



**PUBLIC PROVIDER
GROUND EMERGENCY MEDICAL
TRANSPORT (PP-GEMT)
INTERGOVERNMENTAL TRANSFER
(IGT) PROGRAM**

BACKGROUND

- » In accordance with Assembly Bill (AB) 1705 (Chapter 544, Statutes of 2019) the PP-GEMT IGT program will be implemented on January 1, 2023.
- » Upon implementation, public providers of ground emergency medical transport, as defined in Welfare and Institutions (W&I) Code section 14105.945, will transition out of the GEMT Quality Assurance Fee (QAF) program and GEMT Certified Public Expenditure (CPE) program and into the PP-GEMT IGT program.
- » Through the PP-GEMT IGT program, eligible public providers will receive supplemental reimbursement through an add-on payment.

ELIGIBILITY

W&I Code §§ 14105.945

- » A provider must continually meet all of the following requirements during the entirety of any Medi-Cal managed care rating period following implementation:
 - » Provides emergency medical transports to Medi-Cal beneficiaries,
 - » Is enrolled as a Medi-Cal provider for the period being claimed, and
 - » Is owned or operated by the state, a city, county, city and county, fire protection district, special district, community services district, health care district, or a federally recognized Indian tribe.
 - » For more information, visit [Assembly Bill 1705 Medi-Cal: emergency medical transportation services](#)

OVERVIEW OF STEPS

- » Close Out Steps (of current QAF program)
- » Confirming Funding Entities
- » IGT Funding Collection
- » Reimbursement (FFS and MC delivery system requirements)
- » Provider Payment

GEMT QAF PROGRAM CLOSEOUT

- » Once the PP-GEMT IGT program is implemented, public providers will no longer be eligible to participate in the GEMT QAF program.
- » Public providers will no longer be assessed the GEMT QAF prospectively and will not be eligible to receive the GEMT QAF add-on, effective January 1, 2023.

GEMT QAF PROGRAM CLOSEOUT

- » Public Providers will be responsible for submitting transport data and QAF payments for dates of service through December 31, 2022.
- » Below are the last two quarters Public Providers will participate in the GEMT QAF program, including the transport and QAF payment due dates:

Quarter	Transport Data Due Date	QAF Payment Due Date
Quarter 3: Dates of Service July 1, 2022 through September 30, 2022	11/14/2022	1/1/2023
Quarter 4: Dates of Service October 1, 2022 through December 31, 2022	2/14/2023	4/1/2023

ADDITIONAL GEMT QAF INFORMATION

- » For additional information on the GEMT QAF program closeout, please visit the [GEMT QAF website](#)
- » If you have any questions, please contact GEMT QAF at:
GEMTQAF@dhcs.ca.gov

GEMT CERTIFIED PUBLIC EXPENDITURE (CPE) PROGRAM CLOSEOUT

» Topics:

- » Why is the GEMT CPE program closing?
- » Final GEMT cost report
- » Interim Payments
- » Interim Settlements
- » Final Reconciliation
- » Administrative Costs
- » Resources

WHY IS THE GEMT CPE PROGRAM CLOSING?

- » Welfare and Institutions Code Section 14105.94(i) requires the GEMT CPE program become inoperative during the entirety of the Medi-Cal managed care rating period in which the AB 1705 Public Provider Ground Emergency Medical Transportation (PP-GEMT) Intergovernmental Transfer (IGT) program is implemented.
- » To the extent the AB 1705 PP-GEMT Program is implemented on January 1, 2023, the GEMT CPE program will sunset on December 31, 2022.
 - » Close out activities for the GEMT CPE program, such as interim and final settlements, will continue after the GEMT CPE program's sunset date.

FINAL GEMT CPE COST REPORT

- » The final GEMT CPE cost report, which will cover dates of service July 1, 2022, through December 31, 2022, will be due by May 31, 2023, (5 months after the close of the date of service period).

INTERIM PAYMENTS

- » Upon receipt of the GEMT CPE cost reports, interim payments for the final GEMT CPE cost reporting period (July 1, 2022 through December 31, 2022) are estimated to begin in July 2023 through September 2023.
 - » Per State Plan Amendment 09-024, GEMT CPE program's interim supplemental payments for each provider is based on the provider's completed annual cost report. DHCS will make adjustments to the as-filed cost report based on the results of most recently retrieved California Medicaid Management Information Systems (CA-MMIS) report.

