life support (ALS) certified emergency ground ambulance, equipment and staff in order to transport a beneficiary to the nearest appropriate facility where the beneficiary will be accepted for treatment,
 - The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the beneficiary's health, and
 - The beneficiary's condition is of such severity that the absence of immediate medical care could reasonably result in permanently placing the beneficiary's health in jeopardy, and/or serious impairment of bodily functions, and/or serious and permanent dysfunction of any body organ or part, or other serious medical consequence.

- 2) Emergency Air Ambulance services provided in a rotary wing aircraft which meet the following criteria:
 - The transport requires a BLS or ALS certified emergency rotary-wing air ambulance, equipment, and staff in order to transport a beneficiary to the nearest appropriate facility where the beneficiary will be accepted for treatment,
 - The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the beneficiary's health, and
 - The beneficiary's condition is of such severity that the absence of immediate medical care could reasonably result in permanently placing the beneficiary's health in jeopardy, and/or serious impairment of bodily functions, and/or serious and permanent dysfunction of any body organ or part, or other serious medical consequences.

State of Mississippi

**DESCRIPTIONS OF LIMITATIONS AS TO AMOUNT, DURATION AND SCOPE OF
MEDICAL CARE AND SERVICES PROVIDED**

- 3) Emergency and Urgent Air Ambulance services provided in a fixed wing aircraft which meet all the following criteria:
- The transport requires an emergency or urgent fixed-wing air ambulance equipped and staffed to provide medical care appropriate for the beneficiary's needs and transportation to the nearest appropriate facility,
 - The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the beneficiary's health, and
 - The beneficiary 's condition is of such severity that the absence of fixed-wing air ambulance transport to the nearest appropriate facility for treatment could reasonably result in permanently placing the beneficiary's health in jeopardy, and/or serious impairment of bodily functions, and/or serious and permanent dysfunction of any body organ or part, or other serious medical consequence.
- 4) Non-emergency transportation (NET) services for eligible Medicaid beneficiaries are arranged and coordinated through the NET Broker as described in Attachment 3.1-D. Non-emergency transportation services for long-term care facility residents are provided by the long-term care facility where the beneficiary resides.

State of Mississippi

METHODS OF PROVIDING TRANSPORTATION

The Division of Medicaid provides statewide, medically necessary non-emergency transportation (NET) services through a brokerage program in accordance with Section 1902(a)(70) of the Social Security Act and 42 C.F.R. § 440.170 in order to more cost-effectively provide transportation for Medicaid beneficiaries.

The Division of Medicaid will operate the broker program without regard to the requirements of Section 1902(a)(23), Freedom of Choice.

Persons excluded from the NET Broker program include beneficiaries who are:

- Residents of a nursing facility, intermediate care facility for individuals with intellectual disabilities (ICF/IID) or psychiatric residential treatment facility (PRTF),
- Qualified Medicare Beneficiaries (QMB),
- Specified Low-Income Beneficiaries (SLMB),
- Qualified Individuals (QI), and
- Family Planning Waiver Beneficiaries.

NET services include:

- Wheelchair vans,
- Taxis,
- Stretcher services,
- Bus passes,
- Tickets,
- Non-emergency ground ambulance,
- Other transportation, including but not limited to: private automobiles, non-profit transit systems, specialty carriers for non-emergency ambulatory disoriented persons, and specialty carriers using lift-equipped vehicles in compliance with the Americans with Disabilities Act (ADA) certified to provide non-emergency transportation for non-ambulatory persons.

NET services not included in the NET Broker program include:

- NET air ambulance, and
- NET ambulance hospital-to-hospital transports.

The contracted NET Broker:

- Is selected through a competitive bidding process based on the Division of Medicaid's evaluation of the NET Broker's experience, performance, references, resources, qualifications, and costs,
- Has oversight procedures to monitor beneficiary access and complaints and ensures that transport personnel are licensed, qualified, competent, and courteous,
- Is subject to regular auditing and oversight by the Division of Medicaid in order to ensure the quality of the transportation services provided and the adequacy of beneficiary access to medical care and services, and
- Complies with such requirements related to prohibitions on referrals and conflicts of interest as the Secretary of Health and Human Services shall establish (based on the prohibitions on physician referrals under Section 1877 and such other prohibitions and requirements as the Secretary determines to be appropriate).
- Is not itself a provider of transportation nor does it refer to or subcontract with any entity with which it has a prohibited financial relationship as described at 42 C.F.R. § 440.170(4)(ii).

