

First Regular Session of the 121st General Assembly (2019)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2018 Regular and Special Session of the General Assembly.

SENATE ENROLLED ACT No. 480

AN ACT to amend the Indiana Code concerning Medicaid.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 12-7-2-23.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: **Sec. 23.5. "Broker", for purposes of IC 12-15-30.5, has the meaning set forth in IC 12-15-30.5-1.**

SECTION 2. IC 12-7-2-34, AS AMENDED BY P.L.85-2017, SECTION 44, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 34. "Commission" means the following:

- (1) For purposes of IC 12-10-2, the meaning set forth in IC 12-10-2-1.
- (2) For purposes of IC 12-12-2, the meaning set forth in IC 12-12-2-1.
- (3) For purposes of IC 12-13-14, the meaning set forth in IC 12-13-14-1.
- (4) For purposes of IC 12-15-30.5, the meaning set forth in IC 12-15-30.5-2.**
- (+) (5) For purposes of IC 12-28-1, the meaning set forth in IC 12-28-1-3.**

SECTION 3. IC 12-7-2-132.1 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: **Sec. 132.1. "Nonemergency medical transportation", for purposes of IC 12-15-30.5, has the meaning set forth in IC 12-15-30.5-3.**

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SECTION 4. IC 12-15-30.5 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]:

Chapter 30.5. Nonemergency Medical Transportation

Sec. 1. As used in this chapter, "broker" means a contractor of the office that administers the Medicaid fee-for-service nonemergency medical transportation program.

Sec. 2. As used in this chapter, "commission" refers to the nonemergency medical transportation commission established by section 7 of this chapter.

Sec. 3. As used in this chapter, "nonemergency medical transportation" means medically necessary transportation to Medicaid covered services for an eligible Medicaid recipient who:

- (1) participates in the Medicaid fee-for-service program; and
- (2) does not have available transportation to:
 - (A) a Medicaid reimbursable service; or
 - (B) a pharmacy to obtain Medicaid reimbursable pharmacy services.

Sec. 4. (a) A broker must do the following:

(1) Submit monthly reports to the office of the secretary for the office of the secretary to post on the office of the secretary's Internet web site of the following:

(A) A list and map by county of the number of vehicles, by vehicle type, that are contracted, credentialed, and available to provide nonemergency medical transportation in that county.

(B) Based upon a comparison of trip-leg identification numbers issued by the broker to the corresponding claim submitted with that trip-leg identification number, the number of instances in which a requested nonemergency medical transportation for an eligible Medicaid recipient was not provided, including whether:

- (i) the instance related to picking up the recipient to go to an appointment;
- (ii) the instance related to picking up the recipient from an appointment;
- (iii) the instance related to a Medicaid recipient or transportation provider not being available;
- (iv) the recipient resides in the community, a health facility, an intermediate care facility for individuals with intellectual disabilities, a hospital, or another location; and



(v) the instance resulted from the transportation request being canceled by the transportation provider more than forty-eight (48) hours before the appointment or within forty-eight (48) hours of the appointment.

(D) A summary of the complaints received by the broker, whether or not the complaints have been substantiated. Information under this clause must include the total number of complaints and whether the complaint related to:

- (i) a scheduled ride to go to an appointment;
- (ii) a scheduled ride from an appointment; and
- (iii) a recipient who resided in the community, a health facility, an intermediate care facility for individuals with intellectual disabilities, a hospital, or another location.

(2) Submit monthly to the office of the secretary for the office of the secretary to post on the office of the secretary's Internet web site a report comparing:

- (A) the number of eligible Medicaid recipients; to
- (B) the number of contracted and credentialed transportation vehicles, by type and by county, that are available to provide nonemergency medical transportation in a county;

and including the calculation of the ratio of eligible Medicaid recipients to vehicle type.

(3) Submit a monthly report to the office of the secretary that includes the following information for the previous month:

- (A) The number of ride requests received and scheduled trip-leg identification numbers issued.
- (B) Call center statistics.
- (C) Information on claims payments, including claim denial reason codes.
- (D) Program integrity referrals.
- (E) Information concerning grievances and appeals, including the status of any grievance or appeal that is either open or closed in the month of the report.

(b) If the broker has not assigned a transportation provider to a request for nonemergency medical transportation within forty-eight (48) hours of the time in which the transportation is to be provided, the broker shall do the following:

- (1) Take steps to notify the:
 - (A) Medicaid recipient for which the request was made; and



(B) health facility, if the Medicaid recipient resides in a health facility;

that a transportation provider has not yet been assigned.

(2) Continue to make every effort in securing transportation for the Medicaid recipient and immediately notify the recipient described in subdivision (1)(A) and, if applicable, the health facility described in subdivision (1)(B), when transportation has been assigned.

(3) Document whether the notice required under subdivision (1) was communicated to the Medicaid recipient or a person on behalf of the Medicaid recipient, and the method of communication.

Sec. 5. (a) A broker shall establish, implement, and maintain the following:

(1) One (1) toll free telephone number clearly identified for the handling of complaints concerning the nonemergency medical transportation services.

(2) A link on the home page of the broker's Internet web site titled "File a Complaint Here" that is accessible by the public and that allows for the submission of a complaint concerning the nonemergency medical transportation services.

