

MTAC Medical Transportation Access Coalition

September 25, 2017

The Honorable Mitch McConnell
Majority Leader
United States Senate
S-230 The Capitol
Washington, DC 20510

The Honorable Charles Schumer
Minority Leader
United States Senate
S-221 The Capitol
Washington, DC 20510

Dear Leader McConnell and Leader Schumer:

As founders and allied members of the [Medical Transportation Access Coalition \(MTAC\)](#), we are writing to urge you to oppose the Graham-Cassidy-Heller-Johnson healthcare proposal because of the tremendous negative impact it would have on Medicaid beneficiaries, including their ability to access transportation services to medical appointments.

The proposed legislation would, if enacted, amount to a seismic shift to the Medicaid program for both the traditional and the expansion populations. It proposes to convert the traditional Medicaid program to a per-capita cap model that will sharply curtail federal contributions going forward. If federal contributions to Medicaid are limited, the reality will be that states will have no choice but to reduce benefits and services, including services like non-emergency medical transportation (NEMT).

NEMT has been a critical component of the Medicaid program since its inception as the government realized that coverage of healthcare services is of little value if people cannot access the services to begin with. A recent *Health Affairs* blog noted that “transportation is one of the most common barriers faced by low-income populations in accessing timely and necessary medical care, and NEMT fills this access gap by providing the appropriate and least costly method of transportation.”¹ Federal regulations have required states to provide transportation services to non-emergency medical appointments for beneficiaries who lack access to reliable transportation. NEMT covers a wide array of necessary but non-emergent healthcare services such as dialysis, behavioral and mental healthcare appointments, substance abuse treatment and recovery sessions, primary care visits and chemotherapy treatments.

¹Adelberg, Michael & Simon, Marsha. “Non-Emergency Medical Transportation: Will Reshaping Medicaid Sacrifice An Important Benefit?” *Health Affairs Blog*. Sept. 20, 2017.

States have tremendous flexibility today in establishing their NEMT programs, and many rely on brokers or managers like the founders of MTAC to deliver high-quality transportation services using the most cost-effective means possible. As a result, multiple independent analyses have found that properly managed NEMT services yield a significant return on investment by helping beneficiaries remain as healthy as possible, avoiding more intensive and more expensive healthcare services in so doing.

We are also concerned about the impact the proposal will have on access to care for beneficiaries in states that opted to expand Medicaid. While this proposal provides a block grant to states to address this population as they see fit, the proposed formulas will result in a sizeable reduction of funding for many states. Similar to our concern with the traditional Medicaid population, the end result of this situation will be states seeking to limit spending by reducing benefits and services and/or by reducing eligibility standards.

We recognize that our nation's healthcare system is confronting a number of challenges and we applaud the continued interest of many Senators to pursue solutions to address them. However, the Graham-Cassidy-Heller-Johnson proposal will negatively impact Medicaid beneficiaries and their ability to access necessary care and we must oppose this measure for those reasons. We urge the Senate to continue bipartisan efforts to improve our system while protecting the ability of Medicaid beneficiaries to access the care they need.

We appreciate your consideration of this letter. For more information about MTAC or to discuss our views, please check out our website www.mtacoalition.org or contact us via Nick Manetto, nick.manetto@FaegreBD.com or 202-312-7499.

Sincerely,

LogistiCare Solutions LLC
MTM, Inc.
National Alliance on Mental Illness
National Council for Behavioral Health
National Health Care for the Homeless Council
Southeastrans, Inc.