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State/Territory Name: Washington

State Plan Amendment (SPA) #: 11-011

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
2201 6th Avenue, Mailstop RX-43
Seattle, Washington 98121



Division of Medicaid & Children's Health Operations

OCT 24 2012

MaryAnne Lindeblad, Director
Health Care Authority
Post Office Box 45502
Olympia, WA 98504-5502

RE: Washington State Plan Amendment (SPA) Transmittal Number 11-011

Dear Ms. Lindeblad:

The Centers for Medicare & Medicaid Services (CMS), Seattle Regional Office has completed its review of State Plan Amendment (SPA) Transmittal Number 11-011 which seeks to authorize payments to non-emergency medical transportation (NEMT) brokerages in specified counties as medical services, rather than administrative costs under Medicaid, as allowed under §1902(a)(70) of the Social Security Act.

As requested, NEMT expenditures in the regions of the state identified in this SPA may be claimed as medical services effective January 1, 2011, except for expenditures in region 6A (Clallam, Jefferson, Kitsap, and Mason-north counties) which may be claimed as medical services effective April 1, 2011.

Please disregard the approval letter for this SPA dated October 25, 2012, as it was sent in error. Enclosed with this letter is the official approval package for Washington State Plan Amendment (SPA) Transmittal Number 11-011. This letter replaces the initial one you received and has the correct approval date.

If you have any questions concerning this SPA, please contact me, or have your staff contact Tania Seto at (206) 615-2343 or via email tania.seto@cms.hhs.gov.

Sincerely,

A black rectangular box redacting the signature of Carol J.C. Peverly.

Carol J.C. Peverly
Associate Regional Administrator
Division of Medicaid and Children's Health
Operations

Enclosure

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

FOR: HEALTH CARE FINANCING ADMINISTRATION

**TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

1. TRANSMITTAL NUMBER:
11-11

2. STATE
Washington

**3. PROGRAM IDENTIFICATION: TITLE XIX OF THE
SOCIAL SECURITY ACT (MEDICAID)**

4. PROPOSED EFFECTIVE DATE
Jan. 1, 2011

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN

☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN

☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:
42 CFR 440.170

7. FEDERAL BUDGET IMPACT:
a. FFY 2011 \$531,000
b. FFY 2012 0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 3.1-A pgs 62, 62a - 62l 62q (62n-62q new)
Attachment 3.1-B pgs 61, 61a - 61j 61i
Attachment 3.1-D pgs 1-2 pg 1

**9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):**

Attachment 3.1-A pgs 62, 62a - 62l, remove 62m 62m
Attachment 3.1-B pgs 61, 61a - 61j, remove 62k 62k
Attachment 3.1-D pgs 1-2

10. SUBJECT OF AMENDMENT:

Nonemergency Medical Transportation (NEMT)

11. GOVERNOR'S REVIEW (Check One):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT

☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

☒ OTHER, AS SPECIFIED: Exempt

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:
Susan N. Dreyfus

14. TITLE:
Secretary

15. DATE SUBMITTED:

3-31-11

16. RETURN TO:

Ann Myers
Department of Social and Health Services
Medicaid Purchasing Administration
626 8th Ave SE MS: 45504
POB 5504
Olympia, WA 98504-5504

17. DATE RECEIVED:

MAR 31 2011

18. DATE APPROVED:

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED:

OCT 24 2012

20. SIGNATURE OF REGIONAL OFFICIAL:

21. TYPED NAME: Carol J.C. Peveryly

22. TITLE: Associate Regional Administrator

23. REMARKS:

06/13/2011 - pen and ink (P&I) changes authorized by the State.
08/28/2012 - pen and ink (P&I) changes authorized by the State to blocks 8 and 9.
10/17/2012 - pen and ink (P&I) changes authorized by the State (replacement of revised pages).

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

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

24. a. Transportation

Ambulance transportation is provided as a medical service for emergencies, for scheduled non-emergencies when medically necessary, or as required by state law. Ambulance transportation is not provided through a brokerage system.

See Attachment 4.19-B, IX.C for reimbursement information.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation

Transportation is provided in accordance with 42 CFR 440.170 as an optional medical service, excluding "school-based" transportation.

// Not Provided:

// Provided without a broker as an optional medical service:

(If state attests "Provided without a broker as an optional medical service" then insert supplemental information.)

Instructions:

Describe how the transportation program operates including types of transportation and transportation-related services provided and any limitations. Describe emergency and non-emergency transportation services separately. Include any interagency or cooperative agreements with other Agencies or programs.

/X/ Non-emergency transportation is provided through a brokerage program as an optional medical service in accordance with 1902(a)(70) of the Social Security Act and 42 CFR 440.170(a)(4).

(If the state attests that non-emergency transportation is being provided through a brokerage program then insert information about the brokerage program.)

Instructions:

/X/ The State assures it has established a non-emergency medical transportation program in accordance with 1902(a)(70) of the Social Security Act in order to more cost-effectively provide transportation, and can document, upon request from CMS, that the transportation broker was procured in compliance with the requirements of 45 CFR 92.36(b)-(i).

Competitive procurement:

The State conducted a competitive procurement process as required by 42 CFR 440.170(a)(4), and in compliance with the requirements of 45 CFR 92.36(b)-(i). The State conducted a rigorous competitive process which included nationally advertised processes. The Request for Proposal (RFP) was released in June 2010 and drew interest from national firms. For profit brokers are not prohibited from competing for brokerage contracts during procurements.

State contracts with regional brokers:

The RFP resulted in contracts with six organizations to provide brokered NEMT services, for trips delivered starting 01/01/2011. There are 13 broker regions (collectively covering the entire state), with each region covering a single-county or multi-county geographic area. The regions coincide with healthcare catchment areas, and the normal travel patterns for individuals obtaining healthcare services.

The contracted brokers are responsible for:

- (1) operating a customer service center to provide a gatekeeper function and pre-authorize trips; and
- (2) developing a network of transportation providers, and paying the providers.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

Performance-based contracts:

As of 1/1/2011, the contracts with brokers include performance-based provisions:

- **Per Trip Service Cost Incentive:** If a broker achieves service cost decreases (compared year-to-year and computed quarterly), of up to 5%, then the State will award a performance incentive of the same percentage increase in the monthly broker fee. (Details can be found in the contract, Exhibit J.)
- **Customer Services Center Telephone Response Performance Penalty:** If a broker fails to meet telephone response standards, then the State will assess a penalty of between 1% - 5% of the monthly broker fee (computed monthly and deducted quarterly). (Details can be found in the contract, Exhibit J.)