(3) Instructions on the broker's Internet web site on how to file a complaint concerning nonemergency medical transportation services.

(4) A process to notify a person who files a complaint about:

(A) the steps the broker will take to investigate the complaint; and

(B) the results of the investigation.

(b) Except for disclosure to the office of the secretary, the broker shall keep confidential the identity of any individual who submits a complaint with the broker concerning nonemergency medical transportation services.

(c) If a complaint concerning nonemergency medical transportation services made to the broker is substantiated, the broker shall develop a remediation plan concerning the complaint and submit the remediation plan to the office of the secretary for the office of the secretary to post the remediation plan on the office of the secretary's Internet web site.

Sec. 6. (a) Before October 1, 2019, the office of the secretary shall prepare a report containing the number of Medicaid fee-for-service nonemergency medical transportation claims paid by:



- (1) vehicle type;
- (2) Medicaid recipient category; and
- (3) whether the recipient for which the claim was paid resided in:

- (A) the community;
- (B) a health facility;
- (C) an intermediate care facility for individuals with intellectual disabilities;
- (D) a hospital; or
- (E) another location.

(b) Beginning June 1, 2016, through May 31, 2019, the claims data reported in subsection (a) must be organized by month.

(c) The office of the secretary shall submit the report prepared under subsection (a) to the commission.

Sec. 7. (a) The nonemergency medical transportation commission is established for the purpose of overseeing the provision of nonemergency medical transportation services to ensure that Medicaid fee-for-service recipients are receiving satisfactory service and to ensure that brokers pay the claims of transportation providers in a timely manner.

(b) The commission consists of the following members:

- (1) Two (2) members of the senate, who may not be members of the same political party, appointed by the president pro tempore of the senate with the advice of the minority leader of the senate.
- (2) Two (2) members of the house of representatives, who may not be members of the same political party, appointed by the speaker of the house of representatives with the advice of the minority leader of the house of representatives.
- (3) One (1) representative of the office of the secretary.
- (4) One (1) individual representing a broker.
- (5) One (1) individual representing a transportation provider that has contracted with a broker.
- (6) One (1) individual representing the Indiana Hospital Association.
- (7) One (1) individual representing the Indiana Health Care Association.
- (8) One (1) individual representing the Indiana Association of Rehabilitation Facilities.
- (9) One (1) individual representing the Arc of Indiana.
- (10) One (1) physician licensed under IC 25-22.5.
- (11) One (1) individual representing dialysis providers.



(12) One (1) Medicaid fee-for-service recipient.

(13) One (1) individual representing the Indiana Association of Area Agencies on Aging.

(14) One (1) individual representing the Indiana Emergency Medical Services Association.

(c) The members of the commission described in subsection (b)(1) and (b)(2) shall serve:

(1) as nonvoting advisory members; and

(2) for a four (4) year term.

(d) The members of the commission described in subsection (b)(3) through (b)(14) shall be appointed by the governor for terms of four (4) years. The term of a member of the commission expires July 1. However, a member may continue to serve until a successor is appointed. In case of a vacancy, the governor shall appoint an individual to serve for the remainder of the unexpired term. The governor shall designate one (1) member described in this subsection as chairperson of the commission.

(e) The initial appointments beginning July 1, 2019, must be:

(1) made by the governor not later than October 1, 2019; and

(2) notwithstanding subsection (d), staggered as follows:

(A) Two (2) years for the members appointed under subsection (b)(4), (b)(6), (b)(8), (b)(10), (b)(12), and (b)(14).

(B) Three (3) years for the members appointed under subsection (b)(5), (b)(7), (b)(9), (b)(11), and (b)(13).

This subsection expires July 1, 2024.

(f) The office shall provide staff support and technical assistance to the commission, including the collection of and dissemination of data and reports required by this chapter, in order for the commission to carry out its duties under this chapter.

Sec. 8. (a) Each member of the commission who is not a state employee is entitled to the minimum salary per diem provided by IC 4-10-11-2.1(b). Such a member is also entitled to reimbursement for traveling expenses and other expenses actually incurred in connection with the member's duties, as provided in the state travel policies and procedures established by the Indiana department of administration and approved by the budget agency.

(b) Each member of the commission who is a state employee but who is not a member of the general assembly is entitled to reimbursement for traveling expenses and other expenses actually incurred in connection with the member's duties, as provided in the state travel policies and procedures established by the Indiana department of administration and approved by the budget agency.



(c) Each member of the commission who is a member of the general assembly is entitled to receive the same per diem, mileage, and travel allowances paid to legislative members of interim study committees established by the legislative council. Per diem, mileage, and travel allowances paid under this subsection shall be paid from appropriations made to the legislative council or the legislative services agency.

Sec. 9. The commission shall meet at least two (2) times per year at a public meeting to do the following:

- (1) Review a report submitted under this chapter.
- (2) Provide feedback and make recommendations to the office of the secretary concerning the provision of nonemergency medical transportation services.
- (3) Approve any monies to be awarded to a broker as part of a withhold provision outlined in the contract between the office of the secretary and the broker.



President of the Senate

President Pro Tempore

Speaker of the House of Representatives

Governor of the State of Indiana

Date: _____ Time: _____

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