## Union Calendar No. <sup>116TH CONGRESS</sup> H.R.3935

[Report No. 116-]

To amend title XIX of the Social Security Act to provide for the continuing requirement of Medicaid coverage of nonemergency transportation to medically necessary services.

## IN THE HOUSE OF REPRESENTATIVES

JULY 24, 2019

Mr. CARTER of Georgia (for himself, Mr. CÁRDENAS, Mr. GRAVES of Georgia, and Mr. BISHOP of Georgia) introduced the following bill; which was referred to the Committee on Energy and Commerce

## JULY --, 2020

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on July 24, 2019]

## A BILL

To amend title XIX of the Social Security Act to provide for the continuing requirement of Medicaid coverage of nonemergency transportation to medically necessary services.

Be it enacted by the Senate and House of Representa-1 2 tives of the United States of America in Congress assembled, 3 SECTION 1. SHORT TITLE. 4 This Act may be cited as the "Protecting Patients" 5 Transportation to Care Act". 6 SEC. 2. MEDICAID COVERAGE OF CERTAIN MEDICAL TRANS-7 PORTATION. 8 (a) Continuing Requirement of Medicaid Cov-ERAGE OF NECESSARY TRANSPORTATION.— 9 10 (1) REQUIREMENT.—Section 1902(a)(4) of the 11 Social Security Act (42 U.S.C. 1396a(a)(4)) is 12 amended-13 (A) by striking "and including provision for utilization" and inserting "including provi-14 15 sion for utilization"; and 16 (B) by inserting after "supervision of ad-17 ministration of the plan" the following: ", and, 18 subject to section 1903(i), including a specifica-19 tion that the single State agency described in 20 paragraph (5) will ensure necessary transpor-21 tation for beneficiaries under the State plan to 22 and from providers and a description of the 23 methods that such agency will use to ensure such 24 transportation".

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

1	(3) LIMITATION ON FEDERAL FINANCIAL PAR-
2	TICIPATION.—Section 1903(i) of the Social Security
3	Act (42 U.S.C. $1396b(i)$ ) is amended by inserting
4	after paragraph (8) the following new paragraph:
5	"(9) with respect to any amount expended for
6	non-emergency transportation authorized under sec-
7	tion 1902(a)(4), unless the State plan provides for the
8	methods and procedures required under section
9	1902(a)(30)(A); or".
10	(4) EFFECTIVE DATE.—The amendments made
11	by this subsection shall take effect on the date of the
12	enactment of this Act and shall apply to transpor-
13	tation furnished on or after such date.
14	(b) Medicaid Program Integrity Measures Re-
15	LATED TO COVERAGE OF NONEMERGENCY MEDICAL TRANS-
16	PORTATION.—
17	(1) GAO STUDY.—Not later than two years after
18	the date of the enactment of this Act, the Comptroller
19	General of the United States shall conduct a study,
20	and submit to Congress, a report on coverage under
21	the Medicaid program under title XIX of the Social
22	Security Act of nonemergency transportation to medi-
23	cally necessary services. Such study shall take into ac-
24	count the 2009 report of the Office of the Inspector
25	General of the Department of Health and Human

1	Services, titled "Fraud and Abuse Safeguards for
2	Medicaid Nonemergency Medical Transportation"
3	(OEI-06-07-003200). Such report shall include the
4	following:
5	(A) An examination of the 50 States and
6	the District of Columbia to identify safeguards to
7	prevent and detect fraud and abuse with respect
8	to coverage under the Medicaid program of non-
9	emergency transportation to medically necessary
10	services.
11	(B) An examination of transportation bro-
12	kers to identify the range of safeguards against
13	such fraud and abuse to prevent improper pay-
14	ments for such transportation.
15	(C) Identification of the numbers, types,
16	and outcomes of instances of fraud and abuse,
17	with respect to coverage under the Medicaid pro-
18	gram of such transportation, that State Medicaid
19	Fraud Control Units have investigated in recent
20	years.
21	(D) Identification of commonalities or
22	trends in program integrity, with respect to such
23	coverage, to inform risk management strategies
24	of States and the Centers for Medicare & Med-
25	icaid Services.

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1	(2) Stakeholder working group.—
2	(A) IN GENERAL.—Not later than one year
3	after the date of the enactment of this Act, the
4	Secretary of Health and Human Services,
5	through the Centers for Medicare & Medicaid
6	Services, shall convene a series of meetings to ob-
7	tain input from appropriate stakeholders to fa-
8	cilitate discussion and shared learning about the
9	leading practices for improving Medicaid pro-
10	gram integrity, with respect to coverage of non-
11	emergency transportation to medically necessary
12	services.
13	(B) TOPICS.—The meetings convened under
14	subparagraph (A) shall—
15	(i) focus on ongoing challenges to Med-
16	icaid program integrity as well as leading
17	practices to address such challenges; and
18	(ii) address specific challenges raised
19	by stakeholders involved in coverage under
20	the Medicaid program of nonemergency
21	transportation to medically necessary serv-
22	ices, including unique considerations for
23	specific groups of Medicaid beneficiaries
24	meriting particular attention, such as
25	American Indians and tribal land issues or

1accommodations for individuals with dis-2abilities.