The State monitors broker operations.

For additional details see both the Payment Methodology section and the final section on broker operations.

(a) Non-governmental entities

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

/ / (1) state-wideness (indicate areas of State that are covered)
Broker regions covered by SPA 08-028 (approved 08/17/2010 effective 10/01/2008):

- 1A: *Chelan, Douglas, and Okanogan counties*
 3B: *Snohomish County*
 4: *King County*
 5: *Pierce County*
 6B: *Grays Harbor, Lewis, Mason-south, Pacific, and Thurston counties*
 6C: *Clark, Cowlitz, Klickitat, Skamania, and Wahkiakum counties*

Broker regions covered by SPA 11-11, effective 01/01/2011:

- 1B: *Ferry, Pend Oreille, and Stevens counties*
 1C: *Adams, Grant, and Lincoln counties*
 1D: *Spokane County*
 1E: *Asotin, Garfield, and Whitman counties*
 2: *Benton, Columbia, Franklin, Kittitas, Walla Walla, and Yakima counties*

Broker region covered by SPA 11-11, effective 04/01/2011:

- 6A: *Clallam, Jefferson, Kitsap, and Mason-north counties*

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

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

- (2) Transportation services provided will include:

- /X/ Wheelchair van
 /X/ Taxi
 /X/ Stretcher car
 /X/ Bus passes
 /X/ Tickets
 /X/ Secured transportation
 /X/ Other transportation

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

Instructions:

Describe other transportation: When cost-effective, appropriate, and necessary to ensure access to eligible medical services, will consider using/authorizing gas/fuel vouchers, mileage reimbursement, grouped-ride vehicle, volunteer drivers, parking, tolls, ferries, and air transport, and will provide lodging and meal reimbursement as outlined at 42 CFR 440.170(a)(3)(ii).

[Note: Grouped or shared ride vehicles are a cost-effective method to transport groups of clients with similar trip origins and destinations, or more than one client in a locale similar to an airport shuttle. Brokers pay transportation subcontractors on a contracted mileage-based or time-based system; costs are allocated equitably to the clients' specific medical program account codes.]

Bus fare:

When bus passes are authorized (whether monthly, weekly, etc.) the lowest cost bus pass will be used that is cost effective, and will not exceed the cost of the individual trips for which they will be used. Bus passes will not be purchased in bulk prior to the broker's determination that they are needed, unless the broker is able to obtain full credit for returning unused bus passes.

Assurance that costs are not over-allocated to Medicaid: The State ensures that costs are not over-allocated to Medicaid using the following methods:

- The State provides brokers access to a client eligibility (look-up) record which contains the account code to charge the transportation expenses. The account codes identify whether the client is on a Medicaid-funded or other-funded program, and the client's respective medical assistance program. The eligibility record information is updated daily.
- As a contract requirement, Brokers verify a client's eligibility before authorizing NEMT services.
- Brokers screen clients to ensure that other transportation resources are used first, before Medicaid.
- Brokers screen for the trip purpose, to ensure that the requested trip is to/from a covered service.
- Brokers are contractually required to assign trips to the lowest-cost mode and service provider that can deliver the trip, based on the client's mobility status and personal capabilities.
- Direct Service Costs (subcontracted transportation provider expenses) are direct-charged to the proper account codes for the client's medical assistance program. The expenses for a shared-ride are charged to the respective account codes, in a manner that costs are not over-allocated to Medicaid.
- The Broker's fixed monthly payment is allocated to the respective account codes, using a "percentage of trips" basis.
- State NEMT staff review broker invoices, perform desk reviews of brokers' policies and procedures to ensure they meet requirements, and conduct on-site monitoring of broker processes to be sure that costs are charged appropriately.
- As of 01/01/2011, the State developed a Data Tracking and Utilization System (DTUS) and requires brokers to submit trip-level detail for review. This data has greatly enhanced the monitoring efforts of state staff, and has been used for targeted review of specific areas, and a representative sampling for on-site monitoring.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

- State staff review, on-site at broker location, a random selection of trips, to include trips where costs are shared with non-Medicaid trips; review broker staff use of the allocation methodology, and test results.
- State staff desk review of cost allocation of shared trips, using the NEMT trips database. Costs assigned to Medicaid will not exceed the cost of the least expensive method of transportation appropriate to the Medicaid beneficiary.

(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, qualifications, and costs;

(ii) has oversight procedures to monitor beneficiary access and complaints and ensures that transportation is timely and 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 and timeliness 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 referral 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.)

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

- /X/ Low-income families with children (section 1931)
- /X/ Deemed AFDC-related eligibles
- /X/ Poverty-level-related pregnant women
- /X/ Poverty-level-related infants
- /X/ Poverty-level children 1 through 5
- /X/ Poverty-level children 6 through 18
- /X/ Qualified pregnant women AFDC-related
- /X/ Qualified children AFDC-related
- /X/ IV-E foster care and adoption assistance children
- /X/ TMA recipients (due to employment)(section 1925)
- /X/ TMA recipients (due to child support)
- /X/ SSI recipients

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

- /X/ Optional poverty-level-related pregnant women
- /X/ Optional poverty-level-related infants
- /X/ Optional targeted low-income children
- /X/ Non-IV-E children who are under State adoption assistance agreements
- /X/ Non-IV-E independent foster care adolescents who were in foster care on their 18th birthday.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

