

Moving Forward Together: Opportunities to Improve Program Integrity in Medicaid Non-Emergency Medical Transportation

MTAC (https://mtaccoalition.org/) was formed in 2017 to educate federal and state policymakers about the benefits of non-emergency medical transportation (NEMT) and the need for policies that support continued access to transportation. Founded by the leading brokers of NEMT, LogistiCare Solutions, LLC, MTM, Inc., and Southeastrans, Inc., the coalition has quickly gained support and its current membership numbers 25 organizations including leading patient, provider, and health plan organizations.

BACKGROUND

One of the major barriers to access in health care for some patients is transportation to and from doctor appointments, pharmacies, and other medically necessary treatment. Patients who do not have reliable access to transportation often miss critical appointments, resulting in poorer health outcomes and increased emergency department (ED) utilization. Accordingly, state Medicaid programs are required to provide for medically necessary medical transportation for non-emergency services, known as non-emergency medical transportation Republican (NEMT). Under and Democrat administrations, NEMT has been a continuous and important part of the Medicaid since the program's inception.

NEMT's Value and Challenges

The value of the NEMT benefit is clear: increasing access to non-emergent appointments can lead to better health outcomes over time and decrease health care costs associated with avoidable ED use. However, states have struggled in the management of the benefit. Reviews of several state programs by the HHS Office of the Inspector General found repeated challenges including: inadequate ride documentation, over-billing, and service gaps, and unmet vehicle requirements. In this way, NEMT is similar to other parts of the Medicaid program that have experienced program integrity challenges. Most states now administer NEMT through capitated models which can help somewhat mitigate these problems.

Recommendations to Improve Program Integrity

- Performance-Based Contracts. States are increasingly applying pay-for-performance and value-based
 incentives to Medicaid. NEMT should be included in this trend through performance bonuses, fee withholds,
 and tools to incent improved service and attention to program integrity.
- Facilitate Collaboration Around Leading Practices. CMS should convene stakeholders to consider and
 identify leading practices for improving Medicaid service and program integrity. These focused sessions will
 address specific challenges raised by Medicaid NEMT stakeholders.
- **Provide Technical Assistance**. CMS can provide states greater technical assistance around federal requirements (and leading practices) for improving Medicaid NEMT program integrity.
- Leverage Technology. GPS and driver-tracking systems have the potential to improve NEMT performance data, reduce program integrity problems, and improve the rider experience. Consistent with state and federal requirements, technology should be encouraged.
- Improve Complaints Processes. Medicaid beneficiaries need a predictable, fair, and accessible complaints process by which beneficiaries can express their concerns and inform state oversight.

The value of NEMT is well documented, particularly for vulnerable Medicaid beneficiaries. But the benefit has been marred by program integrity concerns and instances of sub-par service. The recommendations above provide a road-map for improving the consistency of NEMT. This is critical, NEMT is a key tool addressing lack of transportation—a primary social determinant of health.