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## State of Minnesota

## HOUSE OF REPRESENTATIVES

A bill for an act

relating to human services; establishing the Nonemergency Medical

EIGHTY-SEVENTH SESSION

н. **F.** No. **2866** 

 $03/14/2012 \quad \text{Authored by McDonald, Norton, Barrett, Abeler and Gottwalt}$ The bill was read for the first time and referred to the Committee on Health and Human Services Finance

1.3	Transportation Advisory Committee; requiring the commissioner of human
1.4	services to establish a single administrative structure and delivery system
1.5 1.6	for nonemergency medical transportation, a statewide enrollee assessment process, and measures to evaluate the performance and cost-effectiveness
1.7	of nonemergency medical transportation services; providing appointments;
1.8	amending Minnesota Statutes 2010, section 256B.0625, by adding subdivisions.
1.9	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.10	Section 1. Minnesota Statutes 2010, section 256B.0625, is amended by adding a
1.11	subdivision to read:
1.12	Subd. 18c. Nonemergency Medical Transportation Advisory Committee. (a)
1.13	The commissioner shall establish a 17-member Nonemergency Medical Transportation
1.14	Advisory Committee. The advisory committee shall advise the commissioner on the
1.15	administration of nonemergency medical transportation covered under medical assistance.
1.16	The advisory committee shall meet at least quarterly, and may meet more frequently
1.17	as required by the commissioner. The advisory committee shall annually elect a chair
1.18	from among its members, who shall work with the commissioner or the commissioner's
1.19	designee to establish the agenda for each meeting.
1.20	(b) The Nonemergency Medical Transportation Advisory Committee shall advise
1.21	and make recommendations to the commissioner on:
1.22	(1) the development of, and periodic updates to, a policy manual for nonemergency
1.23	medical transportation services;
1.24	(2) policies and a funding source for reimbursing no-load miles;
1.25	(3) policies to prevent waste, fraud, and abuse, and to improve the efficiency of the
1.26	nonemergency medical transportation system;

Section 1. 1

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	(4) other issues identified in the 2011 evaluation report by the Office of the
	Legislative Auditor on medical nonemergency transportation; and
	(5) other aspects of the nonemergency medical transportation system, as requested
	by the commissioner.
	(c) The Nonemergency Medical Transportation Advisory Committee shall
	coordinate its activities with the Minnesota Council on Transportation Access established
	under section 174.285.
	Sec. 2. Minnesota Statutes 2010, section 256B.0625, is amended by adding a
	subdivision to read:
	Subd. 18d. Advisory committee members. (a) The Nonemergency Medical
	Transportation Advisory Committee consists of:
	(1) two voting members who represent counties, at least one of whom must represent
	a county or counties other than Anoka, Carver, Chisago, Dakota, Hennepin, Isanti,
	Ramsey, Scott, Sherburne, Washington, and Wright;
	(2) four voting members who represent consumers, including persons with physical
-	and developmental disabilities, persons with mental illness, seniors, children, and
	low-income consumers;
	(3) four voting members who represent providers that deliver nonemergency medical
1	transportation services to medical assistance enrollees;
	(4) two voting members of the house of representatives, one from the majority party
	and one from the minority party, appointed by the speaker, and two voting members from
	the senate, one from the majority party and one from the minority party, appointed by the
	Subcommittee on Committees of the Committee on Rules and Administration;
	(5) one voting member who represents demonstration providers, as defined in
	section 256B.69, subdivision 2;
	(6) one voting member who represents an organization that contracts with state or
	local governments to coordinate transportation services for medical assistance enrollees;
	<u>and</u>
	(7) the commissioner of transportation or the commissioner's designee, who shall
	serve as a voting member.
	(b) Members of the advisory committee shall not be employed by the Department
	of Human Services.

Sec. 3. 2

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	Subd. 18e. Advisory committee terms; compensation; expiration. (a) The terms
	of members of the Nonemergency Medical Transportation Advisory Committee shall
	expire December 1, 2014. Members shall receive reimbursement only for expenses.
	(b) The Nonemergency Medical Transportation Advisory Committee shall expire
	<u>December 1, 2014.</u>
	Sec. 4. Minnesota Statutes 2010, section 256B.0625, is amended by adding a
	subdivision to read:
	Subd. 18f. Single administrative structure and delivery system. (a) The
•	commissioner shall implement a single administrative structure and delivery system for
1	nonemergency medical transportation beginning July 1, 2013. The single administrative
:	structure and delivery system must:
	(1) eliminate the distinction between access transportation services and special
1	transportation services;
	(2) provide flexibility in service delivery and recognize that clients fall along a
(	continuum of needs and resources; and
	(3) maintain a strong regulatory structure for current special transportation service
1	providers, and expand its application to include taxis and other common carriers, while
(	excluding volunteer, mass transit, and personal mileage transportation.
	(b) The commissioner shall present to the legislature by January 15, 2013, any draft
1	legislation necessary to implement the single administrative structure and delivery system
_	for nonemergency medical transportation.
	(c) In developing the single administrative structure and delivery system and
	the draft legislation, the commissioner shall consult with the Nonemergency Medical
	Transportation Advisory Committee.
	Sec. 5. Minnesota Statutes 2010, section 256B.0625, is amended by adding a
	subdivision to read:
	Subd. 18g. Enrollee assessment process. (a) The commissioner, in consultation
	with the Nonemergency Medical Transportation Advisory Committee, shall develop and
	implement by July 1, 2013, a comprehensive, statewide, standard assessment process
	for medical assistance enrollees seeking nonemergency medical transportation services.
	The assessment process must identify a client's level of needs, abilities, and resources,
	and match the client with the mode of transportation in the client's service area that best
	meets those needs.
	(b) The assessment process must:

Sec. 5. 3

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l.1	(1) address mental health diagnoses when determining the most appropriate mode of
1.2	transportation;
1.3	(2) base decisions on clearly defined criteria that are available to clients, providers,
1.4	and counties;
1.5	(3) be standardized across the state and be aligned with other similar existing
1.6	processes;
1.7	(4) allow for extended periods of eligibility for certain types of nonemergency
1.8	transportation when a client's condition is unlikely to change; and
1.9	(5) increase the use of public transportation when appropriate and cost-effective,
1.10	including offering monthly bus passes to clients.
l.11	Sec. 6. Minnesota Statutes 2010, section 256B.0625, is amended by adding a
1.12	subdivision to read:
1.13	Subd. 18h. Use of standardized measures. The commissioner, in consultation
1.14	with the Nonemergency Medical Transportation Advisory Committee, shall establish
1.15	performance measures to assess the cost-effectiveness and quality of nonemergency
1.16	medical transportation. In establishing these measures, the commissioner shall consider
1.17	the measures identified in the January 2012 Department of Human Services report to
1.18	the legislature on nonemergency medical transportation. Beginning in calendar year
1.19	2013, the commissioner shall annually collect data on these performance measures from
1.20	providers, brokers, and level of need assessors, audit and analyze these data, and make
1.21	the results of this audit and analysis available to the public on the agency's Web site. The
1.22	commissioner shall periodically supplement this information with the results of consumer
1.23	surveys of the quality of services, and shall make these survey findings available to the
1.24	public on the agency's Web site

Sec. 6. 4