- /X/ Individuals who meet income and resource requirements of AFDC or SSI
- /X/ Individuals who would meet the income and 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 the State plan had been as broad as allowed under Federal law
- /X/ Children aged 15 through 20 who meet AFDC income and resource requirements
- /X/ Individuals who would be eligible for AFDC or SSI if they were not in a medical institution
- /X/ Individuals infected with TB
- /X/ Individuals screened for breast or cervical cancer by CDC program
- // Individuals receiving COBRA continuation benefits
- /X/ Individuals in a special income level group, in a medical institution for at least 30 consecutive days, with gross income not exceeding 300% of the SSI income standard
- /X/ Individuals receiving home and community based waiver services who would only be eligible under the State plan if in a medical institution (NEMT is provided to 1905(a) services but not to 1915(c) waived services (e.g., socialization, work training, etc.)
- /X/ Individuals terminally ill if in a medical institution and will receive hospice care
- /X/ Individuals aged or disabled with income not above 100% FPL
- /X/ Individuals working disabled who buy into Medicaid (BBA working disabled group)
- /X/ Employed medically improved individuals who buy into Medicaid under TWWIIA Medical Improvement Group
- // Individuals disabled aged 18 or younger who would require an institutional level of care (TEFRA 134 kids)

(6) Payment Methodology

- (A) The State will pay the contracted broker by the following method:
 - // (i) Risk capitation
 - // (ii) Non-risk capitation
 - /X/ (iii) Other (e.g., brokerage fee and direct payment to providers)
- (B) Who will pay the transportation provider?
 - /X/ (i) Broker
 - // (ii) State
 - // (iii) Other

Instructions:

Describe who will pay the transportation provider.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

The State pays the brokers, which in turn pay the subcontracted transportation provider. Here is a description of the payment process:

The State contracts with brokers:

The State contracts with brokers specify a two-part payment:

- Broker payment: the contract term "Administrative Costs", that specify a fixed monthly amount for the broker cost of operations (e.g., operating a customer service center; verifying eligibility; assigning trips to lowest-cost, appropriate mode and provider of transportation; managing subcontracts including vehicle inspections and reviewing driver background checks; reviewing subcontractor invoices for the direct transportation services).
- Transportation provider payment: The State contracts with brokers use the term "Direct Service Costs" to identify the expenses and payments made to the brokers' subcontractors and the reimbursement to clients. The Direct Service Costs are "passed through" to the transportation providers; brokers do not retain any portion.

Brokers subcontract with transportation providers:

Payment methodology and rates are included in the brokers' subcontracts. [Note: The State does not set a fee-for-service rate for brokers' subcontractors because the transportation resource availability varies greatly across the state.] Further, State Department of Licensing rules allow local jurisdictions (e.g., cities) to regulate "for hire" operations, including rates charged to the general public. [State NEMT staff review broker subcontracts as part of the routine monitoring process. Brokers must submit a rate sheet as part of their monthly reports, and a summary of trips and expenses listed by each subcontractor. State NEMT staff review subcontractor rates to assure a competitive, fair process, and to defend against potential abuse.]

Broker payment type/method: With the exception of transit trips, the most common type of payment is made on a per mile basis, with a much smaller percentage of payments being time-based or flat-fee per contract. Brokers report the payment type in the trip-level detail submitted monthly.

Trip assignments: Brokers assign trips to the lowest-cost, available, and appropriate mode and provider of transportation based on each client's mobility status and personal capabilities. (Brokers are not allowed to directly provide transportation services.)

Transportation providers invoice broker:

After completing the trip, the transportation providers invoice the broker (detailed by trip, with the broker's trip control number). Brokers review subcontractor invoices and determine if the trip was invoiced correctly and whether the trip is payable and allowable by the State. The State does not pay for client "no shows" and does not pay for "no load" miles.

[Note (1): Brokers are required to maintain all documentation related to the state contract for brokerage services (e.g., operating a call center; verifying eligibility; assigning trips to lowest-cost, appropriate mode and provider of transportation; managing subcontracts including vehicle inspections and reviewing driver background checks; and reviewing subcontractor invoices for the direct transportation services.)]

[Note (2): The brokers' subcontracted transportation providers are required to maintain all documentation related to the provision of the direct transportation service. The transportation providers bill the broker in accordance with the subcontract.]

Shared trips: See the description at the end of this Payment Methodology section regarding shared trips and cost allocation.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

Brokers invoice the State:

The brokers invoice the State; the invoice is due the 20th of the month following the month of service. The invoices contain separate line item amounts for:

- (1) the broker's contracted monthly payment (see description of "Administrative Costs"), which are detailed by accounting codes (allocated based on the number of trips) to funding source (e.g., Medicaid vs. non-Medicaid, and further detailed by specific medical assistance program); and
- (2) transportation provider expenses (see description of "Direct Service Costs"), which are detailed by accounting codes to funding source (e.g., Medicaid vs. non-Medicaid, and further detailed by specific medical assistance program).

The invoice includes back-up documentation and comprehensive trip data reports. These reports include, but are not limited to: trips and costs by mode, by program serviced, most costly clients, and by subcontracted transportation provider.

The State pays the brokers, which then pay the transportation providers:

The State pays the broker for the broker "Administrative Costs", which the broker retains. The State pays the brokers for the "pass-through" expenses for payment to the transportation provider (the "Direct Service Costs"). Brokers are required to remit payment to subcontractors no later than ten (10) calendar days after receipt of the reimbursement from the State for allowed claims performed under the NEMT contract.

The State submits the required information for Medicaid-eligible services on the CMS 64 form.**Shared rides and cost allocation:**

The trips provided under the State contract with brokers are predominately for Medicaid clients going to Medicaid-covered services (in CY2011, these accounted for 97.6% of trips).

The majority of brokered trips are provided on an "individual" basis, and costs are direct-charged to the client's respective medical assistance program. Shared rides are used when cost-effective, available, and appropriate; in some geographic areas shared rides are the only available resource other than gas vouchers or mileage reimbursement. Most shared rides are with other Medicaid passengers. Non-Medicaid trips, which are shared with others, accounted for less than 0.28% of all brokered trips. Proper accounting is done by coding trips according to the correct funding source, and the client's respective medical assistance program.

The State policy for broker allocation of costs of shared rides, when Medicaid is not the primary payor for all riders, is that Medicaid funds shall not subsidize the cost of non-Medicaid trips, and that the cost to Medicaid shall not increase because of the shared rides.

The State ensures that Medicaid is being appropriately charged for shared rides by requiring a broker to have an allocation methodology, monitoring the broker use/application of the allocation methodology, and testing sample sets of the costs of shared rides (Medicaid vs. non-Medicaid).

