

SENATE BILL No. 186

By Committee on Ways and Means

2-10

1 AN ACT relating to reimbursement to eligible providers for medicaid
2 ground emergency medical transportation services.

3
4 *Be it enacted by the Legislature of the State of Kansas:*

5 Section 1. (a) An eligible provider, as described in subsection (b), in
6 addition to the rate of payment that the provider would otherwise receive
7 for medicaid ground emergency medical transportation services, shall
8 receive supplemental medicaid reimbursement to the extent provided by
9 law.

10 (b) A provider shall be eligible for supplemental reimbursement only
11 if the provider meets the following conditions during the state fiscal year:

12 (1) Provides ground emergency medical transportation services to
13 medicaid beneficiaries;

14 (2) is a provider that is enrolled as a medicaid provider for the period
15 being claimed; and

16 (3) is owned or operated by the state, a political subdivision or local
17 government, that employs or contracts with persons who are licensed to
18 provide emergency medical services in the state of Kansas, and includes
19 private entities to the extent permissible under federal law.

20 (c) An eligible provider's supplemental reimbursement pursuant to
21 this section shall be calculated and paid as follows:

22 (1) The supplemental reimbursement to an eligible provider, as
23 described in subsection (b), shall be equal to the amount of federal
24 financial participation received as a result of the claims submitted pursuant
25 to subsection (f)(2);

26 (2) in no instance may the amount certified pursuant to subsection (e)
27 (1), when combined with the amount received from all other sources of
28 reimbursement from the medicaid program, exceed or be less than 100%
29 of actual costs, as determined pursuant to the medicaid state plan, for
30 ground emergency medical transportation services; and

31 (3) the supplemental medicaid reimbursement provided by this
32 section must be distributed exclusively to eligible providers under a
33 payment methodology based on ground emergency medical transportation
34 services provided to medicaid beneficiaries by eligible providers on a per-
35 transport basis or other federally permissible basis. The department of
36 health and environment shall obtain approval from the federal centers for

1 medicare and medicaid services for the payment methodology to be
2 utilized, and shall not make any payment pursuant to this section prior to
3 obtaining that approval.

4 (d) (1) It is the legislature's intent in enacting this section to provide
5 the supplemental reimbursement described in this section without any
6 expenditure from the state general fund. An eligible provider, as a
7 condition of receiving supplemental reimbursement pursuant to this
8 section, shall enter into, and maintain, an agreement with the department
9 for the purposes of implementing this section and reimbursing the
10 department for the costs of administering this section.

11 (2) The nonfederal share of the supplemental reimbursement
12 submitted to the federal centers for medicare and medicaid services for
13 purposes of claiming federal financial participation shall be paid only with
14 funds from the governmental entities described in subsection (b)(3) and
15 certified to the state as provided in subsection (e).

16 (e) Participation in the program by an eligible provider described in
17 this section is voluntary. If an applicable governmental entity elects to seek
18 supplemental reimbursement pursuant to this section on behalf of an
19 eligible provider, the governmental entity shall do the following:

20 (1) Certify, in conformity with the requirements of 42 C.F.R. §
21 433.51, that the claimed expenditures for the ground emergency medical
22 transportation services are eligible for federal financial participation;

23 (2) provide evidence supporting the certification as specified by the
24 department;

25 (3) submit data as specified by the department to determine the
26 appropriate amounts to claim as expenditures qualifying for federal
27 financial participation; and

28 (4) keep, maintain, and have readily retrievable any records specified
29 by the department to fully disclose reimbursement amounts to which the
30 eligible provider is entitled, and any other records required by the federal
31 centers for medicare and medicaid services.

32 (f) The department shall promptly seek any necessary federal
33 approvals for the implementation of this section. The department may limit
34 the program to those costs that are allowable expenditures under title XIX
35 of the federal social security act, 42 U.S.C. § 1396 et seq. If federal
36 approval is not obtained for implementation of this section, this section
37 shall not be implemented.

38 (1) The department shall submit claims for federal financial
39 participation for the expenditures for the services described in subsection
40 (e) that are allowable expenditures under federal law.

