



May 15, 2023

To: Tribal Chairpersons, Designees of Indian Health Programs, and
Urban Indian Organizations

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

The purpose of this letter 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 (SPA), 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

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and Urban Indian Organizations

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

Sincerely,

Original signed by

Andrea Zubiato, Chief
Office of Tribal Affairs
Department of Health Care Services

Enclosure



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

PURPOSE

To seek federal approval for the continuation of the existing Ground Emergency Medical Transport (GEMT) program which assesses a Quality Assurance Fee (QAF) and provides increased payments for GEMT services, effective for dates of service on or after July 1, 2023.

BACKGROUND

Senate Bill (SB) 523 (Chapter 773, Statutes of 2017) established a QAF program for GEMT services, effective July 1, 2018. Under this program, DHCS collects transport and revenue data from GEMT service providers. The data is used to determine 1) an annual QAF, and 2) an add-on amount that increases the Medi Cal reimbursement amount for GEMT services.

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

Billing Code	Description
A0429	Basic Life Support
A0427	Advanced Life Support, Level 1
A0433	Advanced Life Support, Level 2
A0434	Specialty Care Transport
A0225	Neonatal Emergency Transport

Contingent on federal approval, GEMT providers will receive increased reimbursement through the application of an add-on to the Medi-Cal fee-for-service fee schedule amount for the above-listed service codes, effective for dates of service on or after July 1, 2023.

The Centers for Medicare & Medicaid Services approved State Plan Amendment (SPA) 22-0015 on December 21, 2022 establishing a new and separate program, the Public Provider Ground Emergency Medical Transportation (PP-GEMT) Intergovernmental Transfer (IGT) Program. Effective January 1, 2023, public providers as defined in Assembly Bill (AB) 1705 (Chapter 544, Statutes of 2019) are no longer eligible to participate in the GEMT QAF program and have transitioned to the new PP-GEMT IGT program. Public providers are no longer assessed the QAF prospectively and are not eligible to receive the add-on through the GEMT QAF program.

SUMMARY OF PROPOSED CHANGES

- Continuation of current GEMT QAF Program for dates of service on or after July 1, 2023.
- Public GEMT providers are no longer eligible to participate in the GEMT QAF program and have transitioned to the new PP-GEMT IGT program, effective January 1, 2023.

IMPACT TO TRIBAL HEALTH PROGRAMS

Public GEMT providers transitioned into the PP-GEMT IGT program must still submit the data reports and QAF payments to DHCS by the due dates for dates of service through December 2022. Please note, some of the payment due dates for the fourth quarter fall after December 2022.

IMPACT TO FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs)

Through dates of service December 31, 2022, public GEMT providers must still submit the data reports and QAF payments to DHCS by the applicable due dates in order to complete the transition from the GEMT QAF program to the PP-GEMT IGT program. Please note, some of the payment due dates for the fourth quarter fall after December 2022.

IMPACT TO INDIAN MEDI-CAL BENEFICIARIES

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

RESPONSE DATE

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:

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