Until a consistent statewide allocation methodology is feasible, the State will require brokers submit a proposed allocation methodology for State review/approval. For brokers that use a manual calculation process (or a formula outside the software system), the State will review the various methods, and adopt a methodology to be used by these brokers. For brokers that use a process built into their software systems, the State will review the various methods supported by the software systems, and work with brokers to utilize the methodology which has the best results to prevent Medicaid subsidizing the cost of non-Medicaid trips.

The State will monitor broker application of the approved allocation methodology.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

(C) What is the source of the non-Federal share of transportation payments?

Instructions:

Describe the source of the non-Federal share of the transportation payments proposed under this State plan amendment. If more than one source exists to fund the non-Federal share of the transportation payments, please separately identify each source of non-Federal share funding.

The source of the non-Federal share of the transportation payments is State general funds.

(D) The State 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 transportation broker to contract for transportation services at a lesser rate and credit any savings to the program.

(E) The State assures that payment proposed under this State plan amendment will be made directly to transportation providers and that the transportation provider payments are fully retained by the transportation providers and no agreement (contractual or otherwise) exists between the State or local government and the transportation provider to return or redirect any of the Medicaid payment to the State or form of local government (indirectly or directly).

/X/ (7) The broker is a non-governmental entity:

/X/ The broker 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 45 CFR 440.170(4)(ii).

/ / The broker is itself a provider of transportation or subcontracts with or refers to an entity with which it has a prohibited financial relationship and:

(i) / / Transportation is provided in a rural area as defined at 412.62(f) and there is no other available Medicaid participating provider or other provider determined by the State to be qualified except the non-governmental broker.

(ii) / / Transportation is so specialized that there is no other available Medicaid participating provider or other provider determined by the State to be qualified except the non-governmental broker.

(iii) / / The availability of other non-governmental Medicaid participating providers or other providers determined by the State to be qualified is insufficient to meet the need for transportation.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

// (8) The broker is a governmental entity and provides transportation itself or refers to or subcontracts with another governmental entity for transportation. The governmental broker will:

// Maintain an accounting system such that all funds allocated to the Medicaid brokerage program and all costs charged to the Medicaid brokerage will be completely separate from any other program.

// Document that with respect to each individual beneficiary's specific transportation needs, the governmental provider is the most appropriate and lowest cost alternative.

// Document that the Medicaid program is paying no more for fixed route public transportation than the rate charged to the general public and no more for public paratransit services than the rate charged to other State human services agencies for the same service.

(9) /X/ Please describe how the NEMT brokerage program operates.

Instructions:

Describe how the Brokerage program will operate. Include the services that will be provided by the broker. If applicable, describe any services that will not be provided by the broker and name the entity that will provide these services.

Non-governmental brokers serving the following contract regions are all private non-profit 501(c)3 organizations: Regions:

- 1A, 3B, 4, 5, 6B and 6C (approved in SPA 08-028, effective 10/01/2008)
- 1B, 1C, 1D, 1E, and 2 (effective 01/01/2011)
- 6A (effective 04/01/2011)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

Description:

The State contracts with regional brokers:

The State of Washington operates the non-emergency medical transportation (NEMT) brokerage program through contracts with regional brokers, in accordance with federal regulations.

Brokers operate customer service centers and interact with eligible Medicaid clients requesting transportation access to eligible Medicaid services – trips are authorized only after brokers verify client eligibility and determine that clients do not have other transportation resources/options.

Brokers verify eligibility. The State provides brokers with a means of looking up client eligibility; the data includes the proper account codes to be used for a specific client's medical assistance program (e.g., there are approximately 40 sets of account codes, tied to specific medical assistance programs, and differentiate whether the client is on a Medicaid-funded or state-funded program, has managed care or not, or are dual eligible). This information is retained at the broker level, and is not passed to the subcontracted transportation providers. The use of account codes helps ensure that Medicaid is charged only for allowable costs.

To directly save Medicaid medical funds (and as examples), brokers may authorize trips to Veterans' Hospitals and Shriners' Hospitals, and for services where Medicare and/or private insurance is primary and Medicaid coverage is secondary.

Brokers subcontract with transportation providers:

The brokers are responsible to develop a network of providers, using a fair and clear contracting process, through the use of subcontracts, that establish a competitive marketplace with a variety of service providers for each mode of transportation (e.g., ambulatory and nonambulatory trips). The subcontracts must be in writing, and must include state requirements (reference contract exhibit for "Subcontracts with Transportation Service Providers"); subcontracts must include payment method, rates, and the State's minimum quality standards (e.g., standards for transport vehicles, drivers, and transportation performance).

Trip assignments:

Brokers assign trips to the most appropriate and cost-effective available transportation services subcontractor based on each client's mobility status and personal capabilities. Brokers utilize low cost options first, such as fixed route tickets/passes, gas reimbursement, mileage reimbursement, and only authorize higher cost options such as taxi and wheelchair lift-equipped vehicles based on the individual needs of clients. The State does not pay for no-load miles.

Monitoring of NEMT program:

State monitoring: The State monitors the NEMT program through multiple efforts:

- Monthly desk audits
- Monthly review of brokers invoices and reports, and backup documentation:
 - A rates table for all subcontractors
 - The number of trips by mode and total dollar cost, by subcontractor
 - A complaints/grievance summary report, by category, by subcontractor
- Ongoing review of NEMT trips – brokers submit a monthly file of trip-level details, including assigned subcontractor, to the State's electronic NEMT trips database (used by NEMT staff as part of daily operations)
- Review broker reports of incidents and accident (part of daily operations)
- Review of brokers' subcontracts with transportation providers (as needed, either by electronic submission or on-site review)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

- Review of fleet inventories, by subcontractor – twice annually
- Review of an inspection schedule which lists, by subcontractor, the last date inspected and the next scheduled inspection date – twice annually.
- Review of financial and operating reports – annually
- Reviewed brokers independent audits
- Random sample review of trips from the State's NEMT trips database to ensure compliance with Medicaid rules and regulations. Focused review of trips as needed.
- On-site monitoring. During 2011 the State conducted an on-site monitoring visit and reviewed the following for a random sample of trips: billing, vehicle insurance documentation, vehicle inspection reports, driver documentation (e.g., background check, driver's license, Department of Licensing "Abstract of Driving Record", training certifications).