41 (2) The department shall submit any necessary materials to the
42 federal government to provide assurances that claims for federal financial
43 participation will include only those expenditures that are allowable under

1 federal law.

2 Sec. 2. (a) The department of health and environment shall design
3 and implement, in consultation and coordination with eligible providers as
4 described in subsection (b), an intergovernmental transfer program relating
5 to medicaid managed care, ground emergency medical transport services
6 and those services provided by emergency medical services personnel at
7 the emergency medical responder, emergency medical technician,
8 advanced emergency medical technician and paramedic levels in the pre-
9 stabilization and preparation for transport in order to increase capitation
10 payments for the purpose of increasing reimbursement to eligible
11 providers.

12 (b) A provider shall be eligible for increased reimbursement pursuant
13 to this section only if the provider meets both of the following conditions
14 in an applicable state fiscal year:

15 (1) Provides ground emergency medical transport services to
16 medicaid managed care enrollees pursuant to a contract or other
17 arrangement with a medicaid managed care plan; and

18 (2) is owned or operated by the state, a political subdivision or local
19 government that employs or contracts with persons who are licensed by
20 the department to provide emergency medical services in the state of
21 Kansas.

22 (c) To the extent intergovernmental transfers are voluntarily made by,
23 and accepted from, an eligible provider described in subsection (b), or a
24 governmental entity affiliated with an eligible provider, the department
25 shall make increased capitation payments to applicable medicaid managed
26 care plans for covered ground emergency medical transportation services.

27 (1) The increased capitation payments made pursuant to this section
28 shall be in amounts at least actuarially equivalent to the supplemental fee-
29 for-service payments and up to equivalent of commercial reimbursement
30 rates available for eligible providers to the extent permissible under federal
31 law.

32 (2) Except as provided in subsection (f), all funds associated with
33 intergovernmental transfers made and accepted pursuant to this section
34 shall be used to fund additional payments to eligible providers.

35 (3) Medicaid managed care plans shall pay 100% of any amount of
36 increased capitation payments made pursuant to this section to eligible
37 providers for providing and making available ground emergency medical
38 transportation and pre-stabilization services pursuant to a contract or other
39 arrangement with a medicaid managed care plan.

40 (d) The intergovernmental transfer program developed pursuant to
41 this section shall be implemented on the date federal approval is obtained,
42 and only to the extent intergovernmental transfers from the eligible
43 provider, or the governmental entity with which it is affiliated, are

1 provided for this purpose. The department shall implement the
2 intergovernmental transfer program and increased capitation payments
3 under this section on a retroactive basis as permitted by federal law.

4 (e) Participation in the intergovernmental transfers under this section
5 is voluntary on the part of the transferring entities for purposes of all
6 applicable federal laws.

7 (f) This section shall be implemented without any additional
8 expenditure from the state general fund. As a condition of participation
9 under this section, each eligible provider as described in subsection (b), or
10 the governmental entity affiliated with an eligible provider, shall agree to
11 reimburse the department for any costs associated with implementing this
12 section. Intergovernmental transfers described in this section are subject to
13 an administration fee of up to 20% of the non-federal share paid to the
14 department and shall be allowed to count as a cost of providing the
15 services not to exceed 120% of the total amount.

16 (g) As a condition of participation under this section, medicaid
17 managed care plans, eligible providers as described in subsection (b), and
18 governmental entities affiliated with eligible providers shall agree to
19 comply with any requests for information or similar data requirements
20 imposed by the department for purposes of obtaining supporting
21 documentation necessary to claim federal funds or to obtain federal
22 approvals.

23 (h) This section shall be implemented only if and to the extent federal
24 financial participation is available and is not otherwise jeopardized and
25 any necessary federal approvals have been obtained.

26 (i) To the extent that the department determines that the payments
27 made pursuant to this section do not comply with federal medicaid
28 requirements, the department may return or not accept an
29 intergovernmental transfer and may adjust payments pursuant to this
30 section as necessary to comply with federal medicaid requirements.

31 (j) The state of Kansas and the department of health and environment
32 shall implement whatever program the center for medicare and medicaid
33 services approves for use in Kansas under this act.

34 Sec. 3. This act shall take effect and be in force from and after its
35 publication in the statute book.