

**Department Of Human Services**

**Medical Assistance  
Transportation Program**

**Request for Information (RFI)**



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**Date: October 21, 2015**

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## **PART 1: GENERAL INFORMATION**

### **1.1 Purpose of this Request for Information**

The Pennsylvania Department of Human Services (“Department” or “DHS”) issues this Request for Information (RFI) to seek input for improving Pennsylvania’s Medical Assistance Transportation Program (MATP). By soliciting the knowledge of stakeholders and industry leaders from Pennsylvania and throughout the United States, the Department seeks to broaden its perspectives regarding potential strategies and solutions to enhance efficiencies and management of non-emergency medical transportation (NEMT) services for Medical Assistance (“MA”) consumers.

The Department is very interested in gathering as much information as possible to help improve our understanding, to implement solutions that work best for MA consumers, and to assist us in the development of any such solutions. We welcome and encourage comments from stakeholders, industry leaders, and vendors to help better inform the Commonwealth.

### **1.2 RFI Timeline**

<b>Event</b>	<b>Date</b>
<b>Release RFI</b>	<b>October 21, 2015</b>
<b>RFI Responses Due</b>	<b>November 20, 2015</b>

The Department is requesting that all responses to this RFI be submitted by close of business on the due date. Please submit responses electronically to [RA-PWHCRFIResponses@pa.gov](mailto:RA-PWHCRFIResponses@pa.gov).

## 1.3 Disclaimers

This RFI is issued for information and planning purposes only and does not constitute a solicitation for future business, an invitation to submit bids or proposals or any other type of current or future procurement or contractual action, and is only intended to gather information and input. The Department will not award a contract or an agreement on the basis of this RFI or otherwise pay for any of the information received.

The Department may use the information gathered through this process in the development of future documents; however, the Department does not guarantee that this will occur.

Respondents are solely responsible for all expenses associated with responding to this RFI.

The Department will not return responses to this RFI. Respondents will not be notified of the result of the Department's review, nor will they be provided copies of it. If the Department issues a procurement document, no vendor will be selected, pre-qualified, or exempted based on its participation in this RFI process.

Respondents should be aware that the responses to this RFI will be public information and that no claims of confidentiality will be honored. The Department is not requesting, and does not require, confidential, proprietary information, or other competitively sensitive information to be included as part of the RFI submission. Ownership of all data, material, and documentation originated, prepared, and provided to the Department during this RFI process will belong exclusively to the Department.

## PART 2: BACKGROUND

### 2.1 MATP Overview

The primary mission of MATP is to provide efficient and cost effective transportation assistance to MA consumers to and from MA compensable services. Recently, the Department received feedback from various stakeholders (consumers, health plans, medical providers, advocates) on the MATP that generally recommended the need for a more responsive program for MA consumers with better service delivery. With the recent expansion of MA, and expectations that medical utilization will increase, the Department felt it was an appropriate time to receive further perspectives on ways to enhance the management and broaden the scope of the MATP. As such, we are seeking input on possible strategies to meet the following objectives:

- To promote NEMT as a key element of a coordinated care strategy in collaboration with our health plans
- To maximize cost effective purchasing of transportation services
- To increase consumer access to needed medical services, especially in rural and underserved areas of the Commonwealth
- To improve efficiency in the delivery of NEMT services

#### **Current Service Delivery System**

##### MATP

DHS administers the joint state/federal MA (Medicaid) program that purchases health care for more than 2.3 million Pennsylvania residents, including the enrollment of MA providers who administer their medical care. Physical and behavioral health services are coordinated and delivered through the Department's HealthChoices managed care and Fee-For-Services (FFS) programs. Through these programs, DHS aims to provide MA consumers with quality medical care and timely access to all appropriate physical health, mental health, and drug and alcohol services.

In support of quality care and timely access to medical services, DHS offers, via the MATP, non-emergency medical transportation to MA consumers to any MA compensable service for the purpose of receiving treatment or medical evaluation, or purchasing prescription drugs or medical equipment.

DHS provides funding to administer MATP through a public assistance block grant that is managed via agreements with 65 county governments and 2 prime contractors (Grantees). The services to be provided entail the following:

- Verifying consumer eligibility for the program
- Outreach and education
- Operating a call center/telephone line
- Authorizing transportation services, scheduling, and dispatching trips
- Determining the least costly and most appropriate mode of transportation based on an individual's physical and cognitive needs
- Developing and managing a network of transportation providers
- Maintaining a complaint and appeal process
- Preventing and reporting provider, sub-contractor, and recipient fraud, abuse, and waste
- Collecting, analyzing, and reporting cost and trip data and information

Grantees generally use the following transportation modes in providing services:

- Public transit or fixed route transportation
- Consumer reimbursement for private vehicle mileage use
- On-demand, paratransit trips

As of September 2015, the MATP served 131,566 MA consumers and provided 8 million transportation trips statewide.