In addition, the State contractually requires brokers to conduct a percentage of pre-trip and post-trip verifications of appointments for Medicaid covered services.

The quantity and quality of trip/cost data facilitates State cost containment initiatives, as well as program oversight and management. As a result, Washington NEMT operates at one of the lowest estimated per capita costs in the country.

Complaint resolution and client appeal rights:

All Brokers are required to have staff that provides an ombudsman function, so that clients can get resolution at the broker level.

The State reviews complaints from clients, healthcare providers, and transportation providers. Complaints come in through a state customer service center (toll-free number), the NEMT website, direct phone calls, and inquiries from constituent services liaisons. State NEMT staff review complaints, resolve issues when possible, or provide explanation if customer expectations exceed program rules (e.g., client wants to choose provider).

Clients have the right to request a fair hearing, except in relation to provisions that are inapplicable under 42 CFR 440.170. Fair hearings are conducted before an impartial administrative law judge in accordance with the State's administrative hearings procedures (the same process as for other Medicaid healthcare services). Following an initial decision, clients have appeal rights to a Board of Appeals.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

(b) Governmental entities

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

/X/ (1) state-wideness (indicate areas of State that are covered)
Broker region (approved in SPA 08-028, effective 10/01/2008):
3A: *Island, San Juan, Skagit, and Whatcom counties*

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

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

- (2) Transportation services provided will include:

/X/ Wheelchair van
/X/ Taxi
/X/ Stretcher car
/X/ Bus passes
/X/ Tickets
/X/ Secured transportation
/X/ Other transportation

Instructions:

Describe other transportation: When cost- effective, appropriate, and necessary to ensure access to eligible medical services, will consider using/authorizing gas/fuel vouchers, mileage reimbursement, grouped-ride vehicle, volunteer drivers, parking, tolls, ferries, and air transport, and will provide lodging and meal reimbursement as outlined at 42 CFR 440.170(a)(3)(ii).

[Note: Grouped or shared ride vehicles are a cost-effective method to transport groups of clients with similar trip origins and destinations, or more than one client in a locale similar to an airport shuttle. Brokers pay transportation subcontractors on a contracted mileage-based or time-based system; costs are allocated equitably to the clients' specific medical program account codes.]

See response at ATTACHMENT 3.1-A, 24.a.(a)(2) (Transportation services provided will include), Page 62

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

- (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, qualifications, and costs;
 - (ii) has oversight procedures to monitor beneficiary access and complaints and ensures that transportation is timely and 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 and timeliness 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 referral 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.)
- (4) The broker contract will provide transportation to the following categorically needy mandatory populations:
- /X/ Low-income families with children (section 1931)
 - /X/ Deemed AFDC-related eligibles
 - /X/ Poverty-level-related pregnant women
 - /X/ Poverty-level-related infants
 - /X/ Poverty-level children 1 through 5
 - /X/ Poverty-level children 6 through 18
 - /X/ Qualified pregnant women AFDC-related
 - /X/ Qualified children AFDC-related
 - /X/ IV-E foster care and adoption assistance children
 - /X/ TMA recipients (due to employment)(section 1925)
 - /X/ TMA recipients (due to child support)
 - /X/ SSI recipients

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

- (5) The broker contract will provide transportation to the following categorically needy optional populations:
- /X/ Optional poverty-level-related pregnant women
 - /X/ Optional poverty-level-related infants
 - /X/ Optional targeted low-income children
 - /X/ Non-IV-E children who are under State adoption assistance agreements
 - /X/ Non-IV-E independent foster care adolescents who were in foster care on their 18th birthday.
 - /X/ Individuals who meet income and resource requirements of AFDC or SSI
 - /X/ Individuals who would meet the income and 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 the State plan had been as broad as allowed under Federal law
 - /X/ Children aged 15 through 20 who meet AFDC income and resource requirements
 - /X/ Individuals who would be eligible for AFDC or SSI if they were not in a medical institution
 - /X/ Individuals infected with TB
 - /X/ Individuals screened for breast or cervical cancer by CDC program
 - // Individuals receiving COBRA continuation benefits
 - /X/ Individuals in a special income level group, in a medical institution for at least 30 consecutive days, with gross income not exceeding 300% of the SSI income standard
 - /X/ Individuals receiving home and community based waiver services who would only be eligible under the State plan if in a medical institution (NEMT is provided to 1905(a) services but not to 1915(c) waived services (e.g., socialization, work training, etc.))
 - /X/ Individuals terminally ill if in a medical institution and will receive hospice care
 - /X/ Individuals aged or disabled with income not above 100% FPL
 - /X/ Individuals working disabled who buy into Medicaid (BBA working disabled group)
 - /X/ Employed medically improved individuals who buy into Medicaid under TWWIIA Medical Improvement Group
 - // Individuals disabled aged 18 or younger who would require an institutional level of care (TEFRA 134 kids)
- (6) Payment Methodology
- (A) The State will pay the contracted broker by the following method:
- // (i) Risk capitation
 - // (ii) Non-risk capitation
 - /X/ (iii) Other (e.g., brokerage fee and direct payment to providers)
- (B) Who will pay the transportation provider?
- /X/ (i) Broker
 - // (ii) State
 - // (iii) Other

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

Instructions:

Describe who will pay the transportation provider.

See response at ATTACHMENT 3.1-A, 24.a.(a) (6) Payment Methodology, Page 62

(C) What is the source of the non-Federal share of transportation payments?

Instructions:

Describe the source of the non-Federal share of the transportation payments proposed under this State plan amendment. If more than one source exists to fund the non-Federal share of the transportation payments, please separately identify each source of non-Federal share funding.

The source of the non-Federal share of the transportation payments is State general funds.

(D) The State 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 transportation broker to contract for transportation services at a lesser rate and credit any savings to the program.

(E) The State assures that payment proposed under this State plan amendment will be made directly to transportation providers and that the transportation provider payments are fully retained by the transportation providers and no agreement (contractual or otherwise) exists between the State or local government and the transportation provider to return or redirect any of the Medicaid payment to the State or form of local government (indirectly or directly).

// (7) The broker is a non-governmental entity:

// The broker 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 45 CFR 440.170(4)(ii).