(C)3 Stakeholders.—Stakeholders de-4 scribed in subparagraph (A) shall include indi-5 viduals from State Medicaid programs, brokers 6 for nonemergency transportation to medically 7 necessary services that meet the criteria described 8 in section 1902(a)(70)(B) of the Social Security 9 Act (42 U.S.C. 1396a(a)(70)(B)), providers (in-10 cluding transportation network companies). 11 Medicaid patient advocates, and such other indi-12 viduals specified by the Secretary.

13 GUIDANCE REVIEW.—Not later than 18 (3)14 months after the date of the enactment of this Act, the 15 Secretary of Health and Human Services, through the 16 Centers for Medicare & Medicaid Services, shall assess 17 guidance issued to States by the Centers for Medicare 18 & Medicaid Services relating to Federal requirements 19 for nonemergency transportation to medically nec-20 essary services under the Medicaid program under 21 title XIX of the Social Security Act and update such 22 guidance as necessary to ensure States have appro-23 priate and current guidance in designing and admin-24 istering coverage under the Medicaid program of non-

1	emergency transportation to medically necessary serv-
2	ices.
3	(4) NEMT TRANSPORTATION PROVIDER AND
4	DRIVER REQUIREMENTS.—
5	(A) STATE PLAN REQUIREMENT.—Section
6	1902(a) of the Social Security Act (42 U.S.C.
7	1396a(a)) is amended—
8	(i) by striking "and" at the end of
9	paragraph (85);
10	(ii) by striking the period at the end of
11	paragraph (86) and inserting "; and"; and
12	(iii) by inserting after paragraph (86)
13	the following new paragraph:
14	"(87) provide for a mechanism, which may in-
15	clude attestation, that ensures that, with respect to
16	any provider (including a transportation network
17	company) or individual driver of nonemergency
18	transportation to medically necessary services receiv-
19	ing payments under such plan (but excluding any
20	public transit authority), at a minimum—
21	"(A) each such provider and individual
22	driver is not excluded from participation in any
23	Federal health care program (as defined in sec-
24	tion $1128B(f)$ ) and is not listed on the exclusion

1	list of the Inspector General of the Department
2	of Health and Human Services;
3	``(B) each such individual driver has a
4	valid driver's license;
5	``(C) each such provider has in place a
6	process to address any violation of a State drug
7	law; and
8	"(D) each such provider has in place a
9	process to disclose to the State Medicaid program
10	the driving history, including any traffic viola-
11	tions, of each such individual driver employed by
12	such provider, including any traffic violations.".
13	(B) EFFECTIVE DATE.—
14	(i) In general.—Except as provided
15	in clause (ii), the amendments made by
16	subparagraph (A) $shall$ take effect on the
17	date of the enactment of this Act and shall
18	apply to services furnished on or after the
19	date that is one year after the date of the
20	enactment of this Act.
21	(ii) Exception if state legislation
22	REQUIRED.—In the case of a State plan for
23	medical assistance under title XIX of the
24	Social Security Act which the Secretary of
25	Health and Human Services determines re-

1	quires State legislation (other than legisla-
2	tion appropriating funds) in order for the
3	plan to meet the additional requirement im-
4	posed by the amendments made by subpara-
5	graph (A), the State plan shall not be re-
6	garded as failing to comply with the re-
7	quirements of such title solely on the basis
8	of its failure to meet this additional re-
9	quirement before the first day of the first
10	calendar quarter beginning after the close of
11	the first regular session of the State legisla-
12	ture that begins after the date of the enact-
13	ment of this Act. For purposes of the pre-
14	vious sentence, in the case of a State that
15	has a 2-year legislative session, each year of
16	such session shall be deemed to be a separate
17	regular session of the State legislature.
18	(5) ANALYSIS OF T-MSIS DATA.—Not later than
19	one year after the date of the enactment of this Act,
20	the Secretary of Health and Human Services, through
21	the Centers for Medicare & Medicaid Services, shall
22	analyze, and submit to Congress a report on, the na-
23	tion-wide data set under the Transformed Medicaid
24	Statistical Information System to identify rec-
25	ommendations relating to coverage under the Med-

- 1 icaid program under title XIX of the Social Security
- 2 Act of nonemergency transportation to medically nec-
- 3 essary services.