State of Mississippi

METHODS OF PROVIDING TRANSPORTATION

The Division of Medicaid reimburses the NET Broker based on the current contract which is located at <https://medicaid.ms.gov/resources/procurement/completed-procurements/>.

The Broker is reimbursed an implementation price of no more than the actual implementation costs up to the amount specified in the Contractor's Business Proposal set forth in Appendix A of the NET Services request for proposals (RFP).

Payment of the implementation cost shall be made by the Division of Medicaid in two installments during the implementation phase of the contract. The schedule for the two (2) payments will be determined within thirty (30) calendar days of the contract signing and based on milestones and deliverables.

An incumbent Broker is not eligible for receipt of implementation payment, except for actual expenses incurred to acquire the infrastructure to support an increase in required staffing as specified in the NET Services RFP and approved by the Division of Medicaid.

During the operational phase of the contract, the Broker will be paid on a monthly basis in accordance with the Broker's bid price proposals set forth in Appendix A which are firm and fixed for the period of the contract.

The Contractor shall provide timely payment to each contracted NET Provider for the services rendered. The Contractor may reimburse NET Providers through any payment arrangement agreeable to both parties, including a sub-capitation arrangement. All payment arrangements must include an incentive or safeguard to ensure utilization data for every encounter is submitted to the Contractor.

All non-federal funding for transportation is paid from legislative appropriations to the Division of Medicaid.

The Division of Medicaid assures that no agreement (contractual or otherwise) exists between the State or any form of local government and the transportation broker to return or redirect any of the Medicaid payment to the State or form of local government (directly or indirectly). This assurance is not intended to interfere with the ability of a NET Broker to contract for transportation services at a lesser rate and credit any savings to the program.

State of Mississippi

METHODS OF PROVIDING TRANSPORTATION

The NET Broker is responsible for the administration and operation of NET services including, but not limited to:

- Operating and appropriately staffing a call center within Hinds, Madison or Rankin County MS subject to approval by the Division of Medicaid, to ensure that beneficiaries have access to requested NET services. The NET Broker is responsible for ensuring that only eligible Medicaid beneficiaries receive transportation services to MS enrolled Medicaid providers for covered medically necessary services.
- Contracting with NET providers to ensure that a sufficient number of vehicles and drivers are available to transport beneficiaries based on their individual needs, and that appropriate modes of transportation are utilized to transport beneficiaries to their medical appointments in a timely manner.
- Maintaining appropriate documentation to support all NET services provided or denied.
- Providing timely payment to each contracted NET provider for the services rendered.
- Developing and implementing a plan for informing and educating beneficiaries, medical providers and NET providers about the NET Broker Program. The education process must include a complaint and grievance process for beneficiaries, medical providers, and NET providers.
- Developing and implementing a plan for monitoring NET providers' compliance with all applicable local, state and federal laws and regulations, the terms of their subcontracts and all NET provider related requirements of the NET Broker's contract with the Division of Medicaid.
- Providing the Division of Medicaid with specific reports that the Division of Medicaid will utilize to monitor the broker to ensure NET services are being provided in accordance with the terms and conditions of the NET Broker contract.

State of Mississippi

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES-OTHER
TYPES OF CARE**

24a. Transportation- The Division of Medicaid reimburses for transportation through the following methods:

Emergency Ground Ambulance Services are reimbursed the lesser of the provider's usual and customary charge or a fee from a statewide uniform fee schedule updated July 1 of each year and effective for services provided on or after July 1. The statewide uniform fee schedule is based on seventy percent (70%) of the Medicare ambulance fee schedule in effect as of January 1 of each year.

Emergency Air Ambulance Services provided in a rotary wing aircraft are reimbursed the lesser of the provider's usual and customary charge or a fee from a statewide uniform fee schedule updated July 1 of each year and effective for services provided on or after July 1. The statewide uniform fee schedule is based on seventy percent (70%) of the Medicare ambulance fee schedule in effect January 1 of each year.

Emergency and Urgent Air Ambulance Services provided in a fixed wing aircraft are reimbursed based on the statewide uniform fee schedule updated July 1 of each year and effective for services provided on or after July 1. The statewide uniform fee schedule is based on seventy percent (70%) of the Medicare ambulance fee schedule in effect as of January 1 of each year.