// The broker is itself a provider of transportation or subcontracts with or refers to an entity with which it has a prohibited financial relationship and:

(i) // Transportation is provided in a rural area as defined at 412.62(f) and there is no other available Medicaid participating provider or other provider determined by the State to be qualified except the non-governmental broker.

(ii) // Transportation is so specialized that there is no other available Medicaid participating provider or other provider determined by the State to be qualified except the non-governmental broker.

(iii) // The availability of other non-governmental Medicaid participating providers or other providers determined by the State to be qualified is insufficient to meet the need for transportation.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

/X/ (8) The broker is a governmental entity and provides transportation itself or refers to or subcontracts with another governmental entity for transportation. The governmental broker will:

/X/ Maintain an accounting system such that all funds allocated to the Medicaid brokerage program and all costs charged to the Medicaid brokerage will be completely separate from any other program.

/X/ Document that with respect to each individual beneficiary's specific transportation needs, the governmental provider is the most appropriate and lowest cost alternative.

/X/ Document that the Medicaid program is paying no more for fixed route public transportation than the rate charged to the general public and no more for public paratransit services than the rate charged to other State human services agencies for the same service.

(9) /X/ Please describe how the NEMT brokerage program operates.

Instructions:

Describe how the Brokerage program will operate. Include the services that will be provided by the broker. If applicable, describe any services that will not be provided by the broker and name the entity that will provide these services.

Governmental broker serving region 3A.

The broker serving Region 3A is a governmental entity (a council of governments) and serves Island, San Juan, Skagit, and Whatcom counties. This broker does not directly provide trips, but does purchase trips on two public transit system (in Skagit and Whatcom counties). This broker also authorizes trips using other available modes of transportation as listed in Section (2).

(A) The State pays for direct transportation expenses (e.g., cost of the trips by subcontracted transportation providers, bus tickets, gas vouchers) per detailed report. The State pays separately for the governmental broker's cost of operating the brokerage (call center, etc.), on a set monthly amount basis.

The governmental broker maintains an accounting system such that all funds allocated to the Medicaid brokerage program and all costs charged to the Medicaid brokerage will be completely separate from any other program. The governmental broker maintains an accounting system as required by this authority. The broker is both required by law and committed to assuring that all agency costs are allocated to the appropriate activity and fund source. All costs clearly attributable to a specific activity and fund source are directly charged to that fund source. Activities which benefit all programs operated by the organization are allocated based upon a cost allocation plan (this applies to a portion of the broker's cost of operating the brokerage).

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a. Transportation (cont)

- (B) The governmental broker has a procedure related to evaluating each individual beneficiary's specific needs and making a determination related to the most appropriate, lowest cost trip, with a specific focus on the procedure related to governmental providers (i.e., public transit). These determinations are made on a case-by-case basis each month.
- (C) For Medicaid beneficiaries, the governmental broker pays the same rate/fare as the general public pays for all fixed route transportation. The cost of the bus pass may not exceed the total cost of all trips a beneficiary would make to Medicaid providers to obtain Medicaid services, were the trips purchased individually. The governmental broker also pays the same rate as the general public for paratransit trips, which is no more than human service agencies pay for the service. The public rates are utilized in determining whether public transit will be the most appropriate low cost service for a specific beneficiary's needs in any given month. In general, public transit trips in the broker's regions are significantly lower in cost than other modes of transportation available.

For additional information see "Description" at ATTACHMENT 3.1-A, 24.a.(a) (9) (how the NEMT brokerage program operates), Page 62

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTONAMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED TO THE
MEDICALLY NEEDY GROUP(S): ALL

23. a. Transportation

Ambulance transportation is provided as a medical service for emergencies, for scheduled non-emergencies when medically necessary, or as required by state law. Ambulance transportation is not provided through a brokerage system.

See Attachment 4.19-B, IX.C for reimbursement information.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

23. a.(a) Transportation (cont)

Transportation is provided in accordance with 42 CFR 440.170 as an optional medical service, excluding "school-based" transportation.

// Not Provided:

// Provided without a broker as an optional medical service:

(If state attests "Provided without a broker as an optional medical service" then insert supplemental information.)

Instructions:

Describe how the transportation program operates including types of transportation and transportation-related services provided and any limitations. Describe emergency and non-emergency transportation services separately. Include any interagency or cooperative agreements with other Agencies or programs.

/X/ Non-emergency transportation is provided through a brokerage program as an optional medical service in accordance with 1902(a)(70) of the Social Security Act and 42 CFR 440.170(a)(4).

(If the state attests that non-emergency transportation is being provided through a brokerage program then insert information about the brokerage program.)

Instructions:

/X/ The State assures it has established a non-emergency medical transportation program in accordance with 1902(a)(70) of the Social Security Act in order to more cost-effectively provide transportation, and can document, upon request from CMS, that the transportation broker was procured in compliance with the requirements of 45 CFR 92.36(b)-(i).

See response at ATTACHMENT 3.1-A 24.a.(a) (information about the brokerage program), Page 62__.

(a) Non-governmental entity

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

// (1) state-wideness (indicate areas of State that are covered)

Broker regions covered by SPA 08-028, approved 08/17/2010, effective 10/01/2008:

1A: *Chelan, Douglas, and Okanogan counties*

3B: *Snohomish County*

4: *King County*

5: *Pierce County*

6B: *Grays Harbor, Lewis, Mason-south, Pacific, and Thurston counties*

6C: *Clark, Cowlitz, Klickitat, Skamania, and Wahkiakum counties*

Broker regions covered by SPA 11-11, effective 01/01/2011:

1B: *Ferry, Pend Oreille, and Stevens counties*

1C: *Adams, Grant, and Lincoln counties*

1D: *Spokane County*

1E: *Asotin, Garfield, and Whitman counties*

2: *Benton, Columbia, Franklin, Kittitas, Walla Walla, and Yakima counties*

Broker region covered by SPA 11-11, effective 04/01/2011:

6A: *Clallam, Jefferson, Kitsap, and Mason-north counties*

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

23. a.(a) Transportation (cont)

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

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

(2) Transportation services provided will include:

/X/ Wheelchair van
/X/ Taxi
/X/ Stretcher car
/X/ Bus passes
/X/ Tickets
/X/ Secured transportation
/X/ Other transportation

Instructions:

Describe other transportation: When cost-effective, appropriate, and necessary to ensure access to eligible medical services, will consider using/authorizing gas/fuel vouchers, mileage reimbursement, grouped-ride vehicle, volunteer drivers, parking, tolls, ferries, and air transport, and will provide lodging and meal reimbursement as outlined at 42 CFR 440.170(a)(3)(ii).

