

SENATE BILL No. 480

DIGEST OF SB 480 (Updated January 30, 2019 1:03 pm - DI 104)

Citations Affected: IC 12-7; IC 12-15.

Synopsis: Medicaid nonemergency medical transport. Sets forth requirements for brokers of nonemergency medical transportation under the Medicaid fee-for-service program. Establishes the nonemergency medical transportation commission (commission) and sets forth duties of the commission. Requires the office of the secretary of family and social services to prepare before October 1, 2019, a report concerning nonemergency medical transportation Medicaid claims and submit the report to the commission.

Effective: July 1, 2019.

Becker, Messmer, Charbonneau, Houchin, Leising, Merritt, Tomes

January 14, 2019, read first time and referred to Committee on Health and Provider Services.

January 31, 2019, amended, reported favorably — Do Pass.



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 BILL No. 480

A BILL FOR AN ACT to amend the Indiana Code concerning Medicaid.

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

CECTION 1 10 10 7 2 22 5 10 ADDED TO THE DIDLANA CODE

1	SECTION 1. IC 12-7-2-23.5 IS ADDED TO THE INDIANA CODE
2	AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
3	1,2019]: Sec. 23.5. "Broker", for purposes of IC 12-15-30.5, has the
4	meaning set forth in IC 12-15-30.5-1.
5	SECTION 2. IC 12-7-2-34, AS AMENDED BY P.L.85-2017,
6	SECTION 44, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
7	JULY 1, 2019]: Sec. 34. "Commission" means the following:
8	(1) For purposes of IC 12-10-2, the meaning set forth in
9	IC 12-10-2-1.
10	(2) For purposes of IC 12-12-2, the meaning set forth in
11	IC 12-12-2-1.
12	(3) For purposes of IC 12-13-14, the meaning set forth in
13	IC 12-13-14-1.
14	(4) For purposes of IC 12-15-30.5, the meaning set forth in
15	IC 12-15-30.5-2.
16	(4) (5) For purposes of IC 12-28-1, the meaning set forth in
17	IC 12-28-1-3.



1	SECTION 3. IC 12-7-2-132.1 IS ADDED TO THE INDIANA
2	CODE AS A NEW SECTION TO READ AS FOLLOWS
3	[EFFECTIVE JULY 1, 2019]: Sec. 132.1. "Nonemergency medical
4	transportation", for purposes of IC 12-15-30.5, has the meaning set
5	forth in IC 12-15-30.5-3.
6	SECTION 4. IC 12-15-30.5 IS ADDED TO THE INDIANA CODE
7	AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
8	JULY 1, 2019]:
9	Chapter 30.5. Nonemergency Medical Transportation
10	Sec. 1. As used in this chapter, "broker" means a contractor of
11	the office that administers the Medicaid fee-for-service
12	nonemergency medical transportation program.
13	Sec. 2. As used in this chapter, "commission" refers to the
14	nonemergency medical transportation commission established by
15	section 7 of this chapter.
16	Sec. 3. As used in this chapter, "nonemergency medical
17	transportation" means medically necessary transportation to
18	Medicaid covered services for an eligible Medicaid recipient who:
19	(1) participates in the Medicaid fee-for-service program; and
20	(2) does not have available transportation to:
21	(A) a Medicaid reimbursable service; or
22	(B) a pharmacy to obtain Medicaid reimbursable
23 24	pharmacy services.
24	Sec. 4. (a) A broker must do the following:
25	(1) Post weekly reports on the broker's Internet web site of
26	the following:
27	(A) A list, by vehicle type listed by county, of the broker's
28	fully contracted and credentialed transportation vehicles.
29	(B) The number, listed by county, of drivers providing
30	nonemergency medical transportation.
31	(C) The number of instances in which there was a failure
32	to provide requested nonemergency medical
33	transportation for an eligible Medicaid recipient, including
34	whether:
35	(i) the failure related to picking up the recipient to go to
36	an appointment;
37	(ii) the failure related to picking up the recipient from an
38	appointment;
39	(iii) the recipient resides in the community, a health
40	facility, an intermediate care facility for individuals with
41	intellectual disabilities, a hospital, or another location;
42	and