INTERIM SETTLEMENTS

- » Per State Plan Amendment 09-024, within 2 years of receipt of the as-filed cost report, DHCS will conduct interim settlements.
 - » For the final GEMT CPE cost reporting period of July 1, 2022, through December 31, 2022, interim settlements are estimated to occur July 2025 through September 2025.
- » During interim settlements, DHCS will make adjustments to the as-filed cost report based on the reconciliation results of the most recently retrieved CA-MMIS report and determine any overpayments or underpayments.
 - » Providers will be required to remit overpaid funds to DHCS within 60 days of receipt of the demand letter, if applicable.

FINAL RECONCILIATION

- » Per State Plan Amendment 09-024, DHCS will settle the provider's cost report as audited within 3 years of the postmark date of the GEMT CPE cost report and perform final settlements.
 - » For the final GEMT CPE cost reporting period of July 1, 2022 through December 31, 2022, final audits are estimated to occur through May 31, 2026, (subject to change depending on the submission dates of the GEMT CPE cost reports).
- » Based on the audited average cost per transport and updated CA-MMIS reports, DHCS will compute the final settlement amount and make adjustments for any overpayments or underpayments.
 - » Providers will be required to remit overpaid funds to DHCS within 60 days of receipt of the demand letter, if applicable.

ADMINISTRATIVE COSTS

- » In order to participate in the GEMT CPE program, providers must agree to reimburse DHCS for administrative costs associated with overseeing the program. The provider's allocated share of DHCS administrative costs will be collected by the host entity, Sacramento Metropolitan Fire District.
- » Welfare and Institutions Code 14105.94(i) specifies DHCS may conduct any necessary and remaining administrative duties related to any time period during which the GEMT CPE program remained operative, even after it becomes inoperative, and may receive all compensation for those activities until paid in full.
- » Sacramento Metropolitan Fire District will continue to reimburse DHCS for administrative costs.
 - » Sacramento Metropolitan Fire District will reach out to each participating provider to recoup that provider's portion of the administrative costs.

WANT MORE GEMT CPE INFORMATION?

- » Please visit DHCS' webpage for the [GEMT CPE program](#)
- » Join email distribution list at [List Subscription](#)
- » Email questions to GEMT@dhcs.ca.gov
- » Email administrative cost questions to GEMT@metrofire.ca.gov

PARTICIPATING IN PP-GEMT IGT

- » Send an email to AB1705@dhcs.ca.gov with information below by 08/01/2022.
 - » Legal name of participating funding entity
 - » All applicable email contacts (including titles)
 - » Any National Provider Identifiers (NPI) associated with your Funding Entity
- » DHCS will use the information provided to calculate an estimated non-federal share which will be included on a Letter of Intent (LOI) and sent back to the funding entity for completion.

IGT FUNDING & COLLECTION

- » The non-federal share of expenditures for the PP-GEMT IGT program will consist of voluntary IGT funds provided by funding entities.
- » The non-federal share costs of implementing the PP-GEMT IGT program will be supported by IGT contributions from participating providers to DHCS.
 - » A 10% administrative fee retained by DHCS will be assessed and included in the collection amount for each entity in order to support health care coverage costs and costs associated with administering the program.

INSUFFICIENT IGT

- » In the event that DHCS determines that the projected amount of voluntary contributions is not sufficient to support implementation of the Program, the Program would end.
- » The PP-GEMT IGT Program would cease to be operative on the first day of the Medi-Cal managed care rating period beginning on or after the date of such determination.
- » Public Providers would revert back to reimbursement under existing programs.

ADD-ON AMOUNT

- » Eligible ground emergency medical transport public providers will receive an add-on reimbursement to their Medi-Cal fee-for-service (FFS) payment schedule.
- » DHCS developed the add-on increase based on the difference between:
 - » The weighted average reimbursement paid pursuant to the applicable base Medi-Cal FFS payment fee schedule for an emergency medical transport, and
 - » The weighted average cost directly associated with providing a Medi-Cal emergency medical transport under the Medi-Cal program by an eligible provider.
- » The average cost data was drawn from the most recently audited cost reports, which is the FY 2017-18 audited cost reports.