[Note: Grouped or shared ride vehicles are a cost-effective method to transport groups of clients with similar trip origins and destinations, or more than one client in a locale similar to an airport shuttle. Brokers pay transportation subcontractors on a contracted mileage-based or time-based system; costs are allocated equitably to the clients' specific medical program account codes.]

See response at ATTACHMENT 3.1-A, 24.a.(a)(2) (Transportation services provided will include), Page 62

(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, qualifications, and costs;

(ii) has oversight procedures to monitor beneficiary access and complaints and ensures that transportation is timely and 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 and timeliness of the transportation services provide and the adequacy of beneficiary access to medical care and services;

(iv) complies with such requirements related to prohibitions on referral 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.)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

23. a. Transportation (cont)

(4) The broker contract will provide transportation to the following medically needy populations:

- /X/ Children under age 21, or under age 20, 19, or 18 and reasonable classifications as the State may choose.
- / / Parents or other caretaker relatives with whom a child is living if child is a dependent child.
- /X/ Aged (65 years of age or older)
- /X/ Blind
- /X/ Disabled
- /X/ Permanently or totally disabled individuals 18 or older, under title XVI
- /X/ Persons essential to recipients under title I, X, XIV, or XVI
- /X/ Blind or disabled as defined in section 1614 with respect to States not eligible to participate in the State plan program under title XVI
- /X/ Pregnant women
- /X/ Newborns

(5) Payment Methodology

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

- / / (i) Risk capitation
- / / (ii) Non-risk capitation
- /X/ (iii) Other (e.g., brokerage fee and direct payment to providers)

(B) Who will pay the transportation provider?

- /X/ (i) Broker
- / / (ii) State
- / / (iii) Other

Instructions:

Describe who will pay the transportation provider.

See response at ATTACHMENT 3.1-A, 24.a.(a) (6) Payment Methodology, Page 62

(C) What is the source of the non-Federal share of transportation payments?

Instructions:

Describe the source of the non-Federal share of the transportation payments proposed under this State plan amendment. If more than one source exists to fund the non-Federal share of the transportation payments, please separately identify each source of non-Federal share funding.

The source of the non-Federal share of the transportation payments is State general funds.

- (D) The State 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 transportation broker to contract for transportation services at a lesser rate and credit any savings to the program.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

23. a.(a) Transportation (cont)

- (E) The State assures that payment proposed under this State plan amendment will be made directly to transportation providers and that the transportation provider payments are fully retained by the transportation providers and no agreement (contractual or otherwise) exists between the State or local government and the transportation provider to return or redirect any of the Medicaid payment to the State or form of local government (indirectly or directly).

/X/ (6) The broker is a non-governmental entity:

/X/ The broker 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 45 CFR 440.170(4)(ii).

// The broker is itself a provider of transportation or subcontracts with or refers to an entity with which it has a prohibited financial relationship and:

(i) // Transportation is provided in a rural area as defined at 412.62(f) and there is no other available Medicaid participating provider or other provider determined by the State to be qualified except the non-governmental broker.

(ii) // Transportation is so specialized that there is no other available Medicaid participating provider or other provider determined by the State to be qualified except the non-governmental broker.

(iii) // The availability of other non-governmental Medicaid participating providers or other providers determined by the State to be qualified is insufficient to meet the need for transportation.

// (7) The broker is a governmental entity and provides transportation itself or refers to or subcontracts with another governmental entity for transportation. The governmental broker will:

// Maintain an accounting system such that all funds allocated to the Medicaid brokerage program and all costs charged to the Medicaid brokerage will be completely separate from any other program.

// Document that with respect to each individual beneficiary's specific transportation needs, the governmental provider is the most appropriate and lowest cost alternative.

// Document that the Medicaid program is paying no more for fixed route public transportation than the rate charged to the general public and no more for public paratransit services than the rate charged to other State human services agencies for the same service.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

23. a.(a) Transportation (cont)

(8) ☒ Please describe how the NEMT brokerage program operates.

Instructions:

Describe how the Brokerage program will operate. Include the services that will be provided by the broker. If applicable, describe any services that will not be provided by the broker and name the entity that will provide these services.

Non-governmental brokers serving the following contract regions are all private non-profit 501(c)3 organizations: Regions:

- 1A, 3B, 4, 5, 6B and 6C (approved in SPA 08-028, effective 10/01/2008)
- 1B, 1C, 1D, 1E, and 2 (effective 01/01/2011)
- 6A (effective 04/01/2011)

For additional information see "Description" at ATTACHMENT 3.1-A, 24.a.(a) (9) (how the NEMT brokerage program operates), Page 62 [REDACTED].

(b) Governmental entities

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

☒ (1) state-wideness (indicate areas of State that are covered)
Broker region (approved in SPA 08-028, effective 10/01/2008):
3A: *Island, San Juan, Skagit, and Whatcom counties*

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

☒ (23) freedom of choice (indicate mandatory population groups)

- (2) Transportation services provided will include:

☒ Wheelchair van
☒ Taxi
☒ Stretcher car
☒ Bus passes
☒ Tickets
☒ Secured transportation
☒ Other transportation

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

23. a. Transportation (cont)

Instructions:

Describe other transportation: When cost-effective, appropriate, and necessary to ensure access to eligible medical services, will consider using/authorizing gas/fuel vouchers, mileage reimbursement, grouped-ride vehicle, volunteer drivers, parking, tolls, ferries, and air transport, and will provide lodging and meal reimbursement as outlined at 42 CFR 440.170(a)(3)(ii).

[Note: Grouped or shared ride vehicles are a cost-effective method to transport groups of clients with similar trip origins and destinations, or more than one client in a locale similar to an airport shuttle. Brokers pay transportation subcontractors on a contracted mileage-based or time-based system; costs are allocated equitably to the clients' specific medical program account codes.]

