

Challenges for Medical Transportation

The Department of Social and Health Services
Medicaid Non-Emergency Medical Transportation (NEMT) Program
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In order to receive federal matching funds for approximately \$6-7 billion spent each year for services provided to Medicaid clients in this state, the Centers for Medicare and Medicaid Services (CMS) requires the state to assure access to covered medical services. The NEMT program meets this federal requirement and also protects the public funding source by helping to avoid medical emergencies. Geo-political boundaries are also of no consequence to the “assurance to access” mandate. Long-distance and out-of-state trips, for example, must occur when medically necessary.

During this period of the American Reinvestment and Recovery Act (ARRA), the federal match the State receives is currently at an increased rate of 62.95%, compared to only 50% if NEMT program operated under administrative match.

➤ Medical Costs are Increasing

- Medicaid covers about 1,250,000 out of 6,500,000 Washingtonians
- Medicaid now comprises about 20% of the State budget
- The NEMT program performs 3,600,000 trips at a cost of about \$80,000,000 per year

➤ Fraud and Misuse are Increasing

- To detect fraud and misuse, CMS is adding hundreds of auditors to their ranks
- The Washington State Auditor has required oversight improvements for NEMT program management
- The NEMT program, under Deficit Reduction Act (DRA) (CFR 42 Section 440.170) operates under a strict management structure, thus improving program oversight and protection of public funds

➤ Focus of the Medical Need for Transportation

- In any given month, it is estimated that only 5-10% of Medicaid clients use NEMT services
- Only 5% of the clients using NEMT services represent 50% of the expense
- Progression of efforts to reduce costs of this group
 - Disease Management was a 2-year effort
 - Heart Disease
 - Kidney Disease

- Asthma
- Chronic Care Management
 - Targets high-risk, high-cost clients
 - Not disease specific, but rather holistic
 - Medical home integral to this effort
 - Person/Family-centered and comprehensive
 - Consistent care management for this very mobile group
- Mobility managers are needed who are able to customize transportation services and ensure flexibility
 - Frequent variations in client:
 - Physical capability
 - Cognitive functioning
- Healthcare Reform
 - Likely to add 400,000 Washington citizens to the Medicaid roster
 - Impact to medical transportation program is not currently known
 - Impact to the medical services delivery system is not currently known

➤ **Rapid Growth of Certain Client Groups Needing Medical Care**

- Dialysis
 - Diabetes and obesity epidemic
 - About 15% of trips; 480,000
 - At \$200 per day, costs \$43,680,000 per year for dialysis services
 - At \$30 per trip, costs \$14,400,000 per year for dialysis trips
 - Only takes 1,400 clients going 3 times per week
 - Incidence of diabetes in King County jumped from 2.8% to 5.6% in 10 years; national average is 7.3%
- If living in the community fails, these clients are at risk of moving to a facility
 - Families are broken up
 - Public cost of about \$50,000 per year for convalescent care
 - In the case of dialysis, the care cost does not go away
- Inadequate networks of facilities necessitates longer trips and mobility managers able to customize transportation services and ensure flexibility

➤ **Oversized Mobility Devices**

- NEMT currently serves about 2,000 clients whose physical dimensions exceed ADA specifications for vehicle lifts. Exceeding ADA specifications does not eliminate the “assurance to access” mandate
 - About 100,000 trips per year
 - Very challenging to find appropriate vehicles for these trips
 - ADA specifications, developed in 1990, are inadequate for current society and don’t take into account:

- Increased size of people (weight/width)
- Technological advancements in mobility devices
- Rapid growth of the scooter industry
 - Scooters are helping thousands stay independent
 - Society cannot afford to take the scooters away from them
 - Society cannot afford for these people to move from their private residences
- The individual rolling down the street, with multiple shopping bags on their w/c, may be saving society \$5,000 per month
 - We must creatively learn how to help them maintain and maximize their functioning level

➤ **Coordination**

- NEMT brokers work with all parties possible to:
 - Use fixed route transit for over 35% of trips
 - Contract with over 175 transportation providers
 - Perform long-distance trips such as:
 - Clients receiving long-term treatments such as chemotherapy, radiation or transplants
 - Clients going out-of-state for specialty services
 - Double lung transplants at Lucille Packard Hospital at Stanford Medical Center
- NEMT program managers and brokers integral to coordinating efforts across the State for over 20 years
 - Contract with over 15 Sovereign Indian Nations
 - Work with all 20+ local coalitions
 - When made aware of ESHB 2072 effort, worked with legislative staff to protect NEMT conversion to administrative match, saving the State about \$7,000,000 per year in improved federal match rate
 - Official member of Agency Council on Coordinated Transportation
 - Official member of the Federal Opportunities Workgroup