Non-Emergency Transportation (NET) services as described in Attachment 3.1-D.

Transportation for EPSDT beneficiaries, if medically necessary, which exceed the limitations and scope for Medicaid beneficiaries, as covered in the Plan, are reimbursed according to the methodology in the above paragraph.

Notwithstanding any other provision of the ambulance section, the Division of Medicaid, as required by state law, shall reduce the rate of reimbursement to providers for any service by five percent (5%) of the allowed amount for that service.

State of Mississippi

~~AMOUNT, DURATION AND SCOPE OF MEDICAL CARE AND REMEDIAL CARE SERVICES PROVIDED TO THE CATEGORICALLY NEEDY~~

~~24. Any other medical care and any other type of remedial care recognized under State law and specified by the Secretary.~~

~~a1. Transportation~~

~~_____ No limitations~~

~~X With limitations~~

~~Transportation services will be provided to beneficiaries with the exception of those beneficiaries in the following Categories of Eligibility:~~

- ~~• Qualified Medicare Beneficiary (QMB)~~
- ~~• Specified Low Income Beneficiary (SLMB)~~
- ~~• Qualified Individual (QI-1)~~
- ~~• Family Planning~~

~~a2. Brokered Transportation~~

~~X Provided under section 1902(a)(70)~~

~~The State assures it has established a non-emergency medical transportation program in order to more cost effectively provide transportation.~~

State of Mississippi

AMOUNT, DURATION AND SCOPE OF MEDICAL CARE AND REMEDIAL CARE SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

(1) The State will operate the broker program without the requirements of the following paragraphs of section 1902(a):

~~(1) statewideness (indicate areas of State that are covered)~~

~~A single Broker will operate the NET program statewide.~~

~~(10)(B) comparability (indicate participating beneficiary groups)~~

Transportation services will be provided to all Medicaid beneficiaries with the exception of those beneficiaries in the following Categories of Eligibility:

X ~~(23) freedom of choice (indicate mandatory population groups)~~

The Broker will be responsible for arranging transportation with a NET provider capable of meeting the transportation needs of the beneficiary. The beneficiary will not have freedom of choice in regards to the actual transportation provider.

(2) ~~Transportation services provided will include:~~

X ~~wheelchair van~~

X ~~taxi~~

~~stretcher car~~

X ~~bus passes~~

X ~~tickets~~

~~secured transportation~~

X ~~such other transportation as the Secretary determines appropriate (please describe):~~

~~Private automobiles, non-profit transit system, specialty carriers for non-emergency ambulatory disoriented persons, and specialty carriers using lift equipped vehicles in compliance with the Americans with Disabilities Act certified to transport non-emergency, non-ambulatory persons.~~

State of Mississippi

~~AMOUNT, DURATION AND SCOPE OF MEDICAL CARE AND REMEDIAL CARE SERVICES PROVIDED TO THE CATEGORICALLY NEEDY~~

~~(3) The State assures that transportation services will be provided under a contract with a broker who:~~

- ~~(i) is selected through a competitive bidding process based on the State's evaluation of the broker's experience, performance, references, resources, qualifications, and costs;~~
- ~~(ii) has oversight procedures to monitor beneficiary access and complaints and ensures that transport personnel are licensed, qualified, competent, and courteous;~~
- ~~(iii) Is subject to regular auditing and oversight by the State in order to ensure the quality of the transportation services provided and the adequacy of beneficiary access to medical care and services;~~
- ~~(iv) Complies with such requirements related to prohibitions on referrals and conflict of interest as the Secretary shall establish (based on prohibitions on physician referrals under section 1877 and such other prohibitions and requirements as the Secretary determines to be appropriate).~~

~~The State assures that each requirement will be met.~~

~~(4) The broker contract will provide transportation to the following categorically needy mandatory populations:~~

- ~~X~~ Low income families with children (section 1931)
- ~~X~~ Low income pregnant women
- ~~X~~ Low income infants
- ~~X~~ Low income children 1 through 5
- ~~X~~ Low income children 6-19
- ~~X~~ Qualified pregnant women
- ~~X~~ Qualified children
- ~~X~~ IV-E Federal foster care and adoption assistance children
- ~~X~~ TMA recipients (due to employment)
- ~~X~~ TMA recipients (due to child support)
- ~~X~~ SSI recipients

