

Department of Health Care Services MEMORANDUM

DATE: February 23, 2018

TO: Tribal Chairpersons, Designees of Indian Health Programs, and Urban

Indian Organizations

FROM: Original Signed By Sandra "Sam" Willburn, Chief,

Primary, Rural, and Indian Health Division

SUBJECT: Notice of Proposed Change to the Medi-Cal Program

The purpose of this memo is to provide information regarding a proposed change to the Department of Health Care Services' (DHCS) Medi-Cal Program that will be submitted to the Centers for Medicare and Medicaid Services (CMS). DHCS is forwarding this information for your review and comment.

DHCS is required to seek advice from designees of Indian Health Programs and Urban Indian Organizations on Medi-Cal matters having a direct effect on Indians, Indian Health Programs or Urban Indian Organizations per the American Recovery and Reinvestment Act of 2009 (ARRA). DHCS must solicit the advice of designees prior to submission to CMS of any State Plan Amendment, waiver requests or modifications, or proposals for demonstration projects in the Medi-Cal program.

Please see the enclosed summary for a detailed description of this DHCS proposal.

QUESTIONS AND COMMENTS:

Indian Health Programs and Urban Indian Organizations may also submit written comments or questions concerning this proposal within 30 days from the receipt of notice. Comments may be sent by email to GEMTQAF@DHCS.ca.gov or by mail to the address below:

Contact Information

Department of Health Care Services Fee-For-Service Rate Development Division 1501 Capitol Avenue MS 4600 P.O. Box 997417 Sacramento, CA 95899-7417

In addition to this notice, DHCS plans to cover this proposal in the next quarterly Medi-Cal Indian Health webinar. Please note that Indian Health Programs and Urban Indian Organizations may also request a consultation on this proposal at any time as needed.

Enclosure



Department of Health Care Services (DHCS) Tribal and Designees of Indian Health Programs Notice

PURPOSE

Establish a ground emergency medical transport (GEMT) program that will assess a quality assurance fee (QAF) and provide increased payments for GEMT services.

BACKGROUND

Senate Bill (SB) 523 (Chapter 773, Statutes of 2017) establishes a new QAF program for GEMT. Under this program, DHCS will collect transport and revenue data from GEMT service providers. The data will be used to determine 1) an annual Quality Assurance Fee (QAF), and 2) an add-on amount that will increase the Medi-Cal payment amount for ground emergency services.

GEMT providers will be charged a QAF on all ground emergency transports, regardless of payer type, billed with the following codes:

Billing Code	Description
A0429	Basic Life Support
A0427	Advanced Life Support, Level 1
A0433	Advanced Life Support, Level 2
X0030	Local transport code replaced by A0429 and A0427

DHCS must have federal approval in order to implement the GEMT QAF Program, beginning July 1, 2018.

SUMMARY OF PROPOSED CHANGES

- GEMT providers will have to report emergency medical transport and gross receipt data to DHCS.
- GEMT providers that do not submit the required data by the due dates will be charged a \$100 per day penalty.
- DHCS will post 1) the increased payment amount for fee-for-service GEMT transport services, and 2) the 2018-19 QAF rate on the GEMT QAF website by June 15, 2018. The QAF will be updated and posted each year.
- Beginning July 1, 2018, GEMT providers will have to pay a QAF on each GEMT service.
- Beginning July 1, 2018, DHCS will pay the increased payment amount for Medi-Cal GEMT services.

IMPACT TO TRIBAL HEALTH PROGRAMS

Tribally owned and operated GEMT providers must submit the data reports and QAF payments to DHCS by the due dates. They will receive the increased payments for each Medi-Cal GEMT service provided. Tribally owned and operated GEMT providers will receive a penalty if they do not submit the required data reports to DHCS by the due dates.



IMPACT TO FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs)

FQHC owned and operated GEMT providers must submit the data reports and QAF payments to DHCS by the due dates. They will receive the increased payments for each Medi-Cal GEMT service provided. FQHC owned and operated GEMT providers will receive a penalty if they do not submit the required data reports to DHCS by the due dates.

IMPACT TO INDIAN MEDI-CAL BENEFICIARIES

There is no impact to Indian Medi-Cal beneficiaries who receive GEMT services.

RESPONSE DATE

Indian Health Programs and Urban Indian Organizations may submit written comments or questions concerning this proposal within 30 days from the receipt of notice. Comments can be mailed to the address below or sent by email to: GEMTQAF@DHCS.ca.gov.

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