1	(iv) the failure resulted from the transportation request
2	being cancelled by the transportation provider more
3	than forty-eight (48) hours before the appointment or
4	within forty-eight (48) hours of the appointment.
5	(D) A summary of the complaints received by the broker,
6	whether or not the complaints have been substantiated.
7	Information under this clause must include the total
8	number of complaints and whether the complaint related
9	to:
10	(i) a scheduled ride to go to an appointment;
l 1	(ii) a scheduled ride from an appointment; and
12	(iii) a recipient who resided in the community, a health
13	facility, an intermediate care facility for individuals with
14	intellectual disabilities, a hospital, or another location.
15	(2) Post monthly on the broker's Internet web site a report
16	comparing:
17	(A) the number of eligible Medicaid recipients; to
18	(B) the number of contracted and credentialed
19	transportation vehicles, by type and by county;
20	and including the calculation of the ratio of eligible Medicaid
21	recipients to vehicle type.
22	(3) Submit a monthly report to the office that includes the
23 24	following information for the previous month:
24	(A) The number of ride requests received.
25	(B) Call center statistics.
26	(C) Information on claims payments.
27	(D) Program integrity referrals.
28	(E) Information concerning grievances and appeals,
29	including the status of any grievance or appeal that is
30	either open or closed in the month of the report.
31	(b) If the broker has not assigned a transportation provider to
32	a request for nonemergency medical transportation within
33	forty-eight (48) hours of the time in which the transportation is to
34	be provided, the broker shall do the following:
35	(1) Notify the:
36	(A) Medicaid recipient for which the request was made;
37	and
38	(B) health facility, if the Medicaid recipient resides in a
39	health facility;
10	that a transportation provider has not yet been assigned.
11	(2) Continue to make every effort in securing transportation
12	for the Medicaid recipient.



1	(3) Update the persons described in subdivision (1) of the
2	status of the request at least twelve (12) hours before the
3	requested transportation time.
4	Sec. 5. (a) A broker shall establish, implement, and maintain the
5	following:
6	(1) One (1) toll free telephone number clearly identified for
7	the handling of complaints concerning the nonemergency
8	medical transportation services.
9	(2) A link on the home page of the broker's Internet web site
10	titled "File a Complaint Here" that is accessible by the public
11	and that allows for the submission of a complaint concerning
12	the nonemergency medical transportation services.
13	(3) Instructions on the broker's Internet web site on how to
14	file a complaint concerning nonemergency medical
15	transportation services.
16	(4) A process to notify a person who files a complaint about:
17	(A) the steps the broker will take to investigate the
18	complaint; and
19	(B) the results of the investigation.
20	(b) Except for disclosure to the office of the secretary, the
21	broker shall keep confidential the identity of any individual who
22	submits a complaint with the broker concerning nonemergency
23	medical transportation services.
24	(c) If a complaint concerning nonemergency medical
25	transportation services made to the broker is substantiated, the
26	broker shall develop a corrective action plan concerning the
27	complaint and publish the corrective action plan on the broker's
28	Internet web site.
29	Sec. 6. (a) Before October 1, 2019, the office of the secretary
30	shall prepare a report containing the number of Medicaid
31	fee-for-service nonemergency medical transportation claims paid
32	by:
33	(1) vehicle type;
34	(2) Medicaid recipient category; and
35	(3) whether the recipient for which the claim was paid resided
36	in:
37	(A) the community;
38	(B) a health facility;
39	(C) an intermediate care facility for individuals with
40	intellectual disabilities;
41	(D) a hospital; or
42	(E) another location.



data reported in subsection (a) must be organized by month.

(b) Beginning June 1, 2016, through May 30, 2019, the claims $\left(\frac{1}{2} \right)$

3	(c) The office of the secretary shall submit the report prepared
4	under subsection (a) to the commission.
5	Sec. 7. (a) The nonemergency medical transportation
6	commission is established for the purpose of overseeing the
7	provision of nonemergency medical transportation services to
8	ensure that Medicaid fee-for-service recipients are receiving
9	satisfactory service.
10	(b) The commission consists of the following members:
11	(1) Two (2) members of the senate, who may not be members
12	of the same political party, appointed by the president pro
13	tempore of the senate with the advice of the minority leader
14	of the senate.
15	(2) Two (2) members of the house of representatives, who may
16	not be members of the same political party, appointed by the
17	speaker of the house of representatives with the advice of the
18	minority leader of the house of representatives.
19	(3) One (1) representative of the office of the secretary.
20	(4) One (1) individual representing a broker.
21	(5) One (1) individual representing a transportation provider
22	that has contracted with a broker.
23	(6) One (1) individual representing the Indiana Hospital
24	Association.
25	(7) One (1) individual representing the Indiana Health Care
26	Association.
27	(8) One (1) individual representing the Indiana Association of
28	Rehabilitation Facilities.
29	(9) One (1) individual representing the Arc of Indiana.
30	(10) One (1) physician licensed under IC 25-22.5.
31	(11) One (1) individual representing dialysis providers.
32	(12) One (1) Medicaid fee-for-service recipient.
33	(13) One (1) individual representing the Indiana Association
34	of Area Agencies on Aging.
35	(c) The members of the commission described in subsection
36	(b)(1) and (b)(2) shall serve:
37	(1) as nonvoting advisory members; and
38	(2) for a four (4) year term.
39	(d) The members of the commission described in subsection
40	(b)(3) through $(b)(13)$ shall be appointed by the governor for terms
41	of four (4) years. The term of a member of the commission expires
42	July 1 However, a member may continue to serve until a successor



