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State Name: Maryland

State Plan Amendment (SPA) #: 26-0002

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS-179 Form
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

601 E. 12th St., Room 355

Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

May 20, 2026

Perrie Briskin
Medicaid Director
Maryland Department of Health
201 W. Preston St., 5th Floor
Baltimore, MD 21201

Re: Maryland State Plan Amendment (SPA) - 26-0002

Dear Medicaid Director Briskin:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 26-0002. This amendment proposes to implement a requirement that the Non-Emergency Medical Transportation (NEMT) program cover related travel expenses to include lodging and meals for non-emergency transportation services.

We conducted our review of your submittal according to statutory requirements, section 1902(a)(4)(A), in Title XIX of the Social Security Act and implementing regulations 42 CFR §431.53. This letter informs you that Maryland's Medicaid SPA TN 26-0002 was approved on May 20, 2026, effective January 1, 2026.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the Maryland State Plan.

If you have any questions, please contact Talbatha Myatt at (215) 861-4259 or via email at Talbatha.Myatt@cms.hhs.gov.

Sincerely,



Nicole McKnight, Acting Division Director
Division of Program Operations

Enclosures

cc: Perrie Briskin
Tyler Colomb

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 6 — 0 0 0 2

2. STATE

MD3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL
SECURITY ACT

XIX



XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

January 1, 2026

5. FEDERAL STATUTE/REGULATION CITATION

~~42 CFR 447 Subpart I~~ **42 CFR §431.53**

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2026 \$ 0 **\$428,278.58**b. FFY 2027 \$ 0 **\$414,577.22**

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1D Page 1-3 (26-0002)

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)

Attachment 3.1D Page 1-3 (21-0012)

9. SUBJECT OF AMENDMENT

This SPA implements a requirement that the Non-Emergency Medical Transportation (NEMT) program cover related travel expenses to include lodging and meals for non-emergency transportation services.

10. 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:

11. SIGNATURE OF AGENCY OFFICIAL

12. TYPED NAME

Perrie Briskin

13. TITLE

Deputy Medicaid Director

14. DATE SUBMITTED

15. RETURN TO

Perrie Briskin

Medicaid Director

Maryland Department of Health

201 W. Preston St., 5th Floor

Baltimore, MD 21201

FOR CMS USE ONLY

16. DATE RECEIVED

March 31, 2026

17. DATE APPROVED

May 20, 2026

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

January 1, 2026

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Nicole McKnight

21. TITLE OF APPROVING OFFICIAL

Acting Director for Division of Program Operations

22. REMARKS

4-6-26-state requested pen and ink change to update Box 5 Federal/Statute regulation citation
5-19-26-state approved pen and ink change to update Box 6 Federal Budget Impact

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE OF MARYLAND

Non-Emergency Medical Transportation

- A. The Transportation Grants program is funded as an administrative expense under an approved cost allocation plan (CAP). This program awards grants to local jurisdiction agencies, acting as agents of the State, to administer non-emergency transportation services to recipients. Transportation services are provided to assure access to and from providers as required in “42 CFR §431.53” and are available to all eligible and qualified Medicaid recipients. The Department attests that all the minimum requirements outlined in 1902(a)(87) of the Social Security Act are met. An eligible recipient may access providers via wheelchair vans, taxis, ambulances, air medical transportation, bus passes and tickets, and other forms of transportation methods approved by the Department. Recipients may access services by contacting their local jurisdiction agency for screening to determine service eligibility.

Grantees enter into contractual agreements to provide medically necessary non-emergency transportation to covered services for recipients residing in the county. Services are provided to both full fee-for-service recipients and managed care recipients. Through a combination of on-site visits, meetings, and documentation, each jurisdiction engages their contracted providers in a vendor oversight program that includes ensuring the contractors and employees are not excluded from receiving federal and State funds, and are maintaining the minimum requirements for vehicles, drivers, licensing, traffic violations, state drug laws, does not appear on the list of excluded parties of the Inspector General of the Department of Health and Human Services, and maintains our standards of customer service.

Maryland does not provide Transportation Services using Transportation Network Companies such as Lyft or Uber. Grantees are responsible for screening requests for transportation by recipients, arranging transportation, expanding existing and developing new transportation resources, and purchasing or providing transportation services where necessary. Subsequent to determining service eligibility, Grantees will use screening information and physician documentation to assess the mode of transport and communicate the least costly mode to its vendor. Screening services and transportation services must be performed by separate entities. When transportation is provided through the local jurisdiction, Grantees may perform both functions.

Ambulance providers are required to be licensed by the State Office of Commercial Ambulance Licensing and Regulation. These agencies provide regulatory oversight for the drivers and set vehicle safety standards. A family member may not be a provider as he/she is considered as a

primary resource for transportation.

Services for medical necessary ambulance transportation and for Individuals with Disabilities Education Act (IDEA) are found in Attachment 3.1A pg 30-30A and Attachment 4.19B.

B. Maryland's NEMT program covers related travel expenses listed below:

- (1) The cost of meals for the beneficiary while traveling to or from covered services and while receiving medical care when determined necessary by the state to secure covered services.
- (2) The cost of lodging for the beneficiary when transportation to and from a covered Medicaid service requires overnight travel and is determined to be medically necessary.
- (3) If B(1) and B(2) are met, the cost of an attendant to accompany the beneficiary, including the cost of the attendant's transportation, meals, lodging, and, if the attendant is not a member of the beneficiary's family, salary.

The need for meals and lodging must be established prior to travel, supported by provider documentation, and approved by the local jurisdiction agencies. Reimbursement for meals and lodging may be considered without prior approval in extraordinary circumstances at the discretion of the department or local jurisdiction agency.

Payment is not made for gratuities, alcoholic beverages, entertainment, or non-essential services and supplies.

All other provisions and exclusions of the Transportation Grant Program continue to apply.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE OF MARYLAND

Non-Emergency Medical Transportation

C. Grant funds allocated for non-emergency medical transportation (NEMT) under the state plan are prohibited for the following expenses.

1. Emergency transportation services;
2. Medicare ambulance services;
3. Transportation to and from non-Medicaid Veterans Administration services;
4. Transportation between a nursing facility and a hospital for routine diagnostic tests, nursing services, or physical therapy which can be performed at the nursing facility;
5. Transportation services from a facility for treatment which the treatment is provided by the facility in which the recipient is located;
6. Transportation to receive nonmedical services;
7. Gratuities of any kind;
8. Transportation between a medical day care facility and the recipient's home;
9. Transportation to or from a State facility while the patient is a resident of that facility;
10. Transportation of non-Medical assistance recipients;
11. Trips for purposes related to education, recreational activities, or employment;
12. Transportation of anyone other than the recipient, except for an attendant accompanying a minor or when an attendant is medically necessary;
13. Wheelchair van service for ambulatory recipients;
14. Ambulance service for a recipient who does not need to be transported on a stretcher;
15. Transportation between a Community Rehabilitation Program (CRP) and the recipient's home;
16. Transportation between a Day Rehabilitation Program and the recipient's home;
17. Transportation to or from services that are not medically necessary; and
18. Transportation to a more distant provider primarily for the convenience of the participant or provider.