~~All mandatory populations will be covered.~~

State of Mississippi

~~AMOUNT, DURATION AND SCOPE OF MEDICAL CARE AND REMEDIAL CARE SERVICES PROVIDED TO THE CATEGORICALLY NEEDY~~

(5) The broker will provide transportation to the following categorically needy optional populations:

- ~~X~~ Optional low income pregnant women
- ~~X~~ Optional low income infants
- ~~—~~ Optional targeted low income children
- ~~X~~ Individuals under age 21 who are under State adoption assistance agreements
- ~~X~~ Individuals under age 21 who were in foster care on their 18th birthday
- ~~—~~ Individuals who meet income and resource requirements of AFDC or SSI
- ~~—~~ Individuals who would meet the income & resource requirements of AFDC if child care costs were paid from earnings rather than by a State Agency
- ~~—~~ Individuals who would be eligible for AFDC if State Plan had been as broad as allowed under Federal law
- ~~X~~ Individuals who would be eligible for AFDC or SSI if they were not in a medical institution
- ~~—~~ Individuals infected with TB
- ~~X~~ Individuals screened for breast or cervical cancer by CDC program
- ~~—~~ Individuals receiving COBRA continuation benefits
- ~~X~~ Individual in special income level group, in a medical institution for at least 30 consecutive days, with gross income not exceeding 300% of SSI income standard
- ~~X~~ Individuals receiving home and community based waiver services who would only be eligible under State Plan if in a medical institution
- ~~—~~ Individuals terminally ill if in a medical institution and will receive hospice care
- ~~—~~ Individuals aged or disabled with income not above 100% FPL
- ~~—~~ Individuals receiving only an optional State supplement in a 209(b) State
- ~~X~~ Individuals working disabled who buy into Medicaid (BBA working disabled group)
- ~~X~~ Employed medically improved individuals who buy into Medicaid under TWWHA Medical Improvement Group
- ~~X~~ Individuals disabled age 18 or younger who would require an institutional level of care (TEFRA 134 kids)

State of Mississippi

~~AMOUNT, DURATION AND SCOPE OF MEDICAL CARE AND REMEDIAL CARE SERVICES PROVIDED TO THE CATEGORICALLY NEEDY~~

(6) ~~The State will pay the contracted broker by the following method:~~

(i) ~~risk capitation~~

(ii) ~~non risk capitation~~

(iii) ~~other (e.g., brokerage fee and direct payment to providers)~~

~~State of Mississippi~~

~~AMOUNT, DURATION AND SCOPE OF MEDICAL CARE AND REMEDIAL CARE
SERVICES PROVIDED TO THE CATEGORICALLY NEEDY~~

~~The State has elected to provide non-emergency transportation services through a brokerage program in accordance with section 1902(a)(70) of the Social Security Act. The contracted broker provides services state-wide and is reimbursed on a per member per month capitated rate. The broker is responsible for administrating and operating the NET Program including but not limited to:~~

- ~~• Authorization the broker is responsible for operating a call center in the City of Jackson and appropriately staffing it to ensure that beneficiaries have access to request NET services. The broker is responsible for ensuring that only eligible Medicaid beneficiaries receive transportation services to Medicaid medical providers for covered medical services.~~
- ~~• Coordination and Scheduling the broker is responsible for contracting with NET providers and ensuring that a sufficient number of vehicles and drivers are available to transport beneficiaries based on their individual needs. The broker is responsible for ensuring that appropriate modes of transportation are utilized to deliver the beneficiaries to their medical appointments in a timely manner.~~
- ~~• Management the broker is responsible for maintaining appropriate documentation to support all NET services provided or denied. In addition, the broker is responsible for providing timely payment to each contracted NET provider for the services rendered.~~
- ~~• Education the broker is responsible for developing and implementing a plan for informing and educating beneficiaries, NET providers and medical providers about the NET broker program. The education process includes a complaint and grievance process for beneficiaries, medical providers, and NET providers.~~
- ~~• Monitoring the broker is responsible for developing and implementing a plan for monitoring NET providers' compliance with all applicable local, State and Federal laws and regulations, the terms of their subcontracts and all NET provider related requirements of the broker's contract with the agency. In addition, the broker is responsible for providing the agency with specific reports that the agency will utilize to monitor the broker to ensure NET services are being provided in accordance with the terms and conditions of their contract.~~

