

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.

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- 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.

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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:

- 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).

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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.

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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.

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

24a. Transportation

The Division of Medicaid reimburses 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 the services listed below provided on or after July 1 of each year and is calculated as seventy percent (70%) of the Medicare ambulance fee schedule in effect as of January 1 of each year. If a Medicare fee is not established, then the fee is set at seventy percent (70%) of the Medicare fee for a comparable service.

- 1) Emergency Ground Ambulance Services,
- 2) Emergency Air Ambulance Services provided in a rotary wing aircraft, and
- 3) Emergency and Urgent Air Ambulance Services provided in a fixed wing aircraft.

The Division of Medicaid reimburses for 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 transportation services billed directly to the Division of Medicaid by five percent (5%) of the allowed amount for that service.