AMENDMENT IN THE NATURE OF A SUBSTITUTE TO H.R. 3935

OFFERED BY MR. CÁRDENAS OF CALIFORNIA

Strike all after the enacting clause and insert the following:

1 SECTION 1. SHORT TITLE.

2 This Act may be cited as the "Protecting Patients3 Transportation to Care Act".

4 SEC. 2. MEDICAID COVERAGE OF CERTAIN MEDICAL 5 TRANSPORTATION.

6 (a) CONTINUING REQUIREMENT OF MEDICAID COV7 ERAGE OF NECESSARY TRANSPORTATION.—

8 (1) REQUIREMENT.—Section 1902(a)(4) of the
9 Social Security Act (42 U.S.C. 1396a(a)(4)) is
10 amended—

(A) by striking "and including provision
for utilization" and inserting "including provision for utilization"; and

(B) by inserting after "supervision of administration of the plan" the following: ", and,
subject to section 1903(i), including a specification that the single State agency described in
paragraph (5) will ensure necessary transpor-

1	tation for beneficiaries under the State plan to
2	and from providers and a description of the
3	methods that such agency will use to ensure
4	such transportation".
5	(2) Application with respect to bench-
6	MARK BENEFIT PACKAGES AND BENCHMARK EQUIV-
7	ALENT COVERAGE.—Section 1937(a)(1) of the Social
8	Security Act (42 U.S.C. 1396u–7(a)(1)) is amend-
9	ed—
10	(A) in subparagraph (A), by striking "sub-
11	section (E)" and inserting "subparagraphs (E)
12	and (F)"; and
13	(B) by adding at the end the following new
14	subparagraph:
15	"(F) NECESSARY TRANSPORTATION.—Not-
16	withstanding the preceding provisions of this
17	paragraph, a State may not provide medical as-
18	sistance through the enrollment of an individual
19	with benchmark coverage or benchmark equiva-
20	lent coverage described in subparagraph (A)(i)
21	unless, subject to section $1903(i)(9)$ and in ac-
22	cordance with section $1902(a)(4)$, the bench-
23	mark benefit package or benchmark equivalent
24	coverage (or the State)—

1	"(i) ensures necessary transportation
2	for individuals enrolled under such package
3	or coverage to and from providers; and
4	"(ii) provides a description of the
5	methods that will be used to ensure such
6	transportation.".
7	(3) Limitation on federal financial par-
8	TICIPATION.—Section 1903(i) of the Social Security
9	Act (42 U.S.C. 1396b(i)) is amended by inserting
10	after paragraph (8) the following new paragraph:
11	"(9) with respect to any amount expended for
12	non-emergency transportation authorized under sec-
13	tion $1902(a)(4)$, unless the State plan provides for
14	the methods and procedures required under section
15	1902(a)(30)(A); or".
16	(4) EFFECTIVE DATE.—The amendments made
17	by this subsection shall take effect on the date of the
18	enactment of this Act and shall apply to transpor-
19	tation furnished on or after such date.
20	(b) Medicaid Program Integrity Measures Re-
21	lated to Coverage of Nonemergency Medical
22	TRANSPORTATION.—
23	(1) GAO STUDY.—Not later than two years
24	after the date of the enactment of this Act, the
25	Comptroller General of the United States shall con-

1	duct a study, and submit to Congress, a report on
2	coverage under the Medicaid program under title
3	XIX of the Social Security Act of nonemergency
4	transportation to medically necessary services. Such
5	study shall take into account the 2009 report of the
6	Office of the Inspector General of the Department of
7	Health and Human Services, titled "Fraud and
8	Abuse Safeguards for Medicaid Nonemergency Med-
9	ical Transportation" (OEI-06-07-003200). Such
10	report shall include the following:
11	(A) An examination of the 50 States and
12	the District of Columbia to identify safeguards
13	to prevent and detect fraud and abuse with re-
14	spect to coverage under the Medicaid program
15	of nonemergency transportation to medically
16	necessary services.
17	(B) An examination of transportation bro-
18	kers to identify the range of safeguards against
19	such fraud and abuse to prevent improper pay-
20	ments for such transportation.
21	(C) Identification of the numbers, types,
22	and outcomes of instances of fraud and abuse,
23	with respect to coverage under the Medicaid
24	program of such transportation, that State

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Medicaid Fraud Control Units have investigated
 in recent years.

3 (D) Identification of commonalities or
4 trends in program integrity, with respect to
5 such coverage, to inform risk management
6 strategies of States and the Centers for Medi7 care & Medicaid Services.

8 (2) STAKEHOLDER WORKING GROUP.—

9 (A) IN GENERAL.—Not later than one year 10 after the date of the enactment of this Act, the 11 Secretary of Health and Human Services, 12 through the Centers for Medicare & Medicaid 13 Services, shall convene a series of meetings to 14 obtain input from appropriate stakeholders to 15 facilitate discussion and shared learning about 16 the leading practices for improving Medicaid 17 program integrity, with respect to coverage of 18 nonemergency transportation to medically nec-19 essary services.