State of Mississippi

DESCRIPTIONS OF LIMITATIONS AS TO AMOUNT, DURATION AND SCOPE OF
MEDICAL CARE AND SERVICES PROVIDED

24a. Transportation - ~~The State Agency Division of Medicaid will assure covers necessary~~ transportation of recipients to and from providers of services through the following methods:

~~Ambulance Services:~~

1) ~~Emergency Ground Ambulance Medically necessary~~ ~~Emergency~~ ~~Ground~~ ~~Ambulance~~ services which meet the is defined as all of the following criteria components:

- The transport requires a basic life support (BLS) or advanced life support (ALS) certified ~~Emergency ground ambulance, equipment and staff (ALS or BLS) in order to transport a beneficiary to the closest hospital nearest appropriate facility where the patient- beneficiary will be accepted and for treatment, is available for an accidental injury or medical emergency, and~~
- The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the patient's beneficiary's health, and
- The beneficiary's condition ~~injury or medical emergency is sudden, is~~ of such severity that the absence of immediate medical care could reasonably result in permanently placing the beneficiary's ~~patient's~~ health in jeopardy, and/or serious impairment of bodily functions, and/or serious and permanent dysfunction of any body organ or part, or other serious medical consequence.

2) ~~Emergency Air Ambulance (Helicopter) Medically necessary~~ ~~Emergency~~ ~~rotary wing~~ ~~Air~~ ~~Ambulance~~ services provided in a rotary wing aircraft which meet the following criteria: is defined as all of the following components:

- The transport requires a BLS or ALS certified ~~Emergency rotary-wing air ambulance, equipment, and staff (ALS or BLS) in order to transport a beneficiary to the closest hospital the nearest appropriate facility where the patient-beneficiary will be accepted and for treatment is available for an accidental injury or medical emergency, and~~
- The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the patient's- beneficiary's health, and
- The ~~injury or medical emergency is sudden,~~ beneficiary's condition is of such severity that the absence of immediate medical care could reasonably result in permanently placing the patient's-beneficiary's health in jeopardy, and/or serious impairment of bodily functions, and/or serious and permanent dysfunction of any body organ or part, or other serious medical consequences.

State of Mississippi

DESCRIPTIONS OF LIMITATIONS AS TO AMOUNT, DURATION AND SCOPE OF
MEDICAL CARE AND SERVICES PROVIDED

~~3) Urgent Air Ambulance (Fixed Wing) Medically necessary urgent-Emergency and Urgent fixed wing aAir aAmbulance services provided in a fixed wing aircraft which meet all the following criteria is defined as:~~

- ~~• Urgent-The transport requires an emergency or urgent fixed-wing air ambulance equipped and staffed to provide medical care appropriate for the beneficiary's needs and transportation to the nearest appropriate facility, ambulance transport to the appropriate facility that will accept the patient and is capable of providing the required level and type of care for the patient's condition, and~~
- ~~• The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the patient's-beneficiary's health, and~~
- ~~• The beneficiary patient's condition is of such severity that the absence of fixed-wing air ambulance transport fer-to the nearest an appropriate facility for treatment could reasonably result in permanently placing the patient's-beneficiary's health in jeopardy, and/or serious impairment of bodily functions, and/or serious and permanent dysfunction of any body organ or part, or other serious medical consequence.~~

~~Non-Emergency Ground Ambulance Medically necessary non-emergen.cy ambulance service is defined as all of the following components:~~

- ~~• Ambulance transportation or from the closest appropriate facility for the beneficiary to receive non-emergency medical care that cannot be provided in their place of residence or medical facility where the patient is an inpatient, and~~
- ~~• The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the patient's health, and~~
- ~~• The patient suffers from an injury or debilitated physical condition that results in the patient being totally bedridden orbed confined.~~

~~4) Non-emergency Transportation Necessary nNon-emergency transportation (NET) services for eligible Medicaid recipients beneficiaries areis arranged and coordinated through the Division of Medicaid. Services-NET Broker as described in Attachment 3.1-D,are furnished through contracts between the Division of Medicaid and qualified providers. NET providers can be public or private entities or individual providers, volunteers. NET services are available to beneficiaries who have no other means of accessing Medicaid funded medical services.Non-emergency transportation services for long-term care facility residents are provided by the long-term care facility where the beneficiary resides.~~