1 2

1	is appointed. In case of a vacancy, the governor shall appoint an
2	individual to serve for the remainder of the unexpired term. The
3	governor shall designate one (1) member described in this
4	subsection as chairperson of the commission.
5	(e) The initial appointments beginning July 1, 2019, must be:
6	(1) made by the governor not later than October 1, 2019; and
7	(2) notwithstanding subsection (d), staggered as follows:
8	(A) Two (2) years for the members appointed under
9	subsection (b)(4), (b)(6), (b)(8), (b)(10), and (b)(12).
10	(B) Three (3) years for the members appointed under
11	subsection (b)(5), (b)(7), (b)(9), (b)(11), and (b)(13).
12	This subsection expires July 1, 2024.
13	Sec. 8. (a) Each member of the commission who is not a state
14	employee is entitled to the minimum salary per diem provided by
15	IC 4-10-11-2.1(b). Such a member is also entitled to reimbursement
16	for traveling expenses and other expenses actually incurred in
17	connection with the member's duties, as provided in the state travel
18	policies and procedures established by the Indiana department of
19	administration and approved by the budget agency.
20	(b) Each member of the commission who is a state employee but
21	who is not a member of the general assembly is entitled to
22	reimbursement for traveling expenses and other expenses actually
23	incurred in connection with the member's duties, as provided in the
24	state travel policies and procedures established by the Indiana
25	department of administration and approved by the budget agency.
26	(c) Each member of the commission who is a member of the
27	general assembly is entitled to receive the same per diem, mileage,
28	and travel allowances paid to legislative members of interim study
29	committees established by the legislative council. Per diem,
30	mileage, and travel allowances paid under this subsection shall be
31	paid from appropriations made to the legislative council or the
32	legislative services agency.
33	Sec. 9. The commission shall meet at least two (2) times per year
34	at a public meeting to do the following:
35	(1) Review a report submitted under this chapter.
36	(2) Provide feedback and make recommendations to the office
37	of the secretary concerning the provision of nonemergency
38	medical transportation services.
39	(3) Review complaints received by the broker and the office
40	of the secretary concerning the provision of nonemergency
41	medical transportation services and provide feedback on the
42	complaints and any corrective action taken concerning the



1	complaints.
2	(4) Approve any monies to be awarded to a broker as part of
3	an incentive outlined in the contract between the office of the
4	secretary and the broker.



COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 480, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

- Page 2, line 27, delete "type," and insert "type listed by county,". Page 2, line 33, delete "recipient." and insert "recipient, including whether:
 - (i) the failure related to picking up the recipient to go to an appointment;
 - (ii) the failure related to picking up the recipient from an appointment;
 - (iii) the recipient resides in the community, a health facility, an intermediate care facility for individuals with intellectual disabilities, a hospital, or another location; and
 - (iv) the failure resulted from the transportation request being cancelled by the transportation provider more than forty-eight (48) hours before the appointment or within forty-eight (48) hours of the appointment."
- Page 2, line 35, after "." insert "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.".
- Page 2, line 36, delete "Prepare a monthly" and insert "Post monthly on the broker's Internet web site a".
- Page 2, between lines 41 and 42, begin a new line block indented and insert:
 - "(3) Submit a monthly report to the office that includes the following information for the previous month:
 - (A) The number of ride requests received.
 - (B) Call center statistics.
 - (C) Information on claims payments.
 - (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.".



- Page 3, line 20, after "the" insert "home page of the".
- Page 3, line 26, delete "services and how to appeal a determination on" and insert "services.".

Page 3, delete line 27, begin a new line block indented and insert:

- "(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.".

Page 3, line 37, delete "July 31, 2019," and insert "October 1, 2019,".

Page 4, line 4, delete "or".

Page 4, line 6, delete "." and insert ";

- (D) a hospital; or
- (E) another location.".

Page 4, line 7, after "(b)" insert "Beginning June 1, 2016, through May 30, 2019, the claims data reported in subsection (a) must be organized by month.

(c)".

Page 4, between lines 36 and 37, begin a new line block indented and insert:

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

Page 4, line 42, delete "(b)(12)" and insert "(b)(13)".

Page 5, line 13, delete "and (b)(11)." and insert "(b)(11), and (b)(13).".

Page 5, line 41, after "by" insert "the broker and".

and when so amended that said bill do pass.

(Reference is to SB 480 as introduced.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 11, Nays 0.