Additional information about the MATP and the HealthChoices program may be found at the following locations:

- <http://matp.pa.gov/>
- <http://www.dhs.state.pa.us/foradults/healthcaremedicalassistance/healthchoicesgeneralinformation/index.htm>
- <http://www.dhs.state.pa.us/publications/healthchoicespublications/index.htm>
- <http://www.healthchoicespa.com/>

### Community Transportation

Whenever possible, the MATP utilizes local community transportation programs in the delivery of NEMT. Pennsylvania's Community Transportation Programs are unique. In the early 1980s, the Commonwealth, through the Department of Transportation (PennDOT), provided over \$13 million in seed money to plan and implement community transportation programs that included advance reservation, door-to-door, and accessible transportation services in 65 of the

Commonwealth's 67 counties. Allegheny County and Philadelphia were excluded because of their extensive fixed route systems.

The transportation programs were designed to be open to the general public, with an established fare structure that would generate sufficient revenue to meet the transportation systems' operating expenses. The general public and human services programs, including MATP, purchase transportation services based on the general public fare structure of the community transportation providers. The concept of the programs was that the fare structure would be used to ensure that the transportation costs were fairly allocated to each passenger trip and thus to each funding stream, overcoming some common coordination barriers.

In many cases, PennDOT community transportation providers manage MATP on behalf of the county. The community transportation providers have developed a system with the appropriate capacity—vehicle fleet and administrative staff—to address DHS and PennDOT program needs as well as local transportation needs. Their budgets depend on revenue received for all passenger trips, including MATP trips, and on MATP reimbursement for special administrative expenses. This long-standing configuration introduces challenges and opportunities unique to Pennsylvania in considering new approaches to MATP service delivery.

DHS supports this long standing relationship and sees it as vital part in delivering cost effective service delivery.

### **Department Research and Analysis**

Over the past few years, the Department has researched other state programs and subject matter literature to better understand approaches to providing NEMT services. In addition, we have conducted multiple analyses of our own MATP to determine the effectiveness of the current system. The Department has identified several possible opportunities that we would like to have addressed:

**Regional Access to Services:** With 72% of Pennsylvania’s counties considered rural, often with scarce medical resources, the MATP has the challenge of providing access to a sufficient range of providers to afford MA consumers the opportunity to obtain medical services from providers of their choice. While a significant portion of MA consumers can access compensable MA services with local providers close to their homes, many, particularly those with complex medical needs, may need to travel longer distances to get treatment within a reasonable timeframe. To meet this need, the Department is looking for approaches that will address the following:

- The development of transportation resources beyond the boundaries of a single county
- MA consumers getting to regionally-based health systems and larger health care markets within the state
- The efficient use of existing transportation structures and resources that will ensure coordination between MATP and other community transportation programs
- Performance standards for transportation providers that measures quality, particularly in the areas of timeliness

**Coordination of Care:** NEMT trips to medical appointments assists the Department in lowering the cost of health care by avoiding costly ambulance trips or emergency room visits. As we broaden the value of the MATP as a key link in the coordination of care for MA consumers, transportation managers must be as flexible and adaptable as possible, and have the ability to coordinate services with multiple health plans and human services agencies. With more medical care provided on an outpatient basis, and an increasing number of people with chronic conditions, many more MA consumers will require specialized transportation that will take them to more intensive and recurring treatment and services. The Department is interested in ideas that will develop the following:

- Effective methods for working with programs whose focus are broader than the delivery of transportation and assisting MA consumers in new ways to overcome personal barriers
- Effective working relationships with health plans towards coordinating specialized transportation for MA consumers, as necessary
- Working with local and regional health care providers to reduce the incidences of missed medical appointments

**Effective Purchasing of Services:** As we seek to enhance the management of the program, the Department is interested in developing financial incentives that encourage Grantees to realize cost effective results in the delivery of NEMT. These incentives would promote the efficient use of public dollars through implementing applicable utilization controls, methods to assess the least costly mode of transportation, supporting utilization of and coordination with existing publicly-funded transportation structures, and detecting and preventing fraud and abuse. The Department is interested in methodologies that will address the following:

- Achieving greater predictability in annual program costs
- Evaluating the cost of service through the handling of various transportation modes as a means to manage costs
- Identifying and addressing fraud, abuse, and waste as one of the means to stabilize costs

## 2.2 MATP Instructions and Requirements

Please view the MATP Instructions and Requirements:

<http://matp.pa.gov/>

Upon entering the website, please select Program Rules and select the first document listed.