State of Mississippi

METHODS OF PROVIDING TRANSPORTATION

24a. ~~Transportation—The State Agency will assure necessary transportation of recipients to and from providers of services through the following methods:~~

~~Ambulance Services:~~

~~Emergency Ground Ambulance—Medically necessary emergency ambulance service is defined as all of the following components:~~

- ~~• Emergency ambulance (ALS or BLS) transport to the closest hospital where the patient will be accepted and treatment is available for an accidental injury or medical emergency, and~~
- ~~• The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the patient's health, and~~
- ~~• The injury or medical emergency is sudden, of such severity that the absence of immediate medical care could reasonably result in permanently placing the patient's health in jeopardy, and/or serious impairment of bodily functions, and/or serious and permanent dysfunction of any body organ or part, or other serious medical consequence.~~

~~Emergency Air Ambulance (Helicopter)—Medically necessary emergency air ambulance service is defined as all of the following components:~~

- ~~• Emergency ambulance (ALS or BLS) transport to the closest hospital where the patient will be accepted and treatment is available for an accidental injury or medical emergency, and~~
- ~~• The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the patient's health, and~~
- ~~• The injury or medical emergency is sudden, of such severity that the absence of immediate medical care could reasonably result in permanently placing the patient's health in jeopardy, and/or serious impairment of bodily functions, and/or serious and permanent dysfunction of any body organ or part, or other serious medical consequence.~~

The Division of Medicaid provides statewide, medically necessary non-emergency transportation (NET) services through a brokerage program in accordance with Section 1902(a)(70) of the Social Security Act and 42 C.F.R. § 440.170 in order to more cost-effectively provide transportation for Medicaid beneficiaries.

The Division of Medicaid will operate the broker program without regard to the requirements of Section 1902(a)(23), Freedom of Choice.

State of Mississippi

METHODS OF PROVIDING TRANSPORTATION

Persons excluded from the NET Broker program include beneficiaries who are:

- Residents of a nursing facility, intermediate care facility for individuals with intellectual disabilities (ICF/IID) or psychiatric residential treatment facility (PRTF),
- Qualified Medicare Beneficiaries (QMB),
- Specified Low-Income Beneficiaries (SLMB),
- Qualified Individuals (QI), and
- Family Planning Waiver Beneficiaries.

NET services include:

- Wheelchair vans,
- Taxis,
- Stretcher services,
- Bus passes,
- Tickets,
- Non-emergency ground ambulance, and
- Other transportation, including but not limited to: private automobiles, non-profit transit systems, specialty carriers for non-emergency ambulatory disoriented persons, and specialty carriers using lift-equipped vehicles in compliance with the Americans with Disabilities Act (ADA) certified to provide non-emergency transportation for non-ambulatory persons.

NET services not included in the NET Broker program include:

- NET air ambulance, and
- NET ambulance hospital-to-hospital transports.

The contracted NET Broker:

- Is selected through a competitive bidding process based on the Division of Medicaid's evaluation of the NET Broker's experience, performance, references, resources, qualifications, and costs,
- Has oversight procedures to monitor beneficiary access and complaints and ensures that transport personnel are licensed, qualified, competent, and courteous,
- Is subject to regular auditing and oversight by the Division of Medicaid in order to ensure the quality of the transportation services provided and the adequacy of beneficiary access to medical care and services, and
- Complies with such requirements related to prohibitions on referrals and conflicts of interest as the Secretary of Health and Human Services shall establish (based on the prohibitions on physician referrals under Section 1877 and such other prohibitions and requirements as the Secretary determines to be appropriate).
- Is not itself a provider of transportation nor does it refer to or subcontract with any entity with which it has a prohibited financial relationship as described at 42 C.F.R. § 440.170(4)(ii).

State of Mississippi

METHODS OF PROVIDING TRANSPORTATION

~~Urgent Air Ambulance (Fixed Wing) — Medically necessary urgent air ambulance service is defined as:~~

- ~~• Urgent ambulance transport to the appropriate facility that will accept the patient and is capable of providing the required level and type of care for the patient's condition, and~~
- ~~• The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the patient's health, and~~
- ~~• The patient's condition is of such severity that the absence of transfer to an appropriate facility for treatment could reasonably result in permanently placing the patient's health in jeopardy, and/or serious impairment of bodily functions, and/or serious and permanent dysfunction of any body organ or part, or other serious medical consequence~~