20 (B) TOPICS.—The meetings convened
21 under subparagraph (A) shall—

(i) focus on ongoing challenges to
Medicaid program integrity as well as leading practices to address such challenges;
and

1 (ii) address specific challenges raised 2 by stakeholders involved in coverage under 3 the Medicaid program of nonemergency 4 transportation to medically necessary services, including unique considerations for 5 6 specific groups of Medicaid beneficiaries 7 meriting particular attention, such as 8 American Indians and tribal land issues or accommodations for individuals with dis-9 10 abilities.

11 (C) STAKEHOLDERS.—Stakeholders de-12 scribed in subparagraph (A) shall include individuals from State Medicaid programs, brokers 13 14 for nonemergency transportation to medically 15 necessary services that meet the criteria de-16 scribed in section 1902(a)(70)(B) of the Social 17 Security Act (42 U.S.C. 1396a(a)(70)(B)), pro-18 viders (including transportation network compa-19 nies), Medicaid patient advocates, and such 20 other individuals specified by the Secretary.

(3) GUIDANCE REVIEW.—Not later than 18
months after the date of the enactment of this Act,
the Secretary of Health and Human Services,
through the Centers for Medicare & Medicaid Services, shall assess guidance issued to States by the

1	Centers for Medicare & Medicaid Services relating to
2	Federal requirements for nonemergency transpor-
3	tation to medically necessary services under the
4	Medicaid program under title XIX of the Social Se-
5	curity Act and update such guidance as necessary to
6	ensure States have appropriate and current guidance
7	in designing and administering coverage under the
8	Medicaid program of nonemergency transportation
9	to medically necessary services.
10	(4) NEMT TRANSPORTATION PROVIDER AND
11	DRIVER REQUIREMENTS.—
12	(A) STATE PLAN REQUIREMENT.—Section
13	1902(a) of the Social Security Act (42 U.S.C.
14	1396a(a)) is amended—
15	(i) by striking "and" at the end of
16	paragraph (85);
17	(ii) by striking the period at the end
18	of paragraph (86) and inserting "; and";
19	and
20	(iii) by inserting after paragraph (86)
21	the following new paragraph:
22	"(87) provide for a mechanism, which may in-
23	clude attestation, that ensures that, with respect to
24	any provider (including a transportation network
25	company) or individual driver of nonemergency

1 transportation to medically necessary services receiv-2 ing payments under such plan (but excluding any public transit authority), at a minimum— 3 "(A) each such provider and individual 4 5 driver is not excluded from participation in any 6 Federal health care program (as defined in sec-7 tion 1128B(f)) and is not listed on the exclu-8 sion list of the Inspector General of the Depart-9 ment of Health and Human Services; 10 "(B) each such individual driver has a 11 valid driver's license; 12 "(C) each such provider has in place a 13 process to address any violation of a State drug 14 law; and 15 "(D) each such provider has in place a 16 process to disclose to the State Medicaid pro-17 gram the driving history, including any traffic 18 violations, of each such individual driver em-

20 violations.".

21 (B) Effective date.—

(i) IN GENERAL.—Except as provided in clause (ii), the amendments made by subparagraph (A) shall take effect on the date of the enactment of this Act and shall

ployed by such provider, including any traffic

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apply to services furnished on or after the date that is one year after the date of the enactment of this Act.

4 (ii) EXCEPTION IF STATE LEGISLA-5 TION REQUIRED.—In the case of a State 6 plan for medical assistance under title XIX 7 of the Social Security Act which the Sec-8 retary of Health and Human Services de-9 termines requires State legislation (other than legislation appropriating funds) in 10 11 order for the plan to meet the additional 12 requirement imposed by the amendments 13 made by subparagraph (A), the State plan 14 shall not be regarded as failing to comply 15 with the requirements of such title solely 16 on the basis of its failure to meet this ad-17 ditional requirement before the first day of 18 the first calendar quarter beginning after 19 the close of the first regular session of the 20 State legislature that begins after the date 21 of the enactment of this Act. For purposes 22 of the previous sentence, in the case of a 23 State that has a 2-year legislative session, 24 each year of such session shall be deemed

to be a separate regular session of the
 State legislature.

3 (5) ANALYSIS OF T-MSIS DATA.-Not later 4 than one year after the date of the enactment of this 5 Act, the Secretary of Health and Human Services, through the Centers for Medicare & Medicaid Serv-6 7 ices, shall analyze, and submit to Congress a report 8 on, the nation-wide data set under the Transformed Medicaid Statistical Information System to identify 9 10 recommendations relating to coverage under the 11 Medicaid program under title XIX of the Social Se-12 curity Act of nonemergency transportation to medi-13 cally necessary services.

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