

Non-Emergency Medical Transportation Advisory Council

Purpose: The Council was established by the Legislature due to concerns regarding public assistance transportation services. The state is responsible for these services, which are paid for with Minnesota Health Care Program (MHCP) funds. A Legislative Auditor report was completed that verified that problems do exist in the current system.

Membership of the Council: Scott Leitz-DHS, Marie Dotseth-DHS, Dave Greeman-DHS, Sarah Lenz-Minnesota Department of Transportation, Noel Shugart-MN Department of Transportation, Daryl Bessler and Peg Heglund-Association of MN Counties, Daniel Papin-Metro Inter-County Assoc., Diogo Reis-The MN State Council on Disability, Lucas Kunach-MN Consortium of Citizens with Disabilities, Lars Kuehnow-ARC of Minnesota, Sue Abderholden-National Alliance on Mental Illness (NAMI), Dalaine Remes-Legal Aid, Mike Pinske-R-80 Medical Transportation Coalition, Barb Platten-Medical Transportation Management, Troy Beam-SmartLink, Dan Hirsch-Discover Ride, Michael Weidner-MN Paratransit Assoc, Representative Kim Norton-29B (Olmsted County-Rochester), , Senator Sharen-23-(Blue Earth, Nicollet, Sibley Counties-North Mankato), Representative McDonald 19B (Hennepin/Wright Counties) Representative Barrett 17B (Chisago County-North Branch) Senator Hoffman 10 (Becker, Ottertail, Wadena Counties). Shannon Kojasoy-DHS

Goal: The Council is established to assist the Commissioner of Human Services in developing a single administrative structure for providing non-emergency medical transportation services. To accomplish this, the following issues will be addressed:

1. Currently, responsibilities for implementation are shared by the Counties and the DHS. Should this continue?
2. Monitoring of performance needs to be improved. What should this look like?
3. There is a need for a state-wide complaint system for MHCP recipients (including those that utilize Special Transportation Services).
4. Data collection and standardized billing need to be improved.
5. Allowance for public input from interested persons must be considered.
6. Eligibility for Specialized Transportation is costly and should be re-evaluated.
7. Reimbursement for Volunteer Drivers for No-Load miles is no longer available. Alternatives need to be vetted with recommendations made.
8. Criteria need to be developed to maximize the use of Public Transportation by recipients who could safely access and use those options.

DRAFT Recommendations:

1. Create an on-going Transportation Advisory Council.
2. Eliminate the separate ATS and STS designations for NEMT.
3. Establish an assessment process that effectively matches the needs/ resources of an MHCP enrollee with the most appropriate, least restrictive form of NEMT.
4. Establish a statewide complaint system/information resource for MHCP enrollees, transportation providers and counties.
5. Eliminate real or perceived conflicts of interest for transportation brokers.
6. Maximize the use of Public Transportation as appropriate to client needs.
7. Establish standardized measures to evaluate performance and cost-effectiveness.