~~Non Emergency Ground Ambulance — Medically necessary non-emergency ambulance service is defined as all of the following components:~~

- ~~• Ambulance transport to or from the closest appropriate facility for the beneficiary to receive non-emergency medical care that cannot be provided in their place of residence or medical facility where the patient is an inpatient, and~~
- ~~• The use of other means of transportation is medically contraindicated because it would endanger or be detrimental to the patient's health, and~~
- ~~• The patient suffers from an injury or debilitated physical condition that results in the patient being totally bedridden or bed confined.~~

~~Non-emergency transportation — Necessary non-emergency transportation (NET) for eligible Medicaid recipients is arranged and coordinated through the Division of Medicaid and qualified providers. NET providers can be public or private entities or individual providers, volunteers. NET services are available to beneficiaries who have no other means of accessing Medicaid-funded medical services.~~

~~The Division of Medicaid reimburses the NET Broker based on the current contract which is located at <https://medicaid.ms.gov/resources/procurement/completed-procurements/>.~~

~~The Broker is reimbursed an implementation price of no more than the actual implementation costs up to the amount specified in the Contractor's Business Proposal set forth in Appendix A of the NET Services request for proposals (RFP).~~

~~Payment of the implementation cost shall be made by the Division of Medicaid in two installments during the implementation phase of the contract. The schedule for the two (2) payments will be determined within thirty (30) calendar days of the contract signing and based on milestones and deliverables.~~

~~An incumbent Broker is not eligible for receipt of implementation payment, except for actual expenses incurred to acquire the infrastructure to support an increase in required staffing as specified in the NET Services RFP and approved by the Division of Medicaid.~~

State of Mississippi

METHODS OF PROVIDING TRANSPORTATION

During the operational phase of the contract, the Broker will be paid on a monthly basis in accordance with the Broker's bid price proposals set forth in Appendix A which are firm and fixed for the period of the contract.

The Contractor shall provide timely payment to each contracted NET Provider for the services rendered. The Contractor may reimburse NET Providers through any payment arrangement agreeable to both parties, including a sub-capitation arrangement. All payment arrangements must include an incentive or safeguard to ensure utilization data for every encounter is submitted to the Contractor.

All non-federal funding for transportation is paid from legislative appropriations to the Division of Medicaid.

The Division of Medicaid assures that no agreement (contractual or otherwise) exists between the State or any form of local government and the transportation broker to return or redirect any of the Medicaid payment to the State or form of local government (directly or indirectly). This assurance is not intended to interfere with the ability of a NET Broker to contract for transportation services at a lesser rate and credit any savings to the program.

State of Mississippi

METHODS OF PROVIDING TRANSPORTATION

The NET Broker is responsible for the administration and operation of NET services including, but not limited to:

- Operating and appropriately staffing a call center within Hinds, Madison or Rankin County MS subject to approval by the Division of Medicaid, to ensure that beneficiaries have access to requested NET services. The NET Broker is responsible for ensuring that only eligible Medicaid beneficiaries receive transportation services to MS enrolled Medicaid providers for covered medically necessary services.
- Contracting with NET providers to ensure that a sufficient number of vehicles and drivers are available to transport beneficiaries based on their individual needs, and that appropriate modes of transportation are utilized to transport beneficiaries to their medical appointments in a timely manner.
- Maintaining appropriate documentation to support all NET services provided or denied.
- Providing timely payment to each contracted NET provider for the services rendered.
- Developing and implementing a plan for informing and educating beneficiaries, medical providers and NET providers about the NET Broker Program. The education process must include a complaint and grievance process for beneficiaries, medical providers, and NET providers.
- Developing and implementing a plan for monitoring NET providers' compliance with all applicable local, state and federal laws and regulations, the terms of their subcontracts and all NET provider related requirements of the NET Broker's contract with the Division of Medicaid.
- Providing the Division of Medicaid with specific reports that the Division of Medicaid will utilize to monitor the broker to ensure NET services are being provided in accordance with the terms and conditions of the NET Broker contract.