See response at ATTACHMENT 3.1-A, 24.a.(a) (2) (Transportation services provided will include), Page 62

- (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, qualifications, and costs;
 - (ii) has oversight procedures to monitor beneficiary access and complaints and ensures that transportation is timely and 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 and timeliness 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 referral 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).
- (4) The broker contract will provide transportation to the following medically needy populations:
- /X/ Children under age 21, or under age 20, 19, or 18 and reasonable classifications as the State may choose.
 - / / Parents or other caretaker relatives with whom a child is living if child is a dependent child.
 - /X/ Aged (65 years of age or older)
 - /X/ Blind
 - /X/ Disabled
 - /X/ Permanently or totally disabled individuals 18 or older, under title XVI
 - /X/ Persons essential to recipients under title I, X, XIV, or XVI
 - /X/ Blind or disabled as defined in section 1614 with respect to States not eligible to participate in the State plan program under title XVI
 - /X/ Pregnant women
 - /X/ Newborns

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

23. a. (b) Transportation (cont)

(5) Payment Methodology

- (A) 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)
- (B) Who will pay the transportation provider?
- ☒ (i) Broker
 - ☐ (ii) State
 - ☐ (iii) Other

Instructions:

Describe who will pay the transportation provider.

See response at ATTACHMENT 3.1-A, 24.a.(a) (6) Payment Methodology, Page XXXX

(C) What is the source of the non-Federal share of transportation payments?

Instructions:

Describe the source of the non-Federal share of the transportation payments proposed under this State plan amendment. If more than one source exists to fund the non-Federal share of the transportation payments, please separately identify each source of non-Federal share funding.

The source of the non-Federal share of the transportation payments is State general funds.

- (D) The State 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 transportation broker to contract for transportation services at a lesser rate and credit any savings to the program.
- (E) The State assures that payment proposed under this State plan amendment will be made directly to transportation providers and that the transportation provider payments are fully retained by the transportation providers and no agreement (contractual or otherwise) exists between the State or local government and the transportation provider to return or redirect any of the Medicaid payment to the State or form of local government (indirectly or directly).

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

23. a. (b) Transportation (cont)

/ / (7) The broker is a non-governmental entity:

/ / The broker 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 45 CFR 440.170(4)(ii).

/ / The broker is itself a provider of transportation or subcontracts with or refers to an entity with which it has a prohibited financial relationship and:

(i) / / Transportation is provided in a rural area as defined at 412.62(f) and there is no other available Medicaid participating provider or other provider determined by the State to be qualified except the non-governmental broker.

(ii) / / Transportation is so specialized that there is no other available Medicaid participating provider or other provider determined by the State to be qualified except the non-governmental broker.

(iii) / / The availability of other non-governmental Medicaid participating providers or other providers determined by the State to be qualified is insufficient to meet the need for transportation.

/X/ (8) The broker is a governmental entity and provides transportation itself or refers to or subcontracts with another governmental entity for transportation. The governmental broker will:

/X/ Maintain an accounting system such that all funds allocated to the Medicaid brokerage program and all costs charged to the Medicaid brokerage will be completely separate from any other program.

/X/ Document that with respect to each individual beneficiary's specific transportation needs, the governmental provider is the most appropriate and lowest cost alternative.

/X/ Document that the Medicaid program is paying no more for fixed route public transportation than the rate charged to the general public and no more for public paratransit services than the rate charged to other State human services agencies for the same service.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

24. a.(b) Transportation (cont)

(9) /X/ Please describe how the NEMT brokerage program operates.

Instructions:

Describe how the Brokerage program will operate. Include the services that will be provided by the broker. If applicable, describe any services that will not be provided by the broker and name the entity that will provide these services.

Governmental broker serving region 3A.

The broker serving Region 3A is a governmental entity (a council of governments) and serves Island, San Juan, Skagit, and Whatcom counties. This broker does not directly provide trips, but does purchase trips on two public transit systems (in Skagit and Whatcom counties). This broker also authorizes trips using other available modes of transportation as listed in Section (2).

- (A) The State pays for direct transportation expenses (e.g., cost of the trips by subcontracted transportation providers, bus tickets, gas vouchers) per detailed report. The State pays separately for the governmental broker's cost of operating the brokerage (call center, etc.), on a set monthly amount basis.

The governmental broker maintains an accounting system such that all funds allocated to the Medicaid brokerage program and all costs charged to the Medicaid brokerage will be completely separate from any other program. The governmental broker maintains an accounting system as required by this authority. The broker is both required by law and committed to assuring that all agency costs are allocated to the appropriate activity and fund source. All costs clearly attributable to a specific activity and fund source are directly charged to that fund source. Activities which benefit all programs operated by the organization are allocated based upon a cost allocation plan (this applies to a portion of the broker's cost of operating the brokerage).

- (B) The governmental broker has a procedure related to evaluating each individual beneficiary's specific needs and making a determination related to the most appropriate, lowest cost trip, with a specific focus on the procedure related to governmental providers (i.e., public transit). These determinations are made on a case-by-case basis each month.

- (C) For Medicaid beneficiaries, the governmental broker pays the same rate/fare as the general public pays for all fixed route transportation. The cost of the bus pass may not exceed the total cost of all trips a beneficiary would make to Medicaid providers to obtain Medicaid services, were the trips purchased individually. The governmental broker also pays the same rate as the general public for paratransit trips, which is no more than human service agencies pay for the service. The public rates are utilized in determining whether public transit will be the most appropriate low cost service for a specific beneficiary's needs in any given month. In general, public transit trips in the broker's regions are significantly lower in cost than other modes of transportation available.

For additional information see "Description" at ATTACHMENT 3.1-A, 24.a.(b) (9) (how the NEMT brokerage program operates), Page 62.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

METHODS OF ASSURING TRANSPORTATION

Non-emergency medical transportation is provided as an optional medical service in accordance with 42 CFR 440.170(a)(4) in all areas of the State of Washington with the exception of Region 6A (Clallam, Jefferson, Kitsap, and Mason-north counties) which was provided as an administrative activity until 3/31/2011. After 4/1/11 see Attachment 3.1-A, 24(a) Non-governmental entities.