### **PART 3: RFI SUBMISSION FORMAT**

Through this RFI, the Department is soliciting information and comments regarding options for improving Pennsylvania's MATP. All interested stakeholders are asked to respond in writing to this RFI, per the items outlined below.

#### **3.1 Response Submission**

Please prepare responses simply and economically, providing straightforward and concise language and descriptions. All responses should be produced in 12-point font or larger. Please limit responses to no more than 10 pages. The pages may be double-sided. The cover letter does not count as a page in the response submission. Please refrain from sending marketing materials to the Department.

#### **3.2 Cover Letter**

Please include a cover letter with the following information:

1. An introduction to the respondent's organization, background, and interest in Pennsylvania's MATP.
2. General information about the respondent or respondent's organization: address, point of contact for this RFI with telephone and fax numbers and e-mail address.

#### **3.3 Conceptual Solutions and Strategies Response/Demonstrations**

The following provides a suggested structure for a response to this RFI. This structure is intended to minimize the effort required to develop and analyze submitted responses.

Please address the following:

1. A vision for improving Pennsylvania's MATP program while supporting DHS' goals of improving services and quality and reducing program costs. Include any information that the Department may find valuable.
2. RFI Discussion Areas & Questions – respondents may respond to any or all of the discussion areas in Part 4.
3. Respondents may also provide ideas for improving the MATP not addressed in Part 4

## PART 4: RFI DISCUSSION AREAS & QUESTIONS

The Department requests that interested stakeholders send responses to all or any of the questions and topics detailed below:

<b>Overall MATP Structure</b>	
1.	Please discuss any recommended changes that may help increase the efficiency, improve quality, and enhance the value of the MATP.
2.	Please outline thoughts on the current MATP structure, as a county-based program, as compared to other service delivery options such as administration by a managed care organization (MCO) or transportation broker.
<b>Role in the coordination of care</b>	
3.	Please discuss any suggestions that may help DHS use non-emergency medical transportation to improve care coordination for MA consumers in collaboration with physical and behavioral health plans. Please include opportunities to improve relationships, information exchanges, shared planning, decision making, and consumer engagement opportunities.
<b>Community Transportation and Network Development</b>	
4.	Please discuss suggestions for developing transportation provider networks, particularly where transportation resources are scarce. Include strategies for incorporating already coordinated community transportation programs and the existing public transit infrastructure to ensure effective service delivery.
5.	Please discuss any recommendations towards the development of transportation service areas that reconcile with DHS' provider network and service access standards (30 minutes urban and 60/90 minute rural) and at times beyond.
6.	Please discuss any recommendations on developing performance standards for transportation providers, in the areas of timeliness, MA consumer satisfaction, and vendor monitoring and oversight.
<b>Improving consumer access to services</b>	
7.	Please discuss any suggestions that may help DHS improve consumer access to services, especially in rural and underserved areas.
8.	Please discuss recommendations on establishing effective working relationships and coordination opportunities with regionally based health systems, especially in rural and underserved areas. Please include opportunities to improve relationships, information exchanges, and shared planning, decision making and consumer engagement opportunities.
9.	Please discuss recommendations for how non-emergency medical transportation can be used as an effective resource to reduce and manage MA consumer no-shows for medical services and other health care appointments.
<b>Cost Effective Purchasing of Transportation Services</b>	
10.	Describe recommendations for a planned approach to scheduling trips and grouping appropriate rides to provide timely pick-ups and drop-offs and to maximize the use of transportation assets and/or an organization's purchasing power to negotiate better pricing from transportation providers, especially beyond county boundaries.
11.	Describe recommendations for a planned approach to managing program costs such as through the increased use of lower cost modes such as public transportation and mileage reimbursement and reducing reliance on paratransit services.
<b>Program Integrity</b>	
12.	Please discuss any recommendations around the most effective methods to identify and address fraud, abuse, and waste as one of the means to stabilize costs with the MATP.
13.	Please discuss any recommendations on the most effective methods in verifying that an MA consumer received a transportation service and that the consumer was satisfied with the service.



<b>Payment Arrangements</b>	
14.	Please detail views on payment methodologies that can best ensure greater budget predictability, quality of services, and accountability.
15.	Please detail views on payment methodologies that can best address risk in the area of trip utilization.