~~State of Mississippi~~

~~METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES-OTHER
TYPES OF CARE~~

~~Transportation— Ambulance Services— The reimbursement methodology for ambulance services is a statewide fee schedule. Payment is made from a statewide uniform fee schedule based on 70 percent of the rate established under Medicare (Title XVII of the Social Security Act), as amended.~~

~~Notwithstanding any other provision of this section, the Division of Medicaid, as required by state law, shall reduce the rate of reimbursement to providers for any service by five percent (5%) of the allowed amount for that service.~~

State of Mississippi

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES-OTHER TYPES OF CARE

~~24a. Transportation~~ The State Agency will assure necessary transportation of recipients to and from providers of services through the following methods:

~~Ambulance Services~~ The reimbursement methodology for ambulance services is a statewide fee schedule. Payment is made from a statewide uniform fee schedule based on 70 percent of the rate established under Medicare (Title XVIII of the Social Security act), as amended.

Transportation for EPSDT beneficiaries, if medically necessary, which exceed the limitations and scope for Medicaid beneficiaries, as covered in the Plan, are reimbursed according to the methodology in the above paragraph.

Notwithstanding any other provision of the ambulance section, the Division of Medicaid, as required by state law, shall reduce the rate of reimbursement to providers for any service by five percent (5%) of the allowed amount for that service.

~~Non-emergency Transportation Services~~ Costs for non-emergency transportation services are reimbursed per the 1915(b)(4) Initial Selective Contracting Waiver for the NET program, entitled "the Mississippi Medicaid Non-emergency Transportation (NET) Waiver."

The state is divided into NET service regions. Each region is served by a primary group provider. Group providers are for profit and not for profit, public or private entities that are selected through a competitive bid process. The Division of Medicaid issues a Request for Bids (RFB) through which qualified bidders submit bids to provide NET assistance in the NET service regions. The successful bidder (primary provider) is selected for each region by the Division of Medicaid through a bid evaluation process that is published as part of the RFB. Bidders include in their price components a flat rate per one way transport. The Division of Medicaid pays the successful bidder in each region the rate included in the winning bid for that region. This rate is paid per one way transport, regardless of the length of the transport or the type of vehicle required (ambulatory or lift), and regardless of the number of transports. The Division of Medicaid may utilize an alternate group provider on a temporary basis when the primary provider cannot provide a requested service (for example, when a beneficiary requires a lift vehicle and the primary provider is operating all life vehicles at capacity).

When the Division of Medicaid utilizes individual providers, these providers are paid by the mile. The rate paid is equal to the rate paid to state employees who travel on official business; however, the Division reserves the right to change the rate at any time upon notification to the provider. The Division will review the individual provider rate on an annual basis. The review will ensure that current rates cover at least the average operating costs as determined by an analysis of cost data, not to exceed the rate paid to state employees. Upon changes to the rate, providers will be notified.

State of Mississippi

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES-OTHER
TYPES OF CARE**

24a. Transportation- ~~The State Agency~~ Division of Medicaid ~~will reimburse~~ assure necessary ~~for transportation of recipients to and from providers of services through the following methods:~~

Emergency Ground Ambulance Services are reimbursed. The reimbursement methodology for ambulance services is a statewide fee schedule. Payment is made the lesser of the provider's usual and customary charge or a fee from a statewide uniform fee schedule updated July 1 of each year and effective for services provided on or after July 1. The statewide uniform fee schedule is based on seventy percent (70%) percent of the Medicare ambulance fee schedule of the rate established under Medicare (Title XVIII of the Social Security act), as amended in effect as of January 1 of each year.

Emergency Air Ambulance Services provided in a rotary wing aircraft are reimbursed the lesser of the provider's usual and customary charge or a fee from a statewide uniform fee schedule updated July 1 of each year and effective for services provided on or after July 1. The statewide uniform fee schedule is based on seventy percent (70%) of the Medicare ambulance fee schedule in effect January 1 of each year.

Emergency and Urgent Air Ambulance Services provided in a fixed wing aircraft are reimbursed based on the statewide uniform fee schedule updated July 1 of each year and effective for services provided on or after July 1. The statewide uniform fee schedule is based on seventy percent (70%) of the Medicare ambulance fee schedule in effect as of January 1 of each year.

Non-Emergency Transportation (NET) services as described in Attachment 3.1-D.

Transportation for EPSDT beneficiaries, if medically necessary, which exceed the limitations and scope for Medicaid beneficiaries, as covered in the Plan, are reimbursed according to the methodology in the above paragraph.

Notwithstanding any other provision of the ambulance section, the Division of Medicaid, as required by state law, shall reduce the rate of reimbursement to providers for any service by five percent (5%) of the allowed amount for that service.