ADD-ON AMOUNT

Procedure Code	Procedure Code Description	Current Fee Schedule Rate*	Medi-Cal PP-GEMT IGT Add-on	Resulting Payment Amount
A0225	NEONATAL EMERGENCY TRANSPORT	\$179.92	\$946.92	\$1126.84
A0427	ALS1-EMERGENCY	\$118.20	\$946.92	\$1065.12
A0429	BLS-EMERGENCY	\$118.20	\$946.92	\$1065.12
A0433	ALS 2	\$118.20	\$946.92	\$1065.12
A0434	SPECIALTY CARE TRANSPORT	\$118.20	\$946.92	\$1065.12

- These are the base rate associated with these codes, but are subject to further adjustments pursuant to the State Plan

Benefit Of PP-GEMT IGT Program

- » Per transport, the total reimbursement under the PP-GEMT IGT Program is expected to be higher than what was received historically under existing GEMT programs.
 - » The proposed add-on for CY 2023 is \$946.92 per transport.
- » The new Program will apply to both FFS and managed care providers.

Collection Process

1. Invoice
2. IGT Certification Form
3. Payment Request Memo

INVOICING

- » DHCS will send IGT invoice to each funding entity 45 calendar days prior to the collection due date.
- » For convenience purposes, DHCS intends to send one combined invoice for MC and FFS together, and collect one combined payment per entity.

TIMELINE

Invoices/ Certification Form	MC & FFS Collection Quarter	FFS Service Period	MC & FFS Collection Date	MC Capitation Month	MC PAYMENT (CASH) MONTH
November/ December 2022	Jan-March 2023	Jan-March 2023	1/15/2023	Jan 2023 Feb 2023 Mar 2023	Feb 2023 Mar 2023 Apr 2023
February/ March 2023	April-June 2023	April-June 2023	4/15/2023	Apr 2023 May 2023 Jun 2023	May 2023 Jun 2023 Jul 2023
May/June 2023	July-Sept 2023	July-Sept 2023	7/15/2023	Jul 2023 Aug 2023 Sep 2023	Aug 2023 Sep 2023 Oct 2023
August/ September 2023	Oct-Dec 2023	Oct-Dec 2023	10/15/2023	Oct 2023 Nov 2023 Dec 2023	Nov 2023 Dec 2023 Jan 2024

IGT CERTIFICATION

- » The IGT Certification will be sent to funding entities along with the invoice.
- » This document certifies that the Public Entity is making this IGT to DHCS as a voluntary contribution to the non-federal share of Medi-Cal expenditures for purposes of Assembly Bill 1705 pursuant to Section 14105.945 of the W&I, relating to Medi-Cal.
- » The IGT certification will need to be completed and returned to DHCS two weeks prior to the collection due date.

PAYMENT REQUEST

- » Upon DHCS receiving your signed IGT certification, you will be emailed a Payment Request Memo.
- » This memo provides instructions as to where you can submit payment.
- » You may send a single payment for both the managed care and fee for service amounts due.

REIMBURSEMENT

» Fee-For-Service Delivery System:

- » The PP-GEMT IGT add-on will be provided on a per-transport basis at the time the providers receive reimbursement for the base transport through the Medi-Cal Fiscal Intermediary.

» Managed Care Delivery System:

- » MCPs are required to reimburse non-contracted providers of emergency services at the fee-for-service (FFS) rate including any applicable FFS “add-on amount” (i.e., “Rogers Rates”).
- » In managed care, the add-on will be built into managed care plans' rates based on the projected number of applicable trips for a given rating period.

MANAGED CARE PROVIDER PAYMENT

- » DHCS Develops MCP Rates
 - » MC PP-GEMT IGT add-on is built into MCP rates
- » MCP Payments
 - » MC payments are paid out on a capitation basis to MCPs
- » Provider Payments
 - » MCPs pay non-contracted GEMT providers at the Rogers Rates

RESOURCES

- » General Mailbox
 - » AB1705@DHCS.CA.GOV
- » Webpage
 - » [PPGEMTIGT](#)