

# HOUSE RESEARCH

## Bill Summary

**FILE NUMBER:** H.F. 3059  
**Version:** Second engrossment

**DATE:** March 27, 2014

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**Subject:** Nonemergency Medical Transportation

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### Overview

This bill makes numerous changes to the provisions governing the provision of nonemergency medical transportation (NEMT) under MA. The bill provides a definition of NEMT, that encompasses services that currently fall under access transportation and special transportation, and strikes references to “special transportation” throughout. The bill lists different modes of NEMT and specifies MA payment rates. The bill also delays the implementation date for the single administrative structure and delivery system, requires the use of a Web-based single administrative structure and assessment tool, provides an exemption for managed care and county-based purchasing plans, and makes other changes. The bill also eliminates ongoing rate reductions for NEMT and ambulance services.

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**1 Transportation costs.** Amends § 256B.0625, subd. 17. Paragraph (a) defines “nonemergency medical transportation” as motor vehicle transportation provided by a public or private person that serves Minnesota health care program beneficiaries who do not require ambulance service. The term includes, but is not limited to, special transportation service.

(b) The amendment to paragraph (b) includes nonemergency medical transportation providers and not-for-hire vehicles as allowable providers of medical transportation, and strikes “special transportation” from the list of providers.

The amendment to paragraph (c) provides that MA covers NEMT and specifies related criteria. Strikes references to coverage of special transportation.

Paragraph (d) requires the administrative agency of NEMT to: (1) adhere to policies defined

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by the commissioner in consultation with the NEMT advisory committee; (2) pay transportation providers; (3) provide specified monthly data to the commissioner; and (4) by July 1, 2016, use a Web-based single administrative structure assessment tool.

Paragraph (e) requires clients to obtain their level of service certificate from an entity that does not dispatch rides for clients using assisted and other specified forms of transport.

The amendment to paragraph (f) allows the commissioner to certify the need for NEMT services using an order from a medical or mental health professional (in addition to that from a physician as under current law). Modifies documentation requirements and strikes existing rate language for special transportation services.

Paragraph (g) specifies covered modes of NEMT.

Paragraph (h) requires the administrative agency to use the level of service process established by the commissioner, in consultation with the advisory committee, to determine the client's most appropriate mode of transportation. Allows onetime service upgrades if public transit or a certified transportation provider is not available, and lists the following modes of transportation: (1) client reimbursement; (2) volunteer transport; (3) unassisted transport; (4) assisted transport; (5) lift-equipped/ramp transport; (6) protected transport; and (7) stretcher transport.

Paragraph (i) requires local agencies to administer and reimburse for the modes listed in clauses (1) to (3) in paragraph (h) and the commissioner to administer and reimburse for the modes listed in clauses (4) to (7) in paragraph (h). States that by July 1, 2016, the local agency shall be the single administrative agency and shall administer and reimburse for all modes of service.

Paragraph (j) requires the commissioner to verify that the mode and use of NEMT is appropriate (in consultation with the NEMT advisory committee), verify that the client is going to an approved medical appointment, and investigate complaints and appeals.

Paragraph (k) requires the administrative agency to pay for services and seek reimbursement from the commissioner. Provides that local agencies are subject to sanctions and monetary recovery actions as vendors of medical care.

Paragraph (l) requires payments for NEMT to be based on the client's assessed mode, not the type of vehicle used. Specifies MA payment rates for the various NEMT services.

Paragraph (m) requires mileage reimbursement rates to be subject to a quarterly fuel adjustment and specifies the adjustment method.

The amendments to paragraphs (n) and (o) make conforming changes.

The amendment to paragraph (p) eliminates a rate reduction for NEMT transportation services on July 1, 2014 (this reduction is ongoing under current law).

- 2**      **Payment for ambulance services.** Amends § 256B.0625, subd. 17a. Eliminates a rate reduction for ambulance services on July 1, 2014 (this reduction is ongoing under current

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law).

- 3 Access to medical services.** Amends § 256B.0625, subd. 18a. Sets the MA direct mileage reimbursement to eligible persons or that person's driver, at 80 percent of the IRS standard mileage rate (current law sets payment at 20 cents per mile).
- 4 Broker dispatching prohibition.** Amends § 256B.0625, subd. 18b. Makes a conforming change.
- 5 Nonemergency medical transportation advisory committee.** Amends § 256B.0625, subd. 18c. Requires the NEMT advisory committee to meet at least quarterly for the year following January 1, 2015, and then at least biannually (current law requires quarterly meetings). Modifies the issue areas for which the committee is to make recommendations to the commissioner. Extends the expiration date of the committee from December 1, 2014 to December 1, 2019.
- 6 Advisory committee members.** Amends § 256B.0625, subd. 18d. Modifies membership of the advisory committee, by adding two additional county representatives, reducing by one the number of members representing MA recipients, and adding members representing the Minnesota State Council on Disability, Minnesota Ambulance Association, and Minnesota Hospital Association.
- 7 Single administrative structure and delivery system.** Amends § 256B.0625, subd. 18c. Requires the commissioner to implement a single administrative structure and delivery system for NEMT, beginning on the date the single administrative assessment tool is available or July 1, 2016, whichever is later (the implementation date in current law is July 1, 2014). Directs the commissioner, in coordination with the Department of Transportation, to develop and authorize a Web-based single administrative structure and assessment tool, to facilitate the enrollee assessment process for NEMT services. Specifies requirements for the administrative structure. Requires the administrative structure to operate on a trial basis for one year, and if approved by the commissioner, on a permanent basis thereafter. Requires the commissioner to seek input from the NEMT advisory committee on software and funding.
- 8 Use of standardized measures.** Amends § 256B.0625, subd. 18g. Delays from CY 2013 to CY 2015 the year in which the commissioner is to collect, audit, and analyze NEMT performance data and make related changes.
- 9 Managed care.** Amends § 256B.0625, subd. 18h. Exempts managed care and county-based purchasing plans from specified requirements of the bill, including but not limited to use of a Web-based single administrative structure assessment tool and the collection and reporting of performance data.
- 10 Waiver applications for nonemergency medical transportation service providers.**

**Subd. 1. Definitions.** Defines terms.

**Subd. 2. Application for and terms of variance.** Allows new providers to apply

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to the commissioner of human services for a variance from special transportation service operating standards. Provides that variances expire on the earlier of February 1, 2016, or the date the commissioner of transportation begins certifying new providers.

**Subd. 3. Information concerning variances.** Requires the commissioner of human services to periodically provide the Department of Transportation with the number of variance applications received and the number granted.

**Subd. 4. Report by commissioner of transportation.** Requires the commissioner of transportation to report to specified legislative chairs and ranking minority members, by February 1, 2015, on implementation of this act. Specifies requirements for the report.

**11 Repealer.** Repeals § 256B.0625, subd. 18f (development of an enrollee assessment process).

**12 Effective date.** States that sections 1 to 10 are effective August 1, 2014.